

Synapse is dedicated to assisting those with, or influenced by, an Acquired Brain Injury or whose behaviour challenges our understanding.

A Disability Sector in Need of Rehabilitation	1
Executive Report	3
Creating Homes	5
Synapse Training	7
Synapse Training Tasmania	9
Synapse Accommodation	11
Supported Accommodation Innovation Fund	15
Assessment and Planning	17
Community Response	19
Website and Publications	21
Bang On A Beanie	23
Human Resources and Operations	25
Finance Management	27
Audited Financial Report	29

A man in a dark suit is walking through a complex, white, geometric maze-like structure. The structure is composed of many rectangular blocks and walls that create a series of paths and dead ends. The lighting is bright, casting soft shadows and highlighting the clean lines of the architecture. The man is positioned in the lower center of the frame, looking upwards and to the right, suggesting a sense of exploration or seeking a way out.

a disability sector
in need of rehabilitation

Organisations are still struggling with a system that is decades old and founded on Intellectual Disability and the medical model.

We need a fundamental change in service delivery; one based on the needs of the individual, where the cost of care is not just measured in dollars spent, but also in dollars saved and outcomes for clients.

This year has seen changes to disability funding, staff cuts across the sector, and a pending National Disability Insurance Scheme. Synapse is up to the challenge, creating strong alliances with partners and cost-effective workflow to meet families' needs.

Overview

We are pleased to present the annual report 2012. Through this report you will read/see how we have built on 2011 by aligning our client management and service delivery functions through consolidating our workflow processes. This has been facilitated by the development of infrastructure, improving our business systems and supporting our team.

Our strategic objectives have been influenced by the National Health Reforms, the change in State government, commitment of the Commonwealth for a National Disability Insurance Scheme (NDIS) and residual effects of the 2011 disasters. As a result Synapse has adapted to the uncertainty and searched for opportunities for strategic growth.



Chris Thompson
(President)



Jennifer Cullen
(Chief Executive Officer)

Innovative Projects

Closing the gap on Indigenous Disadvantage

Aboriginal and Torres Strait Islander issues remained an important focus in 2012. The Department of Families, Housing, Community Services and Indigenous Affairs, through the Supported Accommodation Innovation Fund (SAIF) funded 21 organisations to deliver supported accommodation and respite projects. Synapse was a recipient of \$4,595,760 to build the Wabu Gadun Bulmba Gurriny Mukanji Centre (Come Share the Good Healing of the Home), an Aboriginal and Torres Strait Islander supported accommodation facility in Cairns for people with complex behaviours.

We continued our Indigenous Mentoring Program, "Deadly Connections"; commitment to indigenous employment through our traineeship programs and working in a discrete Indigenous community. These strategic initiatives are in partnership with Indigenous people and communities.

Brain injury awareness

BangOnABeanie, Australia's annual national awareness fundraising project, continued its success culminating in an awareness event called BangOnABoa.

Our Team

All of the achievements and efforts are a result of the people at Synapse. The award winning WELL program continues to deliver results across our organisation. The investment in this initiative ensures the quality and results achieved through our service delivery to clients and their families. We commend the commitment, passion, and drive of our team.

For those with complex and challenging behaviour, our hospitals are prisons, and our prisons are treated as disability accommodation.

Synapse has evidence that through comprehensive behaviour support plans, based on the needs and communication style of an individual, the cost of care can be reduced significantly.

There is no reason that, just because you have a disability, you cannot own your own home and become a tax-payer again.

Looking for practical strategies to manage behaviour?
Synapse Training prides itself on delivering high quality
and innovative training services.



Features

Customised Corporate Training

Our range of courses are particularly essential for anyone who is charged with the care of someone who is living with Acquired Brain Injury (ABI), complex and challenging behaviours, or any other disability – diagnosed or undiagnosed.

At Synapse Training we pride ourselves in delivering high quality and innovative training. We are a Registered Training Organisation able to tailor courses to meet the needs of your organisation. Training can be delivered in two or four hour blocks, full day sessions, or to any other specifications that will meet your Organisation's needs.

Training Seminars

- Supporting Individuals with Complex and Challenging Behaviours (SICCB)
- Positive Behaviour Support (PBS)
- Understanding Acquired Brain Injury (UABI)
- The Effective Support Person (TESP)
- Customised Induction to specific Organisational requirements

Deadly connections

FSG Australia and Synapse introduced The Deadly Connection pilot program in July 2011, focussing on personal and professional development within a mentoring framework that benefits Aboriginal and Torres Strait Islander workers and volunteers from a broad range of industries and services.

Mentoring is a relationship which gives people the opportunity to share their professional and personal skills and experiences and to grow and develop in the process. It is based on a mutual trust, respect, openness and willingness to learn and share, and enables us to share experiences, cultures, ideas, hopes and dreams when facing growth or challenges.



Overview

Synapse Training is a Registered Training Organisation (RTO Number: 30617) delivering nationally accredited and professional development training programs across Australia.

Who would benefit from Synapse Training?

- Staff who support individuals with behaviour that challenges our/community understanding
- Organisations working in accommodation, respite, independent living or community access
- Government Departments / Organisations
- Carers and family members
- Educational institutions and teachers
- Organisations working in Criminal Justice, Child Safety or Child Protection
- Organisations dealing with high volumes of public enquiry such as Centrelink or banking institutions

The Brain Injury Association of Tasmania (BIAT) in partnership with Synapse Training has shown the tyranny of distance is no obstacle when you both work to the same outcomes.

Project Outlines

The initiative proposes to, in partnership with Synapse, establish Synapse Training Tasmania to develop and deliver a range of specifically tailored ABI education/training sessions from July 2011 to June 2013 which will:

- support generic and specialist agencies to improve service responsiveness for people with Acquired Brain Injury, across the full spectrum of care;
- assist family members to understand brain injury and their ability to cope with and contribute to the rehabilitation process of their family member; and
- provide opportunities for the general community to become more aware of the impacts of, and complexities surrounding, acquired brain injury.

During the first year of the project 17 ABI workshops were conducted across Tasmania. These included:- Introduction to Acquired Brain Injury; Working with concurrent ABI, Alcohol and other Drug, and Mental Health Conditions; Working with People with ABI – Understanding and Responding to Behaviour; Promoting Positive Sexual Adjustment after Acquired Brain Injury; Challenges in Meeting the Mental Health Needs of People with Traumatic Brain Injury; and Acquired Brain Injury for Key ABI Service Providers.



Sustainability

315 people received Synapse Training brain injury training at an average cost to the Project of \$115.00 per person. The Project partners believe this represents good value and demonstrates sustainability of this type of training into the future.

Collaboration

A Memorandum of Understanding between Synapse and BIAT has been developed and signed off by both organisations. BIAT and Synapse Training staff have met on several occasions to work through comparing the existing suite of training programs offered by both organisations to consolidate, update and rebadge the training packages. BIAT also worked closely with the Mental Health Council and more particularly the Alcohol, Tobacco and other Drugs Council in the marketing and administration of a significant portion of the training provided during the reporting period.

Evaluation

Participants were asked to assess their level of knowledge, confidence and ability against a range of areas before the training and then again after the training. An increase in participant's knowledge and/or understanding of the various aspects of Acquired Brain Injury was achieved in all of the training sessions provided during the reporting period. A high percentage of participants rated the facilitator's knowledge of the subject, ability to train, and ability to involve all participants as excellent or very good. The relevance of the content to participant's work was also rated very highly.



synapse accommodation

Synapse believes that every person deserves quality accommodation and individualised support to achieve and maintain the greatest possible degree of involvement with society.



Assessment Tools

At point of referral Synapse undertakes assessment of the individual utilising a variety of assessment tools:

- Overt Behaviour Scale (OBS)
- Behaviour Assessment (IABA)
- Activities of Daily Living (ADL) snap shot week (reviewed 3/12)
- Behaviour support plans
- Behaviour Pathway Summary Statements
- Client specific training for staff

2011-2012 saw the rebuilding of the Narangba properties post 2011 floods, along with 2 new accommodation sites. This has taken the accommodation sites from 5 to 7, including the Transitional units.

The year was spent stream-lining systems to provide better direction for staff, and outcomes for clients. The introduction of the new timekeeping system (ADI) has improved management of funded support hours and a huge improvement in rostering. The introduction of the Synapse Enterprise Bargaining agreement was a great success with all Synapse Lifestyle Support Workers (LSWs) now engaged in permanent positions.

The year has also seen a huge reduction in behaviour that challenges our understanding, contributing to this has been stable 'teams' of staff in each work site. Staff's understanding of triggers and the purpose of behaviours, and a consistent approach to working together has resulted in an improvement in clients' quality of life.

Overview

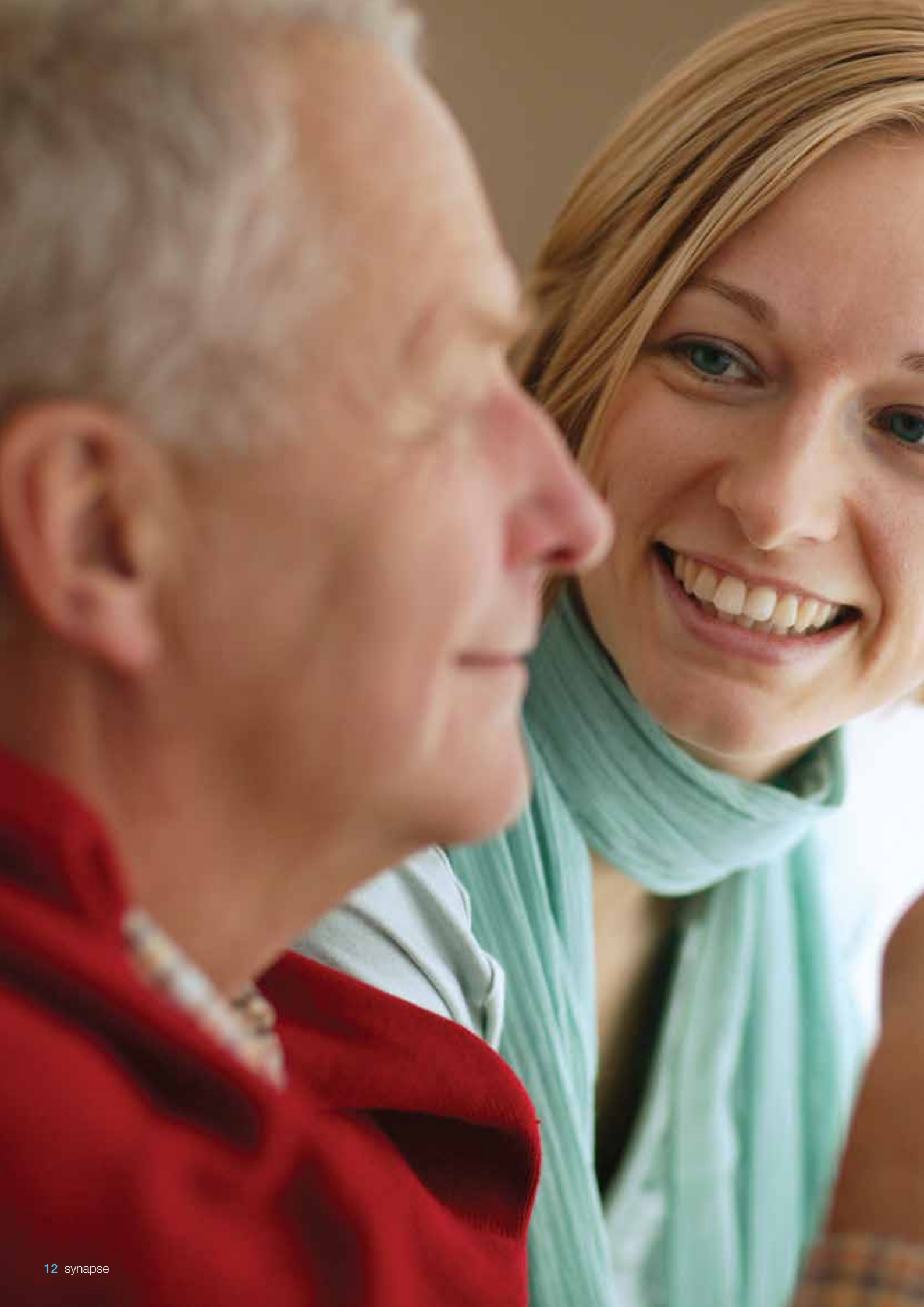
The accommodation options Synapse provides include, but are not limited to:

- Transitional accommodation
- 24/7 Accommodation Models
- Independent living
- Community access options.

To achieve this we take three distinct approaches within our organisation model of support:

- Positive Behaviour Support (PBS)
- Client Centred Practice (CCP)
- Strength Based Approach (SBA)





An Effective Quality Improvement and Outcome Evaluation System was rolled out in June 2012. The PSR is an evidence-based tool which highlights areas where improvement may be required on an ongoing basis.

The introduction of the Periodic Service Review (PSR)

1. **Performance Standards:** specifications and the operational definitions of staff responsibilities. (The quality Accommodation is aiming for) Process/Outcome
2. **Performance monitoring:** methods Accommodation uses to verify if we are carrying out the processes intended, and achieving the desired outcomes. (This sets the stage for supervision and performance management if necessary)
3. **Supervisory and management feedback:** based on performance monitoring, and is designed to improve and maintain the quality of services provided.
4. **Staff training:** to ensure staff can carry out the processes designed to produce the desired outcomes of Accommodation competently.

The Infrastructure

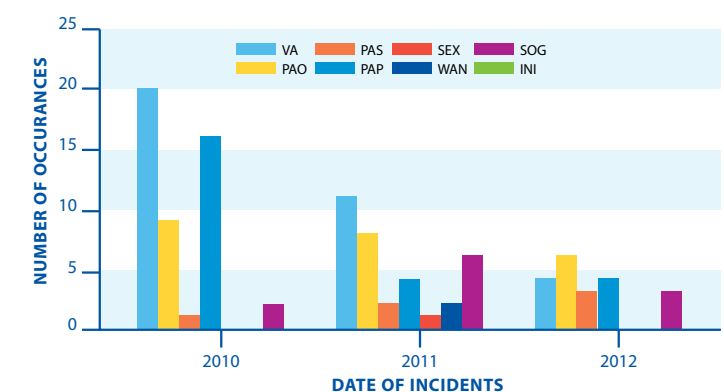
SharePoint is an internet-based resource for information and document sharing, and was introduced to Synapse in June 2011. It has revolutionised Accommodation practices in two distinct ways:

- As SharePoint is internet-based, the Accommodation team can access client information on the fly, and from remote locations. This capability is priceless – given the 'here-there-and-everywhere' nature of the Accommodation Department.
- SharePoint provides an unlimited storage space for arranging client information. This information can be linked to graphing tools for monitoring of client behaviour, medication and WPH&S incidents.

In particular the ability to provide evidence of behaviour incidents and the resulting evidence in reduction in behaviour after protocols and strategies have been implemented.

The future vision of Synapse accommodation is to continue to grow by producing innovative accommodation options where the house is a home, and choice and dignity are paramount in the arrangements.

PSR Results to date:



The chart (left) is based on the *Overt Behaviour Scale* measure:

- Verbal Aggression
- Physical Aggression – Objects
- Physical Acts Against Self
- Physical Aggression – Others
- Inappropriate Sexual Behaviour
- Perseveration / Repetitive Behaviour
- Wandering / Absconding
- Inappropriate Social Behaviour
- Lack of Initiation
- Other



supported accommodation innovation fund

Closing the gap on Indigenous disadvantage, Synapse is addressing Aboriginal and Torres Strait Islander issues through innovative models of culturally relevant accommodation.



The SAIF project

The SAIF project will provide supported accommodation for eight clients with severe and profound disabilities. The Wabu Gadun Bulmba Gurriny Mukanji Centre ("Come share the good heart of the healing home" translated from Yidinji) is the result of a consortium of non-Government, corporate, Indigenous and non-Indigenous Organisations working together to provide an innovative accommodation facility and model of support for Indigenous clients with ABI and severe and profound disabilities. As a transitional facility, clients will move on from the centre either back to country or into the care of existing service providers in the Cairns region.

Exciting aspects of the project include:

- Indigenous design promoting the seamless integration of indoor and outdoor spaces
- Traditional bush food forest and billabong used for both nutritional and therapeutic purposes
- An elders reference group providing valuable advice on all aspects of the project from design, model of support and HR practices
- Partnership with James Cook University to provide research that contributes to developing contemporary best practice in disability service delivery

Major project partners include:

- Indigenous Construction and Training Company (ICTC)
- Hutchinson Builders
- Davis Langdon
- Wuchopperen Health Service
- Apunipima Cape York Health Council
- James Cook University





assessment and planning

Synapse Assessment and Planning can offer support, advice, consultation and assessment services for people with an Acquired Brain Injuries and their families.



Overview

The Assessment and Planning Service has a high level of proven expertise in assessment and community-based support. Their extensive experience includes the successful completion of 200 assessments throughout QLD as part of the Younger People In Residential Aged Care Initiative. This included providing assessments in remote regions of Far North QLD and indigenous populations. The service has networked extensively with allied health and community services to provide the best possible outcomes for clients with Acquired Brain Injury.

What services do we provide?

The Assessment and Planning Service provides functional and comprehensive assessments for people with Acquired Brain Injuries and their families. These assessments may occur in the home, in the hospital or community facilities and are guided by a model of client-centred planning and strength-based practice.

The Assessment and Planning Service provides experienced case managers who can assist clients or their decision makers to identify appropriate options based on a client specific assessment inclusive of, but not limited to:

- **Preliminary Assessment of Skills and Functioning (Activities of Daily Living)** – This involves an assessment of all activities associated with daily living including personal care, physical, Cognitive and social functioning.
- **Options & Future Planning** – Advice and Assistance on transitioning from hospital to another facility or living arrangement.
- **Risk Assessment** – Determine level of support required in-home and in a shared environment. Determine safe working standards for prospective or existing service provision. Occupational Health Safety Assessment & consultation.
- **Allied Health Support & Assessment** – Planning a client specific holistic care regime in consultation with client, family, allied health, stakeholders, Case Managers and Insurers.
- **Behavioural Support and Consultancy** – The Assessment and Planning Service is able to conduct Behavioural Assessments, and provide comprehensive reports, based on applied behaviour analysis. Develop and assist with the implementation of behaviour management plans based on a framework of positive behaviour support and client-centred practise.



The Community Response Service uses an innovative and evidence-based model of practice to provide outcomes for health professionals, clients, families and corporate partners.



Features

The Community Response Service operates under Home and Community Care (HACC) Information, Education and Training (state-wide) guidelines, providing services including but not limited to:

- Information and referral
- Information / education presentations (introductory level)
- Website development
- Publication development, including Bridge Magazine (formerly Synapse Magazine), online fact sheets and 'Acquired Brain Injury – The Facts'
- Event management
- Marketing and advertising material
- Facilitation of several network meetings, including the Brisbane Support Group and Brain Injury Network (BIN)
- e-Newsletter development and distribution
- Needs-analysis, statistics collation and reporting

Achievements

- Over 10,000,000 hits across our website(s)
- Over 1 million publications distributed (including hard copy, electronic and fact-sheets)
- Over 400,000 contacts with unique visitors / individuals
- Actively working outside of the sector to increase awareness and procure corporate support, address unmet needs in the community, and increase Organisational capacity
- Responsible for the rebranding and marketing of the Organisation, managing the development of the new website, new stationery, and other electronic infrastructure
- Engagement with Youth Justice Conferences

Overview

People who have acquired a brain injury and their families know the devastating impact it can have on their lives. The diversity of the impact is reflected in the calls that our Organisation receives.

The Community Response Service responds to enquiries on all issues relating to Acquired Brain Injury. All calls are answered by the Community Response Officer who listens to the concerns of the caller, discusses the types of assistance or information that may be appropriate, and facilitates ways the caller can access the required support or information. This response may include the provision of appropriate resources and/or linking the caller to some of the thousands of services listed on our database.



website and publications

Synapse's unique approach to web design and publication development has proven successful in engaging with stakeholders and reinventing the community sector.



www.synapse.org.au

With a new design and over 4,000,000 hits per year, www.synapse.org.au is a leading electronic resource both nationally and internationally.

The website features a comprehensive range of free Fact Sheets and online publications (over 130 online resources).

They provide information and practical strategies for clients, family members, friends and associated professionals.

Additional features include:

- Information on all our services
- Online publications
- Web store and integrated payment gateway
- Customised design to maximise accessibility
- Interactive content and regular updates

Publications

Bridge Magazine (formerly Synapse Magazine)

Bridge is a full colour glossy magazine (published quarterly since 2000) with practical information and strategies for people affected by Acquired Brain Injury, their family, friends, health professionals and corporate partners.

Bridge is a collaborative publication, and we encourage submissions, stories, and/or practical articles from other stakeholders.

Corporate sponsorship is also available on request.

Acquired Brain Injury – The Facts (Third Edition)

“ABI – The Facts” is a collection of our most comprehensive or most popular fact sheets, taking the reader from the hospital stage, right through to long-term rehabilitation and employment options.

This publication has been one of our most popular resources.

Awareness Posters – Series 2

These posters are available as hard copies or for free download (as jpegs, PDFs and desktop wallpapers) via our website and Facebook

Each poster has been customised to appeal to a wide demographic including youth and alternative cultures. The focus is on raising awareness about Acquired Brain Injury, disability issues, and harm-minimisation / prevention in the wider community, and to those who are most at risk.

The posters have been one of our most popular resources with copies sent to, and downloaded by individuals and Organisations around the world.





bang on a beanie

Australia's national awareness fundraising campaign was literally 'bang on'. A combination of strong branding, simple messages and community support will see Bang On A Beanie continue for years to come.



Project Brief

The Bang On A Beanie Campaign encourages people to buy a blue beanie to show their support for Brain Injury Awareness Week (BIAW). The profits from this campaign will go towards providing accommodation for young people and educational resources for families.

Bang On A Beanie is a fun and, more importantly, informative way to get our message out there.

Campaign Objectives:

- 1 Increase awareness of ABI in Queensland by 100%. (A measure of the quantity and quality of reach achieved by the campaign's promotional mix.)
- 2 Fundraise through the sale of merchandise (resources) and donations. (A measure of quantity of beanies, t-shirts, stickers sold, amount of donations made via the Bang On A Beanie website, direct sales, bank transfer and other means.)
- 3 Build a network of Partners. (A measure of number of partners signed on to the Bang On A Beanie Project plus the number of organizations that sign on to sell merchandise as 'consignees').

About BangOnABeanie

In 2011 Synapse in collaboration with Brain Injury Associations across Australia, started work on transforming an "invisible disability" into a very visible one. It was a great success!

With your help we want to show the community how to send a message of support to all those adults and children living with a brain injury:

- Because the "one punch didn't kill"
- As a result of falls, motor vehicle accidents, and other trauma such as concussion or repeated knocks to the head from sport
- As a result of degenerative diseases, brain tumours, Dementia, Parkinson's, Huntington's, Multiple Sclerosis, Cerebral Palsy and other brain illnesses
- As a result of stroke or hypoxia (lack of oxygen)
- Alcohol or drug abuse, most commonly through driving under the influence, falls, and social violence.

BangOnABoa - the official launch

Irreverent, a little bit rude, and loads of fun, the official launch for BangOnABeanie was an outstanding success. Burlesque, bands, silent auctions and a "fabulous" dress code. What better way to fund raise and create awareness for brain injury than through a positive celebration of music and culture.

The event was also run to create momentum for next year, so watch out for BangOnABoa 2013!!



human resources and operations

Through a model of continuous improvement and staff empowerment, Synapse's human resources and operations teams underpins the Organisation's success.



Workforce Innovation Awards 2012 winner Human Resource Management

Synapse was recognised for our comprehensive support of employees through enhanced onsite training and engagement of psychological support for team members through regular tool box talks and resilience building sessions.

Timekeeping and Payroll

Congratulations to the team on rolling out our new timekeeping and payroll system. The system increases payroll accuracy and reduces duplicate effort. It provides customised reporting enabling workforce planning, statistics and reporting.

Synapse Lifestyle Support Workers Enterprise Agreement 2012

Over 80% of LSWs accepted permanent work under this Agreement. The Agreement truly reflects Synapse's appreciation of our workforce. Our heavy investment in training and improving employment security means we have a well trained workforce supporting our clients.

Synapse West End Community Member

Our state of the art room hire facilities have been utilised by partners and neighbouring businesses, increasing community awareness and building our reputation in our local community.

Microsoft SharePoint

In collaboration with Sharing Minds, Synapse has developed a SharePoint site. SharePoint has increase efficiencies and reduced double handling through centralized document storage and knowledge sharing.



Synapse's finance team is bucking the trend of the traditional Accountant, creating new corporate relationships and making our funding dollars work for our clients.



Overview

Building Relationships:

The team has build strong working relationships with the Department of Communities, Child Safety and Disability Services, a number of alternative funding organisations and the South East based Universities. These relationships will provide significant support through the times ahead.

Building a Stronger Team:

During the year there was an opportunity to redistribute the tasks and responsibility within the team. As a consequence individual team members accepted the responsibility for tasks where they had a significant impact on the final result – each team member experienced the completion of a task not merely one transaction aspect. This has provided the team with better skills and knowledge to take on more tasks in the future.

Budget Preparation:

The team went back to basics in the preparation of the budgets this year with the major focus being on Accommodation Services. The starting point for the budget this year was the ADI Rosters. Working from the rosters by establishing the required level of support needed for each of our clients – rather than concentrating purely on the dollars. This change has now provided a significant change in reporting, being focused in on what can be managed.

Year End Processing:

The impact of changes to the collection and presentation of year end information, together with assigning specific tasks to each team member enabled the team to complete the year end requirements in early August. This provided the opportunity for the Audit to be successfully completed without the usual time delays. The team succeeded in having the Statutory Financial Statements accepted by the Board of Management at its September meeting, subsequently moving the Annual general Meeting a month earlier to October 2012.



Brain Injury Association of Queensland Inc
Trading as Synapse
ABN 75 631 135 125

Board Management Report

For the year ended 30 June 2012

The Board of Management present their report on the Association for the year ended 30 June 2012 and report in accordance with a resolution of the Board of Management.

Corporate Structure

Rule 6. The membership of the Association will consist of the following classes of members:

- (i) Class A:
 - (1) Any individual with ABI;
 - (2) Any interested person;
- (ii) Class B:
Any individual relative or friend of a person with ABI;
- (iii) Class C:
 - (1) Corporate members who are a corporation, government department, statutory body, local authority or incorporated association which the Management Committee, in its absolute discretion, considers:
 - (a) To be a fit and proper body;
 - (b) Agrees to abide by these rules;
 - (c) Agrees to support and facilitate the achieving of the Association's objectives; and
 - (d) Is not a member, or is not associated with, any other entity, body or association, incorporated or not incorporated, where to be a member or be associated may be in conflict with the Association;
 - (2) Any persons who are health, or allied health, professionals and/or persons working in government, community, health or community organisations and/or students;
- (iv) Class D:
Any person who seeks to be kept generally informed of the work of the Association;
- (v) Life Member:
Any member who has given exemplary service to the Association or has given exemplary service in the interests of persons with ABI, has been nominated by at least 2 other Members, endorsed by the Management Committee and accepted by a general meeting of the Association will be granted life membership;
- (vi) Honorary Member:
Honorary membership may be conferred on a person or organisation invited by the Association, by reason of outstanding contribution to the community in accordance with the

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Board Management Report

For the year ended 30 June 2012

Association's objects and/or whose knowledge and experience may be of value to the Association.

The names of the Board of Management at any time during or since the end of the year are:

Mr Chris Thompson
Mr Neil Federer
Mr Peter Lake
Mr Cameron Hall
Mr Bede King
Ms Donna Sanderson

Association Secretary

Ms Jennifer Cullen BA(CQU), BHS(CSU), MHSM(QUT), GradDipPH(QUT), GradDip(VCM(TAFE) has worked for the Association for the past 7 years, performing the role of Chief Executive Officer. Ms Cullen was appointed Association secretary 28 November 2011.

Principal Activities

The principal activities of the Association are encompassed in the belief that every person deserves quality accommodation and individual support to achieve and maintain the greatest possible degree of involvement with the community. During the financial year the activities were:

Proactively respond to the needs of the population who are affected by Acquired Brain Injury (ABI). In addition, positively respond to people who exhibit behaviours that challenge our understanding.

Operating Results

The Association recorded a deficit from ordinary activities of \$439,215 with the net result of \$24,313, which included the sale of assets held for re-sale (the Petrie Terrace property) of \$377,643. This compared with an operating deficit of \$787,330 for the previous financial year.

Review of Operations

The revenue received from grants (both State and Commonwealth) increased substantially (28.4%) during the year, together with the other most significant items of the sale of the Petrie Terrace property and receipt of the funds relating to the 2011 Brisbane Flood.

Although the overall operating position remained in deficit, significant justification has been made into all expenditure. There have been a number of Central Office staff positions that have been eliminated, as well as not replacing a number of employees that resigned. The cost impact of these staff changes will be felt during the 2012 / 2013 year.

The most significant focus for the 2012 / 2013 year and beyond will be the fundamental belief in the individual, providing leadership to support the most vulnerable in our society. The provision of accommodation and striving to improve the individual's quality of life is key.

The State economic position for disability services will be extremely tight following the change in government early in 2012, as the new government comes to grips with the state's financial position.

We will continue to work "side-by-side" with the Department of Communities to ensure the long term commitment to the current and future individuals falling within our care.

Brain Injury Association of Queensland Inc
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Board Management Report

For the year ended 30 June 2012

Significant Changes in the State of Affairs

In the opinion of the Board of Management the operating results of the Association were in-line with expectations. Significant personnel changes have been made at Central Office with the review all positions, which has resulted in a number of positions being made redundant or not replaced on the resignation of employees. These personnel changes will significantly affect or may significantly affect the operations of the Association, the results of those operations, or the state of affairs of the Association in future financial years.

Environmental Compliance

The Association's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a State or Territory. Synapse's uses environmentally sustainable standards and practices to minimise the impact of the association on the environment.

Board of Management Meetings

During the financial year, ten (10) meetings of the Association's Board of management were held. The nominated individuals forming the Board of Management attended the following meetings:

	Number of BoM Meetings Eligible to Attend	Number of BoM Meetings Attended
Mr Gordon Geoghagen	5	5
Mr Chris Thompson	10	9
Mr Neil Federer	10	10
Mr Peter Lake	10	7
Mt Cameron Hall	10	5
Mr Bede King	5	2
Ms Donna Sanderson	10	8
Mr John Chambers	5	5

Board of Management and Senior Executives' Remuneration

(a) **Board of Management** – No appointed individual to the Board of Management shall be paid any remuneration for services.

(b) **Senior Executives** – Remuneration levels are determined with reference to duties and responsibilities, taking into account current market trends and the individual executive's performance.

Indemnifying Officers or Auditors

Auditors – No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for the auditor of the Association.

Brain Injury Association of Queensland Inc
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Board Management Report

For the year ended 30 June 2012

Board of Management and Officers – The Association has paid premiums to insure the Board of Management and Officers against liabilities for costs and expenses incurred by them in defending any legal proceeding arising out of their conduct while acting in the capacity of Board of Management representative or officer of the Association, other than conduct involving a wilful breach of duty in relation to the Association. The premium is incorporated into the combined policy.

Proceeding on Behalf of the Association

No person has applied for leave of Court to bring proceedings on behalf of the Association or intervene in any proceedings to which the Association is a party for the purpose of taking responsibility on behalf of the Association for all or any part of those proceedings.

The Association was not a party to any such proceedings during the year.

This statement is made in accordance with a resolution of the Board of Management and is signed for and on behalf of the Board of Management by:



President
24 September 2012
Signed, Brisbane Queensland



Treasurer
24 September 2012

Brain Injury Association of Queensland Inc
Trading as Synapse
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Statement of Comprehensive Income

For the year ended 30 June 2012

	Note	2012 \$	2011 \$
Revenue	2	6,006,800	4,775,044
Accountancy and Auditor's Remuneration		(10,816)	(22,659)
Advertising and Promotions		(80,500)	(109,938)
Client Support Services		(205,970)	(199,251)
Computer Expenses		(258,457)	(77,779)
Consultancy Fees		(28,644)	(17,497)
Depreciation and Amortisation Expense		(187,836)	(186,414)
Employee Benefits Expense		(4,674,345)	(3,946,063)
Finance Costs and Charges		(383,396)	(416,203)
Flood Emergency Expenses		(3701)	(34,716)
Insurance		(51,379)	(42,298)
Legal Expenses		(27,734)	(33,684)
Office Expenses		(174,188)	(140,079)
Motor Vehicle Expenses		(42,719)	(57,949)
Other Expenses		(135,798)	(123,917)
Property Expenses		(155,456)	(153,927)
Loss on Disposal of Assets		(25076)	-
Operating Surplus / (Deficit) for the year	3	(439,215)	(787,330)
Non Operating Income	2	463,528	-
Surplus / (Deficit) for the Year		24,313	(787,330)
Other Comprehensive Income		-	-
Total Comprehensive Income for the Year		24,313	(787,330)

Brain Injury Association of Queensland Inc
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Statement of Financial Position as at 30 June 2012

	Note	2012 \$	2011 \$
Current Assets			
Cash and Cast Equivalents	4	298,131	295,651
Trade and Other Receivables	5	147,042	184,316
Inventories		21,777	18,251
Other Current Assets	6	15,380	4,819
Non-Financial Assets held for sales	7	-	592,827
Total Current Assets		482,330	1,095,864
Non-Current Assets			
Property, Plant and Equipment	8	7,591,156	7,716,083
Total Non-Current Assets		7,591,156	7,716,083
Total Assets		8,073,486	8,811,947
Current Liabilities			
Trade and Other Payables	9	680,769	416,444
Borrowings	10	3,874,197	4,954,631
Provisions	11	187,269	164,385
Total Current Liabilities		4,742,235	5,535,460
Non-Current Liabilities			
Borrowings	10	813,137	809,606
Provisions	11	74,197	47,278
Total Non-Current Liabilities		887,334	856,884
Total Liabilities		5,629,569	6,392,344
Net Assets		2,443,917	2,419,603
Equity			
Accumulated Surplus		2,443,917	2,419,603
Total Equity		2,443,917	2,419,603

Brain Injury Association of Queensland Inc
Trading as Synapse
ABN 75 631 135 125

Statement of Changes in Equity For the year ended 30 June 2012

	Note	Accumulated Surplus \$	Total \$
Balance at 30 June 2010		3,206,933	3,206,933
Deficit for the year		(787,330)	(787,330)
Other comprehensive income for the year		-	-
Balance at 30 June 2011		2,419,603	2,419,603
Surplus / (Deficit) for the year		24,313	24,313
Other comprehensive income for the year		-	-
Balance at 30 June 2012		2,443,916	2,443,916

Brain Injury Association of Queensland Inc
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Statement of Cash Flows

as at 30 June 2012

	Note	2012 \$	2011 \$
Cash Flows from Operating Activities			
Receipts from Clients		6,136,116	4,752,568
Payments to Suppliers and Employees		(5,565,476)	(5,036,910)
Interest Received		21,616	34,579
Finance Costs		(383,396)	(416,203)
Net Cash Provided by / (Used In) Operating Activities	12	208,860	(665,966)
Cash Flows from Investing Activities			
Proceeds from Sale of Property, Plant and Equipment		970,470	66,500
Purchase of Property, Plant and Equipment		(99,948)	(105,981)
Net cash Used in Investing Activities		870,522	(39,481)
Cash Flow from Financing Activities			
Proceeds from Borrowings		3,531	55,887
Repayment of Borrowings		(962,287)	(21,504)
Net Cash Used in Financing Activities		(958,756)	34,383
Net Decrease in Cash Held		120,626	(671,064)
Cash and Cash Equivalents at beginning of Financial Year		63,646	734,711
Cash and cash Equivalents at Beginning of Financial Year	4	184,273	63,646

Brain Injury Association of Queensland Inc
Trading as Synapse
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Statement by the Board of Management

For the year ended 30 June 2012

The Board of Management determined that the Association is not a reporting entity.

The Board of Management has determined that the special purpose financial statements should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

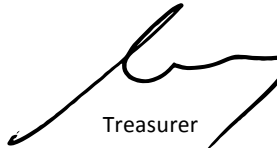
In the opinion of the Board of Management the financial statements as set out on pages 9 to 26:

1. Presents fairly the financial position of the Association – Brain Injury Association of Queensland Inc., as at 30 June 2012, and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that the Association – Brain Injury Association of Queensland Inc., will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Board of Management and is signed for and on behalf of the Board of Management by:


President

Signed at Brisbane
24 September 2012


Treasurer

Brain Injury Association of Queensland Inc
Trading as Synapse
ABN 75 631 135 125

Independent Audit Report For the year ended 30 June 2012



To the Board of Management of the Brain Injury Association of Queensland Inc.

We have audited the accompanying financial report, being a special purpose financial report, of the Brain Injury Association of Queensland Inc., which comprises the Statement of Financial Position as at 30 June 2012, the Statement of Comprehensive Income, the Statement of Changes in Equity and the Statement of Cash Flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information and the Board of Management's declaration for the Brain Injury Association of Queensland Inc. as set out on pages 9 – 26.

Board of Management's Responsibility for the Financial Statements

The Members of the Board of Management are responsible for the preparation and fair presentation of the financial report and have determined that the basis of preparation described in Note 1 to the financial report is appropriate to meet the needs of members. The Board of Management's responsibility also includes such internal control as the Board of Management determine is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Association's preparation of the financial report that gives a true and fair view 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 Association's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Association, as well as evaluating the overall presentation of the financial report.

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

Independence

In conducting our audit, we have complied with the independence requirements of the Australian professional accounting bodies.

Brain Injury Association of Queensland Inc
Trading as Synapse
ABN 75 631 135 125

Independent Audit Report For the year ended 30 June 2012



Auditor's Opinion

In our opinion the financial report of the Brain Injury Association of Queensland Inc.:

- (a) presents fairly, in all material respects the Corporation's financial position as at 30 June 2012 and its performance for the year ended on that date and
- (b) complies with Australian Accounting Standards to the extent described in Note 1.

Basis of Accounting

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared for the purpose of fulfilling the Board of Management's financial reporting responsibilities. As a result, the financial report may not be suitable for another purpose.

Emphasis of Matter

Without modifying our opinion, we also draw attention to Note 1(k) in the financial statements, which indicates that the Association has incurred a net operating loss of \$439,215 during the year ended 30 June 2012 and, as of that date; the Association's current liabilities exceeded its current assets by \$4,259,905. In addition, the Association is currently negotiating with various financial institutions to refinance certain loan facilities that are due for repayment within the next twelve months. As a result, the Association's ability to continue as a going concern is dependent upon returning its operations to a profitable state and the successful refinancing of its current debts.

HLB Mann Judd.

HLB MANN JUDD
Chartered Accountants

CJM KING
Partner

Date: 24 September 2012
Brisbane, Queensland



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