

**Help for Today... Hope for Tomorrow**

# Annual Report

**For the 12 Months Ended March 31, 2014**



## **Our Mission Statement**

*To alleviate the personal and social consequences of Alzheimer's Disease and other dementias.*

## **Our Role Statement**

*The role of the Alzheimer Society of Windsor & Essex County is to collaborate with all levels of the organization and our local community in order to foster excellence in services, education and support research.*

## **Our Vision Statement**

*A world without Alzheimer's disease and other dementia.*

## **Our Core Values**

<b>C</b>	COLLABORATION
<b>A</b>	ACCOUNTABILITY
<b>R</b>	RESPECT
<b>E</b>	EXCELLENCE



*Société Alzheimer Society*  
WINDSOR - ESSEX COUNTY

2135 Richmond Street Windsor, ON N8Y 0A1  
(519) 974-2220 Fax: (519) 974-9727

There is hope with help from our friends...



"We never know how far reaching something we may think, say or do today will affect the lives of millions tomorrow." – B.J. Palmer

## 2014 Others Before Self Award

*(formerly named the Founders' Award)*

The Alzheimer Society of Windsor & Essex County is pleased to announce the Board of Directors has awarded the **2014 Others Before Self Award** to **The Daughters' Support Group**, who have been hosting a Trivia Pursuit Night fundraiser for the past 4 years in support of the Society.

## 2014 Generosity of Spirit Award

*(formerly named the Community Philanthropy Award)*

The **2014 Generosity of Spirit Award** has been awarded to **RBC Wealth Management of RBC Dominion Securities** for their efforts in raising funds through their annual golf tournament to support our local programs and services.

The awards are officially being presented at the Alzheimer Society of Windsor & Essex County's **Annual General Meeting** on Tuesday, June 17th, 2014.



# 2013-2014 Dignitaries of the Society

## Founders

*Mrs. Marilyn Brown-Skinner*

*Mr. George Sims*

## Honourary Lifetime Members

*Mr. George Sims*

*Mr. Don Fairley*

*Dr. Olga Malott*

*Ms. Lucia Eugeni*

*Dr. Ciaran Sheehan*

*Mr. Jim Pollock*

*Mrs. Janet Lord*

*Mr. Jim Donaldson*

*Mr. Bryon Gero*

*Ms. Eda Cross*

*Mr. Bob Renaud*

*Mr. Ron Pronger*

## Honourary Directors

*Mr. David Cooke*

*Mr. Ari Freed*

*The Right Honourable Herb Gray*

*Ms. Mina Grossman-Ianni*

*Mr. Justice Harry Momotiuk*

*The Honourable Howard Pawley*

*Mme. Justice Micheline Rawlins*

*Dr. Fouad Tayfour*

*Mrs. Rochelle Tepperman*

"How far you go in life depends on your being tender with the young, compassionate with the aged, sympathetic with the striving and tolerant of the weak and strong. Because someday in our life you will have been all of these." - *George Washington Carver*

## Executive Committee /Board of Directors

### **EXECUTIVE COMMITTEE**

Dr. Gaston Franklyn – Chair  
Ms. Helen Biales - Vice-Chair  
Mr. Ron Pronger – Past Chair  
Mr. Paul Boyes – Treasurer  
Ms. Pat Lewis – Secretary  
Ms. Sally Bennett Olczak – CEO – Non-Voting Member

### **DIRECTORS**

Mr. Arvind Arya  
Mr. Vincenzo Calandra  
Dr. Mitch Fields  
Mrs. Patricia McMahon  
Mr. Rob Slater  
Mr. Pat Soulliere

## Standing Committee Members

### **COMMUNITY ADVISORY COUNCIL**

Mr. Ron Pronger – **Chair – Board Past Chair**  
Dr. Gaston Franklyn – *ex officio*  
Mrs. Claudette Burgess  
Mr. Bryon Gero  
Dr. John Greenaway  
Mr. Jacques Kenny  
Mrs. Patricia McKay  
Mr. Bob Renaud  
Mr. Mike Ricketts  
Mr. Rob Slater  
Ms. Sally Bennett Olczak

### **NOMINATING & GOVERNANCE COMMITTEE**

Dr. Mitch Fields – **Chair**  
Dr. Gaston Franklyn – *ex officio*  
Ms. Helen Biales  
Mr. Barry Horrobin  
Ms. Pat Lewis  
Mrs. Patricia McMahon  
Mr. Omar Raza  
Ms. Sally Bennett Olczak

### **FINANCE / SERVICES COMMITTEE**

Mr. Paul Boyes – **Co-Chair**  
Mr. Rob Slater – **Co-Chair**  
Dr. Gaston Franklyn – *ex officio*  
Mr. Arvind Arya  
Mr. Mirza Baig  
Ms. Helen Biales  
Ms. Laura Guglietta  
Mr. Pat Soulliere  
Ms. Sally Bennett Olczak

## Community Liaisons

### **ASO LIAISON**

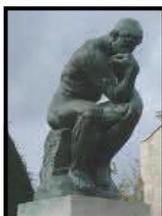
Dr. Gaston Franklyn

### **LHINS MEETING REPRESENTATIVES**

Ms. Helen Biales  
Dr. Gaston Franklyn

### **COMMUNITY AMBASSADORS**

Dr. Gaston Franklyn  
Ms. Helen Biales  
Mr. Ron Pronger



*“Our achievements today are but the sum total of our thoughts of yesterday. You are today where the thoughts of yesterday have brought you and you will be tomorrow where the thoughts of today take you.”*

- Blaise Pascal

## Special Advisors to the Board and CEO

Mr. Bryon Gero  
Ms. Deana Johnson  
Mr. Jeff Ostrow  
Dr. Ted Vokes

Mr. Bill Wrye  
Ms. Gay Wrye  
Ms. Dana Young

## Fund Development

*Maurizio Tiberia, Manager of Fund Development & Community Engagement, leads fundraising staff and volunteers on the following events:*

COLOR RUN

COFFEE BREAK

WALK FOR MEMORIES

WORLD ALZHEIMER DAY RUN

*To the extent that we give to others,  
the universe responds  
in kind.*

*- Small Miracles, Yitta Halberstam & Judith Leventhal*

# Staff

*Help for Today... Hope for Tomorrow*

<i>Juliet Arguelles</i>	<i>Client Support Staff</i>
<i>Lori Baxter</i>	<i>Education &amp; Support Coordinator</i>
<i>Michelle Bennett</i>	<i>Client Support Staff</i>
<i>Sally Bennett Olczak</i>	<i>Chief Executive Officer</i>
<i>Mary Biggs</i>	<i>Client Support Staff</i>
<i>Rhea Branton</i>	<i>Client Support Staff</i>
<i>Brent Brinacombe</i>	<i>Client Support Staff</i>
<i>Sultan Bulto</i>	<i>Client Support Staff</i>
<i>Sharon Chang</i>	<i>Client Support Staff</i>
<i>Crystal Desjardins</i>	<i>Client Support Staff</i>
<i>John Dominato</i>	<i>Director of Finance &amp; Support Services</i>
<i>Shamima Ferdous</i>	<i>Client Support Staff</i>
<i>Rosemary Fiss</i>	<i>Manager of Education &amp; Support Programs</i>
<i>Lisa Gibb</i>	<i>Human Resources Assistant</i>
<i>Lisa Girard</i>	<i>Client Support Staff</i>
<i>Natalie Gray</i>	<i>Education &amp; Support Coordinator</i>
<i>Elizabeth Hill</i>	<i>Client Support Staff</i>
<i>Nancy Ivan</i>	<i>Executive Office Administrator</i>
<i>Rosie Johnston</i>	<i>Adult Day Program Coordinator</i>
<i>Yuriy Kis</i>	<i>Client Support Staff</i>
<i>Lidia Kowal</i>	<i>Client Support Staff</i>
<i>Doris Labelle</i>	<i>Client Support Staff</i>
<i>Janice Laforest</i>	<i>First Link Coordinator</i>
<i>Sterling Laliberte</i>	<i>Client Support Staff</i>
<i>Farzi Lefebvre</i>	<i>Client Support Staff</i>
<i>Janet Lockbaum</i>	<i>Scheduling Coordinator, Client Programs</i>
<i>Justine Merlo`</i>	<i>Client Support Staff</i>
<i>Kristen Nantais</i>	<i>Education &amp; Support Coordinator</i>
<i>Carolyn Pope</i>	<i>Client Support Staff</i>
<i>Sarah Prpich</i>	<i>Client Support Staff</i>
<i>Helen Purdy</i>	<i>Client Support Staff</i>
<i>Kathy Reid</i>	<i>Client Support Staff</i>
<i>Alexis Rodrigo</i>	<i>Community Engagement Officer</i>
<i>Michele Romeo</i>	<i>Finance Assistant</i>
<i>Rose Russell</i>	<i>Education &amp; Support Coordinator</i>
<i>Bambi Sangster</i>	<i>Client Support Staff</i>
<i>Cristina Seys</i>	<i>Client Support Staff</i>
<i>Rose Shields</i>	<i>Client Support Staff</i>
<i>Maurizio Tiberia</i>	<i>Manager of Fund Development &amp; Community Engagement</i>
<i>Kathleen Vendrasco</i>	<i>Manager of Client Care Programs</i>
<i>Michele Vigneux</i>	<i>System Navigator</i>
<i>Vicky Wakeling</i>	<i>Client Support Staff</i>
<i>Claudette West</i>	<i>Client Support Staff</i>
<i>Peggy Winch</i>	<i>Community Engagement Officer</i>
<i>Hedy Zettl</i>	<i>Client Support Staff</i>



# Report of the Chair & CEO

The 2013-2104 Board year has been very productive and we are pleased to report on four key successes.

First, we continue to have program growth and enhancements as the Rising Tide of dementia is upon us at the local level and beyond in Canada.

Secondly, we were able to end the year in a very healthy financial position. We had a balanced budget in times of significant program requests and needs from our community along with retaining and growing healthy capital and stabilization reserve funds for the Society. This allows the Society greater security in times of growth and anticipated continual change in the coming years.

Thirdly, and of significant note, this year after 5 and a half years in our Walkerville home we were able to retire our mortgage in full with funds received from our capital campaign. We now own our home outright – an enduring gift from our community through generous donations from private donors, social/faith, business and labour groups. We will always be grateful to the community of Windsor and Essex County.

Finally, we are pleased to report that after a several month consultative process with key Society stakeholders the Board of Directors has approved a refreshed Strategic Plan for the Society. The Strategic Plan will guide us in the next 3 to 5 year window with strategic directions for quality services and community engagement, advocacy and education. Strategic enablers to support our directions are organizational culture, effectiveness and capacity along with financial stability.

At this time we would like to thank our funder, the Erie St. Clair Local Health Integration Network (ESC LHIN) for their significant continued support, along with the thousands of members of our community who assist us annually in their on-going support in so many ways – for volunteering your time in our client programs, in the office, on various committees and at client and fundraising events, and for giving generous donations that support our programs and services. Without the complementary financial support from our donors, we would not be able to effectively

respond to the expanding needs of our community. We would also like to thank you for acting as ambassadors for ASWE – by reaching out to those who may be in need of our support through programs and services and encouraging them to contact us, you make the world a better place. Without your support since our inception in 1981 we would not be where we are today.

Additionally we wish to thank all members of the Board of Directors and members on its standing and supporting committees for their guidance and support. Of particular note we would like to thank our departing Board member Ms. Patricia Dolan Lewis for her dedicated service to ASWE over the past years. We remain indebted to her for her service.

We also wish to note that in addition to many beloved clients who have passed away over the past year the Society recently lost two wonderful friends – The Right Honourable Herb Gray who served as an Honourary Director and Mr. Bryon Gero who was a past chairperson of our Board of Directors along with past Chairperson of the Alzheimer Society of Ontario Board of Directors. We will remember our friends with much affection.

The challenges ahead for the Alzheimer Society of Windsor and Essex County remain great, however, together we can continue to serve and care for those affected by dementia in our community. Our dream remains that one day a cure will be found.

Respectfully submitted,

Gaston Franklyn  
Board Chair  
ASWE



Sally Bennett Olczak  
CEO  
ASWE





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3630 Rhodes Drive, Building 100  
Windsor ON N8W 5A4 Canada

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## Independent Auditor's Report

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To the Board of Directors of Alzheimer Society of Windsor and Essex County

We have audited the accompanying financial statements of Alzheimer Society of Windsor and Essex County, which comprise the statement of financial position as at March 31, 2014, the statements of operations, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.



**Basis for Qualified Opinion**

In common with many charitable organizations, the entity derives revenue from donations and cash receipts, the completeness of which is not susceptible to satisfactory audit verification. Accordingly, our verification of these revenues was limited to the amounts recorded in the records of the organization. We were unable to determine whether any adjustments might be necessary to revenues other than grants, excess of revenue over expenses, assets and net assets.

**Qualified Opinion**

In our opinion, except for the possible effects of the matter described in the Basis for Qualified Opinion paragraph, the financial statements present fairly, in all material respects, the financial position of Alzheimer Society of Windsor and Essex County as at March 31, 2014 and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

A handwritten signature in black ink that reads "BDO Canada LLP". The signature is written in a cursive, slightly slanted style.

Chartered Accountants, Licensed Public Accountants

Windsor, Ontario  
May 13, 2014

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# Alzheimer Society of Windsor and Essex County

## Statement of Financial Position

March 31, 2014 2013

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### Assets

#### Current

Cash and cash equivalents (Note 2)	\$ 350,200	\$ 291,072
Accounts receivable	35,073	27,647
HST recoverable and other receivables	30,698	10,332
Prepaid expenses	6,757	7,768

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422,728 336,819

#### Capital assets (Note 3)

817,848 838,057

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\$1,240,576 \$ 1,174,876

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### Liabilities and Net Assets

#### Current

Accounts payable and accrued liabilities	\$ 68,268	\$ 93,612
Current portion of long-term debt (Note 4)	-	39,289

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68,268 132,901

#### Deferred contributions (Note 5)

824,331 781,693

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892,599 914,594

#### Net Assets

Invested in capital assets	129,591	84,735
Stabilization fund	218,386	175,547
General and Ministry of Health Fund	-	-

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347,977 260,282

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\$1,240,576 \$ 1,174,876

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On behalf of the Board:



Director



Director

## Alzheimer Society of Windsor and Essex County

### Statement of Operations

For the year ended March 31, 2014      2013

	Other Funds	Ministry of Health Fund	Total	Total
<b>Revenue</b>				
Government funding (Note 6)	\$ -	\$1,424,472	\$1,424,472	\$1,362,898
User fees	-	302,496	302,496	322,259
Special events	160,099	-	160,099	182,849
Donations and bequests	174,754	-	174,754	146,707
Other	22,702	26,297	48,999	41,832
Amortized contributions (Note 5)	29,432	-	29,432	29,250
Interest (Note 2)	-	1,377	1,377	1,201
Employment funding	-	-	-	-
	<b>386,987</b>	<b>1,754,642</b>	<b>2,141,629</b>	<b>2,086,996</b>
<b>Expenses</b>				
Salaries- program	97,820	864,543	962,363	1,058,265
Employee benefits	20,356	291,276	311,632	297,966
Salaries- administration	-	288,575	288,575	305,743
Program support	1,260	126,432	127,692	95,183
Occupancy	-	82,043	82,043	73,720
Automotive and travel	4,073	52,456	56,529	69,277
Special events	52,073	1,901	53,974	50,339
Office printing and materials	2,666	41,356	44,022	33,880
Amortization of capital assets (Note 5)	29,432	-	29,432	29,250
Telephone	-	21,728	21,728	8,239
Professional fees	-	19,742	19,742	7,334
Meetings, training and conferences	400	19,170	19,570	21,054
Lease of equipment	-	14,041	14,041	11,373
Public relations	3,847	9,238	13,085	12,260
Research	-	5,000	5,000	5,000
Interest and bank charges	-	4,506	4,506	7,652
	<b>\$ 211,927</b>	<b>\$1,842,007</b>	<b>\$2,053,934</b>	<b>\$2,086,535</b>
Excess of revenue over expenses (expenses over revenue) before fund transfer	175,060	(87,365)	87,695	461
Fund transfer	(108,804)	108,804	-	-
Excess of revenue over expenses	<b>\$ 66,256</b>	<b>\$ 21,439</b>	<b>\$ 87,695</b>	<b>\$ 461</b>

**Alzheimer Society of Windsor and Essex County**  
**Statement of Changes in Net Assets**

For the year ended March 31, 2014      2013

	General and Ministry of Health Fund	Invested in Capital Assets	Stabilization Fund	Total	Total
Balance, beginning of year	\$ -	\$ 84,735	\$ 175,547	\$ 260,282	\$ 259,821
Excess of revenues over expenditures	87,695	-	-	87,695	461
Interfund transfers	(87,695)	44,856	42,839	-	-
Balance, end of year	\$ -	\$ 129,591	\$ 218,386	\$ 347,977	\$ 260,282

Net Assets invested in capital assets consist of:

	2014	2013
Capital assets	817,848	\$ 838,057
Cash and bank - capital account	136,074	67,660
Deferred contributions	(824,331)	(781,693)
Long-term debt	-	(39,289)
	\$ 129,591	\$ 84,735

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# Alzheimer Society of Windsor and Essex County

## Statement of Cash Flows

For the year ended March 31,	2014	2013
<b>Cash from operations</b>		
Excess revenue over expenses	\$ 87,695	\$ 461
Items not requiring an outlay of cash		
Amortization - capital assets	29,432	29,250
Amortization - deferred capital contributions	<u>(29,432)</u>	<u>(29,250)</u>
	87,695	461
<b>Changes in non-cash working capital</b>		
Accounts receivable	(7,426)	(867)
HST recoverable and other receivables	(20,366)	6,846
Prepaid expenses	1,011	10,157
Accounts payable and accrued liabilities	<u>(25,344)</u>	<u>26,492</u>
	<u>35,570</u>	<u>43,089</u>
<b>Cash from financing</b>		
Repayment of long-term debt	(39,289)	(139,717)
Receipt from deferred capital contributions	72,070	129,646
Purchase of capital assets	<u>(9,224)</u>	<u>-</u>
	<u>23,557</u>	<u>(10,071)</u>
<b>Increase in cash during the year</b>	<b>59,127</b>	<b>33,018</b>
<b>Cash and cash equivalents, beginning of year</b>	<b>291,073</b>	<b>258,055</b>
<b>Cash and cash equivalents, end of year</b>	<b>\$ 350,200</b>	<b>\$ 291,073</b>
<b>Represented by:</b>		
Cash	\$ 272,135	\$ 213,933
Guaranteed investment certificates	<u>78,065</u>	<u>77,140</u>
	<b>\$ 350,200</b>	<b>\$ 291,073</b>

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# Alzheimer Society of Windsor and Essex County

## Notes to Financial Statements

March 31, 2014

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### 1. Significant accounting policies

<b>Nature of association</b>	The Alzheimer Society of Windsor Essex County is a charitable organization (as defined in The Income Tax Act) to receive and administer gifts, bequests and grants for charitable purposes. It provides services to those affected by Alzheimer's disease and related dementia. It provides the following services: Day Away Program, In-Home Respite Care, Public Education, Caregiver Education, and Caregiver Support Services.		
<b>Basis of accounting</b>	These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations.		
<b>Fund accounting</b>	<p>The association follows the restricted fund method of accounting for contributions.</p> <p>The General Fund accounts for the association's program delivery and administrative activities.</p> <p>The Ministry of Health Fund is used to report contributions from the Ministry of Health, which are used to provide information and support to individuals affected by Alzheimer disease.</p> <p>Invested in capital assets reports the assets, liabilities, revenues and expenses related to the Society's capital assets.</p> <p>The Stabilization Fund reports the assets internally restricted by the Society for future contingencies as determined by the Board of Directors.</p>		
<b>Capital assets</b>	<p>Purchased capital assets are recorded at cost. The minimum threshold for the capitalization of capital assets is \$3,000. Amortization expense is reported in the Capital Asset Fund provided as follows:</p> <table><tr><td>Building</td><td>25 years straight-line basis</td></tr></table> <p>One half the rate is used in the year of acquisition.</p>	Building	25 years straight-line basis
Building	25 years straight-line basis		
<b>Financial instruments</b>	Financial instruments are recorded at fair value when acquired or issued. In subsequent periods, all guaranteed investment certificates have been designated to be in the fair value category, with gains and losses reported in operations. All other financial instruments are reported at cost or amortized cost less impairment, if applicable. Financial assets are tested for impairment when changes in circumstances indicate the asset could be impaired. Transaction costs on the acquisition, sale or issue of financial instruments are expensed for those items remeasured at fair value at each statement of financial position date and charged to the financial instrument for those measured at amortized cost.		

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# Alzheimer Society of Windsor and Essex County

## Notes to Financial Statements

March 31, 2014

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### 1. Significant accounting policies (continued)

Use of estimates	The preparation of financial statements in accordance with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from management's best estimates as additional information becomes available in the future.
Revenue recognition	<p>The Society follows the deferral method of accounting for contributions, which include donations and Ministry of Health funding.</p> <p>Unrestricted contributions are recognized as revenue as received.</p> <p>Externally restricted contributions are recognized as revenue in the period in which the related expenses are incurred. Contributions restricted for the purchase of capital assets are deferred and amortized into revenue on the same basis as the related capital assets that are amortized.</p>
Contributed services	Volunteers contributed the vast majority of the fundraising services provided by the Society. Because of the difficulty in determining their fair value, contributed services are not recognized in these financial statements.

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# Alzheimer Society of Windsor and Essex County

## Notes to Financial Statements

March 31, 2014

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### 1. Significant accounting policies (continued)

#### Allocation of expenses

The Society engages in health promotion, education and in home and day away community services through funding provided by the Ministry of Health and Long-Term Care. The costs of these programs and services include the costs of personnel, premises, supplies and other expenses that are directly related to the provision of these programs and services. The Society also incurs a number of the general support expenses that are common to the administration of the organization and its programs and services.

Personnel costs (salaries and benefits) are allocated across the programs and services based on a percentage of the total salary for each staff position. The percentage is determined based on the estimated time spent on the various programs and services.

The Ministry of Health Fund includes an allocation of salaries and benefits related to administration and to programs and services funded by the Ministry of Health and Long-Term Care.

The General Fund includes an allocation of salaries and benefits related to fundraising and to programs and services which are not funded by the Ministry of Health and Long-Term Care.

The organization also allocated some of its general support to expenses to the Ministry of Health programs and services.

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### 2. Cash and cash equivalents

Included in cash equivalents are the following guaranteed investment certificates with the following rates:

	Amount	Interest Rate	Purchase Date	Maturity Date
WFCU	\$ 31,467	1.25%	November 2013	November 2014
WFCU	<u>46,598</u>	1.25%	October 2013	October 2014
	<u>\$ 78,065</u>			

Included in cash are restricted funds of \$1,615 (2012 - \$1,330). The use of funds in the bingo account are externally restricted by regulatory bodies.

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## Alzheimer Society of Windsor and Essex County

### Notes to Financial Statements

March 31, 2014

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#### 3. Capital assets

	Cost	Accumulated Amortization	2014	2013
Land	\$ 200,000	\$ -	\$ 200,000	\$ 200,000
Building	740,410	122,562	617,848	638,057
Furniture and equipment	134,428	134,428	-	-
	<u>\$1,074,838</u>	<u>\$ 256,990</u>	<u>\$ 817,848</u>	<u>\$ 838,057</u>

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#### 4. Mortgage payable

	2014	2013
Mortgage payable, Windsor Family Credit Union, payable in monthly payments of \$3,642 including interest at a rate of prime less 0.10%. The loan is secured by a charge on the land and building. The mortgage was repaid during the year.	\$ -	\$ 39,289
Less: current portion	-	(39,289)
	<u>\$ -</u>	<u>\$ -</u>

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# Alzheimer Society of Windsor and Essex County

## Notes to Financial Statements

March 31, 2014

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### 5. Deferred capital contributions

Deferred capital contributions represent externally restricted contributions received for the purchase of capital assets. The amortization of deferred capital contributions is recorded as revenue in the combined statement of operations

	2014	2013
Deferred capital contributions, beginning of year	\$ 781,693	\$ 681,297
Add: Restricted contributions	72,070	129,646
Less: Amortization for the year	(29,432)	(29,250)
Deferred capital contributions, end of year	\$ 824,331	\$ 781,693

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### 6. Economic dependence

The Society is dependent on the funding received from the Ministry of Health and Long-Term Care. During the year 66% (2013 - 65%) of revenue was received from the Ministry of Health and Long-Term Care.

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### 7. Financial instruments risk

#### Liquidity risk

Liquidity risk is the risk that the organization encounters difficulty in meeting its obligations with financial liabilities. Liquidity risk includes the risk that, as a result of operational liquidity requirements, the organization will not have sufficient funds to settle a transaction on the due date; will be forced to sell financial assets at a value which is less than what they are worth; or may be unable to settle or recover a financial asset.

This risk is reduced due to considerable sums invested in term deposits. Trade accounts payable and accrued liabilities are generally repaid within 30 days.

The organization manages its liquidity risk by constantly monitoring forecasted and actual cash flows and financial liability maturities, and by holding assets that can be readily converted into cash.

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### *About the Alzheimer Society in Windsor-Essex County*

- Our mission is to alleviate the personal and social consequences of Alzheimer's disease and other dementia, and promote research to find the cause and the cure. More than 5,800 people in Windsor-Essex County have dementia.
- Last year alone, we had over 523 individuals served (460 in 2012-2013) through 2,331 confidential counseling sessions with people with dementia or their families (2,790 in 2012-13). Our First Link<sup>®</sup> program received 873 referrals from health care professionals and community agencies (691 in 2012-13) and served 484 individuals (510 in 2012-13). Our Day Away program saw over 4,081 days of attendance by persons with dementia (4,460 in 2012-13) and our In-Home Respite hours totaled 15,917 hours last year (18,475 in 2012-13).
- Our education and counseling services are free to people with dementia and their families for as long as they need them through the lengthy course of the disease. Our counseling model has been shown in clinical research studies to increase the quality of care that family caregivers provide, to reduce caregiver stress and anxiety, and to delay placement into long-term care by an average of fifteen months.
- Our staff continue to receive the most current training on best practices in caring for persons with dementia. We know that better training leads to better care, and that the quality of personal care is an important factor in the quality of life of people with dementia.
- We have an excellent library and maintain one website: [www.alzheimerwindsor.com](http://www.alzheimerwindsor.com) to describe our own services.
- The Alzheimer Society consists of a national, 10 provincial and more than 107 local offices sharing a common mission and working together as a federation.
- The Alzheimer Society of Windsor-Essex County fundraises 35% of our annual budget of \$ 2.0+ million from people and companies that value the work that we do. The remainder comes from the Government of Ontario Ministry of Health and Long-Term Care, through the Erie St. Clair Local Health Integration Network.
- We're here to help. Our dream is that no one should ever have to face dementia alone.



## *About Dementia*

- Dementia is an umbrella term that describes the symptoms of certain degenerative brain illnesses. Alzheimer's disease causes about two third of all dementias. Other diseases that cause dementia include Vascular, Lewy Body, and Frontotemporal dementia.
- Alzheimer's disease slowly kills brain cells. The early symptoms of confusion and memory loss worsen as the disease progresses. Inevitably, the ability to live independently will be lost and assistance will be necessary for everyday things such as toileting, dressing and eating. Alzheimer's disease can last up to 20 years after diagnosis.
- The causes of Alzheimer's disease are unknown and there is presently no cure. But research has shown that the risk of dementia is lower for people who keep their body healthy, their mind active, and their social network strong.
- Age is the greatest risk factor for Alzheimer's. Although mainly diagnosed in those over 65, the symptoms of dementia can start earlier, and an increasing number of people are being diagnosed in their 50's and early 60's. One in three 'boomers' and half of the people who live to be 90 will develop the disease. Because they tend to live longer, women represent almost three quarters of Canadians with Alzheimer's.
- Most Canadians with dementia live at home, cared for by spouses who may themselves be frail and in poor health, or by adult children caring for their own family in addition to their needy parent. Caring for someone with dementia is challenging and very stressful - clinical depression has been found to run as high as 32 per cent among caregivers of persons with dementia.
- The number of people with dementia is expected to double in a generation. This rising tide of dementia will soon carry the highest personal, social, and financial cost of all diseases in Canada, with the potential to overwhelm our health care system.
- Let's work together to rid the world of this terrible disease.

## **RISING TIDE REPORT: THE IMPACT OF DEMENTIA ON CANADIAN SOCIETY KEY MESSAGE SUMMARY**

**A new Alzheimer Society report projects alarming economic and social costs of the rising tide of dementia in Canada: the number of Canadians with dementia will double while the costs will increase tenfold.**

- Today, someone in Canada develops Alzheimer's disease or a related dementia every five minutes. By 2038, that number will grow to one in every two minutes if nothing changes.
- Currently there are 500,000 people living with dementia, a number that will more than double to 1.1 million within a generation.
- Of the 500,000 Canadians currently living with dementia, approximately 70,000 of them are under the age of 65.
- Right now, dementia costs Canadians \$15 billion a year, a figure expected to grow ten times to \$153 billion<sup>1</sup> by 2038.
- The cumulative cost is an alarming \$872 billion<sup>2</sup> between 2008 and 2038.

### **Ontario**

- By 2038, the overall number of Ontarians with dementia will reach 395,540; women will account for 60%.
- New cases of dementia in Ontario are on the rise. The total number of annual new cases will triple to 98,620 over the next 30 years.
- According to 2008 estimates, the total economic burden of dementia was over \$5.6 billion.

**There is hope. The report offers four possible interventions to lessen dementia's crippling effect on Canadian families, health care system and economy.**

- For example, delaying the onset of dementia by just two years has a potential cost savings of \$219 billion<sup>2</sup> over 30 years.

**If we act now, we can stem the tide. Every Canadian has a role.**

- Canadians need to learn about prevention and caring for their brain health, and about the importance of early diagnosis.
- Governments need to act. Other nations have taken proactive measures to mitigate the impact of dementia. Our federal and provincial governments need to do the same.
- Canada needs to invest significantly more into research, a critical piece for changing the course of these diseases.

### **Ontario**

The Ontario government has done some good work with the Ontario Dementia Strategy and the Aging at Home strategy. We need this work to continue with more focus on dementia.

**The Alzheimer Society is here to help.**

- As the national voice for people living with dementia, the Alzheimer Society is leading the efforts to turn the tide.
- It is a key funder of Alzheimer research in Canada.
- It is the only nationwide network of programs and services for people living with all forms of dementia, including Alzheimer's disease, at every stage of the illness.
- It is taking an active role in developing a national dementia strategy to be supported by all levels of government.

### **Ontario**

- The Society is a co-founder and co-funder of the Centre for Research in Neurodegenerative Diseases (CRND) at the University of Toronto, a world-renown research facility
- To date, the Society has invested over \$10 million in CRND research

<sup>1</sup>In future dollars    <sup>2</sup>In 2008 dollars

## Projected prevalence of dementia: Erie St. Clair Local Health Integration Network (LHIN)

*Rising Tide: The Impact of Dementia on Canadian Society*, released by the Alzheimer Society in January 2010, projects prevalence and costs of dementia in Canada over the next 30 years.

To help Alzheimer Societies in Ontario understand the impact of dementia in their respective communities, the Alzheimer Society of Ontario requested projections for Ontario from the authors of the report and cross-referenced this information with data from Local Health Integrated Networks (LHINs).

This document includes information related to the Erie St. Clair LHIN.

Citizens living with dementia	2008	2012	2016
Ontario	181,406	204,681	227,504
LHIN 1 - Erie St. Clair	9,010	9,857	10,593

By 2016, the prevalence of dementia in **Ontario** is expected to reach 227,500 cases. This means that the total number of people with dementia in Ontario will increase by over 46,000 (25%) within eight years.<sup>1</sup>

The prevalence of dementia in the **Erie St. Clair LHIN** region is expected to reach 10,593 cases by 2016, an increase of over 17% compared to 2008. Within eight years, the total number of people with dementia in the Erie St. Clair LHIN will grow by more than 1,580.<sup>2</sup>

In 2008, the estimated total economic burden (including direct, indirect and opportunity costs) of dementia in Ontario exceeded \$5.6 billion. This number is expected to more than double by 2016, when the total annual cost of dementia in Ontario will approach \$12 billion.<sup>1</sup>

As county boundaries can vary significantly from LHIN boundaries, prevalence projections for divisions within the Erie St. Clair LHIN are presented below.

Citizens living with dementia <sup>3</sup>	2008	2012	2016
Chatham-Kent	1,674	1,738	1,823
Essex	5,152	5,723	6,231
Lambton	2,126	2,359	2,572

Sources:

*Rising Tide: The Impact of Dementia in Ontario*, 2009

*Projected Prevalence of Dementia: Ontario's Local Health Integration Networks*, Alzheimer Society Ontario, 2007  
Hopkins & Hopkins, *Dementia Projections for the Counties, Regional Municipalities and Districts of Ontario (Using CSHA Prevalence Data)*, Clinical/Research Bulletin No. 15, 2005

## KEY ORGANIZATIONAL MESSAGES

*The Alzheimer Society of Windsor & Essex County has one goal, one mission: To alleviate the personal and social consequences of Alzheimer's disease and related dementias.*

Working together with the Alzheimer Society of Ontario and 35 local chapters across the province, the Alzheimer Society of Windsor & Essex County supports people living with or at risk of Alzheimer's disease and other dementias with programs and services and up-to-date information so they can make informed decisions about their care and future plans.

### **IMPROVING CARE**

- We apply the latest in research information and best practices to professional development opportunities for health and community workers, including our own, to ensure those with dementia and their families receive the best possible care.

### **PROMOTING AWARENESS**

- We optimize traditional and digital media to build campaigns that increase understanding of dementia and promote its prevention, elevate the work and impact of the Society, protect its brand and engage new audiences.

### **ADVOCACY**

- We cultivate alliances and partnerships and collaborate with all levels of government and other health groups to influence policies and programs that will offer positive outcomes for people affected by dementia.

### **FUNDRAISING**

- We seek and create new opportunities and revenue streams to support program innovation and research as well as promote the Society's long-term financial sustainability.

### **ORGANIZATIONAL EFFECTIVENESS**

- We are committed to an integrated and unified organization that continually encourages a culture of learning, sharing and collaboration and that measures its performance against its strategic objectives to achieve greater success.

*“Hope is something that brings sunshine into the shadows of our lives. It is our link to a better tomorrow. When hope is gone, so too is our life force. And when hope is kept alive, so too is our determination to go on.”*

*- Small Miracles, Yitta Halberstam & Judith Leventhal*

# Art for Alzheimer's

Not only is creating these beautiful art pieces therapeutic for our Day Away clients, it helps support the Society's programs and services. These one-of-a-kind pieces are being sold by ASWE at the Walkerville Street Market.

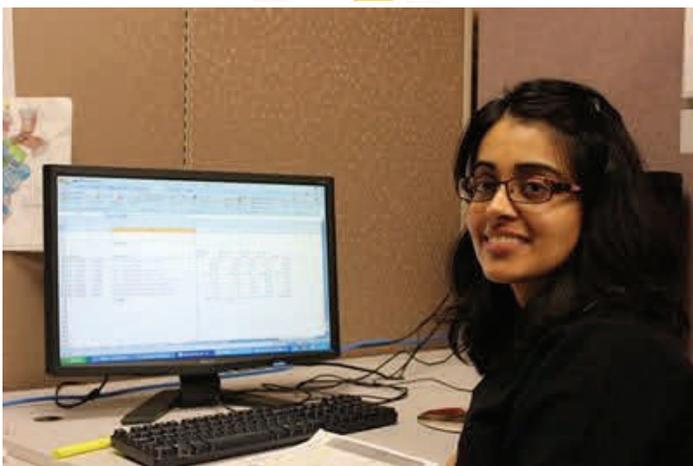


# We Thank Our Volunteers

*“Volunteers do not necessarily have the time; they just have the heart..”  
~ Elizabeth Andrew.*



**Make a  
difference!**

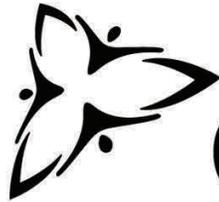


Clockwise from upper left: Noreen St. Pierre and Kelly Savage volunteer in the Day Away program; Bob Davis drives the van to transport clients to and from the Day Away program; Al Raeside is not only a van driver, he also helps with various tasks around the building; and Sehrish Kamal assists in the Finance department.

# Thank you

*The Alzheimer Society of Windsor & Essex County wishes to recognize and thank the Erie St. Clair Local Health Integration Network (LHIN) who has committed to providing a large portion of the financial resources we require to be able to offer essential services to our community.*

**Supported by:**



**Ontario**

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**Erie St. Clair Local Health  
Integration Network**