



May



COVID-19 VACCINE CLINIC - MAY 4TH



MEMBERSHIP CODE WORKING GROUP

First Survey on Membership
www.onefeather.ca/nations/henvey

**OFFICES CLOSED
MAY 23, 2022
FOR VICTORIA DAY**

**BAND COUNCIL MEETING
MONDAY MAY 9**

**JOB POSTINGS
INSIDE!**

CHECK INSIDE
FOR WORKSHOP INFO





Community Band Council Meeting

Meetings to be held every 2 months

Monday May 9, 2022

6:00pm @ Firehall

Topics

- Council Reports
- Staff Reports



Medical Transportation Schedule

Reminder to Members who utilize Medical Van to book appointments according to this schedule!

MONDAY	TUESDAY	WEDNESDAY	THURSDAY
SUDBURY	PARRY SOUND	BRITT	SUDBURY

FRIDAYS ARE EMERGENCY ONLY

Thank You for your cooperation!



**Henvey Inlet
First Nation**

Pickereil, ON P0G 1J0

Administration
295 Pickereil River Road
T 705-857-2331
F 705-857-3021
1-800-614-5533

Health Centre
354A Pickereil River Road
T 705-857-1221
F 705-857-0730
1-866-252-3330

Day Care
354B Pickereil River Road
T 705-857-0957
F 705-857-1369

Chief
M. Wayne McQuabbie
Council
Patrick Brennan
Doreen Mckenzie
Lionel Fox
Carl Ashawasagai
Brenda Contin
Maureen Kagagins

MEMORANDUM

To: Member of Henvey Inlet First Nation

Fr: Housing Assistant

Dt: May 2022

Re: **Monthly Home Maintenance tips.**

Here are a few tips to prepare your home for the nice weather ahead.

Inside household tip:

Check washer and dryer hoses for leaks and clean your dryer vent of lint.

Clean your ceiling fans.

Check the screens of your windows and doors for rips and tears.

Outside your home:

Inspect and wash windows look for gaps and leaks that may need weather stripping.

Check your outdoor water faucets for leaks.

Stay posted for information regarding an upcoming Rent incentive workshop.

Heidi Kimberley
Housing Assistant

Are you interested in homeownership / renovating
your existing home or purchasing a home?
Do you need financial counseling?



HOME OWNERSHIP AND YOU

2021 OUTREACH

Confidential one-on-one financial counselling is
available via Zoom or by phone - 7 Days a week



To use Zoom you will need a computer with a
microphone and camera (camera is optional).
The service is available to band members.



For more information
call or text Scott Flamand at
(705) 618-1093 or email
flamandmservices@gmail.com





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MEMORANDUM

To: All Henvey Inlet First Nation Members
From: Samantha Bradley, Human Resources Coordinator
Date: April 27, 2022
Re: Employment Opportunities

Henvey Inlet First Nation is currently accepting applications for the following positions:

- 1) Water Treatment Trainee – 1 Position
- 2) Trailer Park Manager – 1 Position
- 3) Trailer Park Assistant – 1 Position

See attached job postings for more information.

Be sure to check local communication boards or our website at www.hifn.ca/community-2/job-postings-2.html for regular job posting updates.

Miigwetch,

Samantha Bradley, PCP
Human Resources Coordinator



EMPLOYMENT OPPORTUNITY
WATER TREATMENT OPERATOR TRAINEE

RE-POST

POSITION SUMMARY

Henvey Inlet First Nation is seeking a **Water Treatment Operator Trainee** to join our Administration for a short-term contract May 2022 to March 2023. The Water Treatment Operator Trainee reports to the Water Treatment Plant Operator and is responsible for learning the quality control measures that go into providing Henvey Inlet First Nation with safe, potable drinking water. The Water Treatment Operator Trainee will be expected to engage in the continuous learning and training required to prepare for successful completion of the Operator in Training Exam. This position requires a high degree of self-motivation and a strong work ethic.

MAIN RESPONSIBILITIES

The Water Treatment Operator Trainee will be responsible to:

- Attend and complete all required meetings, training, and exams, including the Operator in Training Exam
- Observe, monitor, and eventually operate control systems used in treatment and distribution of water
- Check flow meter gauges and other recording instruments to measure water output
- Review, sample, record and report water quality in appropriate logbooks as required
- Ensure pumps, motors, chlorinators and other equipment are in good operating condition, reporting when maintenance and repairs are required
- Maintain various distribution components including hydrants, valve boxes, and curb stops
- Accompany Water Treatment Plant Operator on call-outs
- Assist Water Treatment Plant Operator with preparation of reports for community and other meetings as required
- Perform other duties as assigned from time-to-time by Chief and Council or the Director of Finance/Administration

QUALIFICATIONS

- Grade 12 diploma or equivalent **required**
- Valid Ontario Class G Driver's License with access to a reliable vehicle
- Previous data collection and analysis experience an asset
- Previous report writing experience an asset
- Current First Aid and CPR Level C an asset
- Current WHMIS training an asset
- Basic computer and typing skills
- Basic mathematical skills
- Exceptional organization and time-management skills
- Strong attention to detail and the ability to multi-task
- Professional attitude and a strong work ethic
- Willingness to work rotating and flexible hours, including occasional weekends, a must

HOURS OF WORK

Full-Time – 35.5 hrs/week

REMUNERATION

\$18/hr

START DATE

As soon as possible

APPLICATION DEADLINE

Posted until filled.

Those interested in applying should submit their resume and cover letter in confidence to:

Henvey Inlet First Nation – Human Resources

295 Pickerel River Rd.

Pickerel, ON P0G 1J0

Tel: (705) 857-2331

Fax: (705) 857-3021

Email: samantha.bradley@henveyinlet.com

We thank all applicants, however only those selected for an interview will be contacted.

Henvey Inlet First Nation gives preference to all qualified First Nations people in accordance with Section 24(1) (a) of the Ontario Human Rights Code.



EMPLOYMENT OPPORTUNITY

TRAILER PARK MANAGER

POSITION SUMMARY

Henvey Inlet First Nation is seeking a **Trailer Park Manager** to join our Administration for a short-term seasonal contract from May 2022 to October 2022. The Trailer Park Manager reports to the Director of Finance/Administration and is responsible for overseeing all daily business operations for the trailer park and marina. This position requires excellent customer service and time-management skills and a high degree attention to detail.

MAIN RESPONSIBILITIES

The Trailer Park Manager will be responsible to:

- Maintain daily records of all operations and duties related to the management of the Trailer Park and Marina
- Prepare and maintain dock schematic including a register of customer names associated with boats and their dock slips with lot numbers
- Maintain docks throughout the season and repair, secure and/or re-anchor docks in event of shifting due to weather
- Maintain grounds through grass cutting, gardening of flower beds, driveway maintenance, and trash/debris collection and removal
- Complete minor repairs relating to plumbing and carpentry issues as required to prolong asset integrity
- Ensure laundry facilities, bathrooms, and maintenance equipment are well-maintained and operational to meet customer needs
- Ensure security of all Trailer Park and Marina equipment (ie - lawnmower, mechanized machinery, monitoring) and buildings
- Maintain positive and ongoing communication with customers with respect to all business-related issues
- Communicate directives to all campers/cottagers for safety purposes and display public notices as required
- Document incidents and communicate with OPP relating to incidents as necessary and required by law
- Record financial information on forms provided, collecting payments and issuing receipts to customers as required
- Deliver all financial documentation to the Financial Administrative Assistant on schedule
- Attend annual Pickerel River Trailer Park opening meeting
- Supervise and support the Trailer Park Assistant through mentoring, coaching, and leading project initiatives
- Oversee time and attendance records for Trailer Park Assistant, including approval and signoff of time sheet and time-off requests
- Participate in performance management and progressive discipline processes within Trailer Park Manager capacity as necessary

QUALIFICATIONS

- Must be 18 years of age or older
- Grade 12 diploma or equivalent
- Possess a valid Ontario Driver's License
- Possess a valid Boat License
- Current CPIC
- Current First Aid and CPR Level C
- Basic carpentry, plumbing and small motor repair experience preferred
- Previous management experience, particularly park management experience, an asset
- Professional and responsible attitude
- Excellent communication and customer service skills
- Willingness to work weekends

HOURS OF WORK

Thursday to Monday - 8:30am-4:30pm - 40 hrs/week

REMUNERATION

\$18/hour

START DATE

May 16, 2022

APPLICATION DEADLINE

May 2, 2022

Those interested in applying should submit their resume and cover letter in confidence to:

Henvey Inlet First Nation – Human Resources

295 Pickerel River Rd.

Pickerel, ON P0G 1J0

Tel: (705) 857-2331

Fax: (705) 857-3021

Email: samantha.bradley@henveyinlet.com

We thank all applicants, however only those selected for an interview will be contacted.

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EMPLOYMENT OPPORTUNITY

TRAILER PARK ASSISTANT

POSITION SUMMARY

Henvey Inlet First Nation is seeking a **Trailer Park Assistant** to join our Administration for a short-term seasonal contract from May 2022 to October 2022. The Trailer Park Assistant reports to the Trailer Park Manager and is responsible for assisting with operations and grounds maintenance for the trailer park and marina. This position requires excellent customer service skills and a strong work ethic.

MAIN RESPONSIBILITIES

The Trailer Park Assistant will be responsible to:

- Maintain docks throughout the season and repair, secure and/or re-anchor docks in event of shifting due to weather
- Maintain grounds through grass cutting, gardening of flower beds, driveway maintenance, and trash/debris collection and removal
- Assist with minor repairs relating to plumbing and carpentry issues as required to prolong asset integrity
- Ensure laundry facilities and bathrooms are always kept clean and have sufficient supply of toiletries at all times
- Ensure security of all Trailer Park and Marina equipment (ie - lawnmower, mechanized machinery, monitoring) and buildings at all times
- Educate campers/cottagers of their responsibilities towards trash management
- Assist with communicating directives to all campers/cottagers for safety purposes and displaying public notices as required
- Maintain ongoing communication with all campers/cottagers, attending to their needs with a customer-service focus
- Assist in documenting incidents and communicating with OPP relating to incidents as necessary and required by law
- Assist with collecting and recording payments and issuing receipts to customers as required
- Be aware of and assist with maintaining the register of customer names associated with boats and their dock slips with lot numbers
- Support Trailer Park Manager in maintaining daily records of business operations and duties in their absence

QUALIFICATIONS

- Must be 18 years of age or older
- Grade 12 diploma or equivalent
- Possess a valid Boat License
- Current CPIC
- Current First Aid and CPR Level C
- Basic carpentry, plumbing and small motor repair experience an asset
- Previous maintenance experience, particularly park maintenance experience, an asset
- Excellent customer service skills
- Reliable to work flexible hours, including weekends

HOURS OF WORK

40 hrs/week

Tuesday and Wednesday – 8:30am-4:30pm

Thursday to Saturday – 11:30am-7:30pm

REMUNERATION

\$16/hour

START DATE

May 16, 2022

APPLICATION DEADLINE

May 2, 2022

Those interested in applying should submit their resume and cover letter in confidence to:

Henvey Inlet First Nation – Human Resources

295 Pickerel River Rd.

Pickerel, ON P0G 1J0

Tel: (705) 857-2331

Fax: (705) 857-3021

Email: samantha.bradley@henveyinlet.com

We thank all applicants, however only those selected for an interview will be contacted.

Henvey Inlet First Nation gives preference to all qualified First Nations people in accordance with Section 24(1) (a) of the Ontario Human Rights Code.



HENVEY INLET FIRST NATION WINDFARM LEGACY TRUST

Quarterly Payments to Eligible Members **July 1, 2022 Payment Reminder!**

If you have not submitted your banking information
OR

have new/updated bank accounts
Please follow the instructions below:



Photo/Image of Member's Status Card

Provide a photo/image of
your Status Card



Submit Deposit Form

Complete a direct deposit
form or Void Cheque in
your name from your bank



Contact Information

MUST include:

1. Legal name
2. Address
3. Phone #
4. Email address



Await Transfer

Payments are made beginning of the new quarter.

Q2 Payment date: On or Before July 1, 2022

Deadline to submit: May 27, 2022

Late submissions (after May 27, 2022) will be held & administered at next quarter payment schedule

Email your full information to: **Lyndy McQuabbie**, Trust Coordinator
trustcoordinator@henveyinlet.com



To: All Henvey Inlet First Nation Members

From: Henvey Inlet First Nation Membership Code Working Group

Date: April 20, 2022

Re: **First Survey on Membership**

The HIFN Membership Code Working Group has been working on an update of the 1987 Henvey Inlet First Nation Membership Code and needs your input!

Due to the ongoing Covid-19 pandemic, we are beginning our community engagement with a short survey on membership. This allows us to start gathering community opinion on key issues, for discussion at future in-person community meetings when the situation permits.

The first survey is a short questionnaire focusing on the relationship between *Indian Act* status and membership. A resource handout will be provided along with the survey to explain terms you may not understand and assist you in answering the questions. Your responses will help guide future community engagement initiatives and inform our approach to updating HIFN's membership rules.

The survey will be accessible beginning **April 25, 2022** through OneFeather, an online voting tool. OneFeather is a software that will help the Working Group to collect, compile, and tabulate all the survey responses. While we will be able to see who has completed the survey, the survey responses themselves will remain anonymous.

HIFN members must first sign up through OneFeather in order to access the survey.

This can be done by going to <https://www.onefeather.ca/nations/henvey> and clicking the **red** button on the top right of the page. This will guide you through the sign-up and account activation processes. Please note the following:

- Your status number will be required during sign-up. This is to verify your identity and confirm your eligibility to complete the survey.
- If you do not receive an activation email in your inbox after completing the sign-up process, please check your junk mail before reaching out for assistance.
- Please update your personal information, including email address and phone number, if it is missing or incorrect. This will ensure that we have the proper contact information on file for future surveys and voting events.

Once you have completed the sign-up and account activation steps, you will be able to access and fill out the survey from the home page.

If you have any issues accessing or completing the survey and require assistance, please contact any of the following members of the Working Group:

- Megan Bradley at mbradle@icloud.com
- Annette Cristo at ACristo@outlook.com
- Brenda Contin, by phone at 705-857-1221 (office) or 705-923-0482 (cell), or by email at brenda.contin@henveymedicalcentre.com

OneFeather also provides support if you are having any technical difficulties. They can be reached by phone at 1-855-923-3006 or by email at support@onefeather.ca.

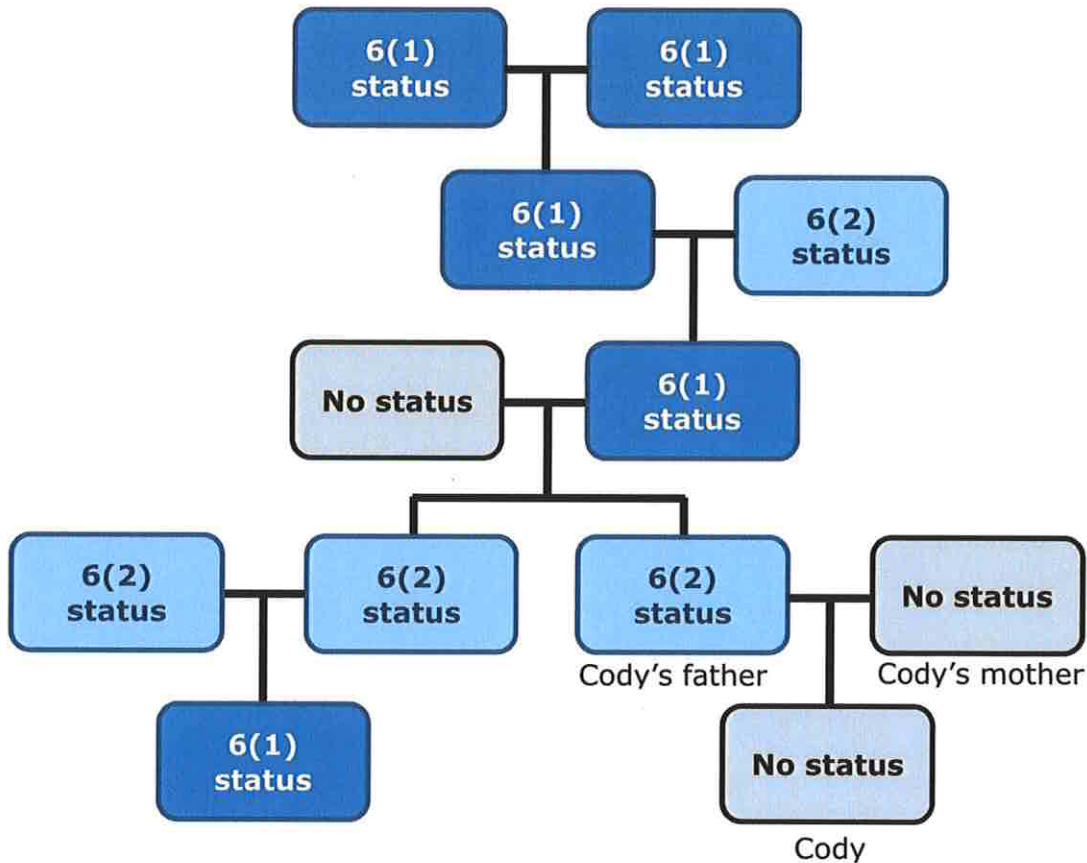
Members have until **May 31, 2022** to complete the survey.

We look forward to receiving everyone's responses!

HIFN MEMBERSHIP CODE SURVEY #1 Resource Handout

What is 6(2) status?

The *Indian Act* creates two kinds of status: 6(1) status and 6(2) status. The difference between 6(1) status and 6(2) status is in an individual's ability to pass on entitlement to registration under the *Indian Act* to their children, depending on who they parent with. A chart illustrating how *Indian Act* status is passed on is set out below:



What does s. 2(a)(ii) of HIFN's 1987 Membership Code say?

2. ENTITLEMENT AS OF RIGHT

a. The following persons are entitled to enrollment on the Citizenship List, provided always that such persons have 50% Indian blood as determined by this Code and apply for on citizenship [sic] the basis of descent from a person who acquired his other [sic] membership by descent from a member:

ii. Persons descended from First Nation Citizens, whether or not those persons also have Indian status as defined by the laws of Canada, provided that children also entitled by descent to membership in another Band in Canada or Tribe in the United States will only be enrolled if a consent from the non-citizen parent is filed with the First Nation Council.

As adopted June 22, 1987

THE MEMBERSHIP CODE OF THE HENVEY INLET FIRST NATION

1. DEFINITIONS

- a. "First Nation" means the Henvey Inlet Indians which shall consist of all persons enrolled or entitled to be enrolled on the Citizenship List, and First Nation shall have the same meaning as "Band" within the meaning of the *Indian Act*, R.S.C. 1970, c.1-6, as amended.
- b. "First Nation Council" means the Chief and Council of First Nation as selected by Band custom or as elected in accordance with the *Indian Act*.
- c. "First Nation Territory" refers to all lands and interests in land set apart under any terms or conditions for the use and benefit of the First Nation or over which the First Nation or First Nation Council has management and control.
- d. "Citizenship List" means the register of persons enrolled as members pursuant to this Code.
- e. "Child" refers to persons under the age of eighteen years born to a citizen.
- f. "Elector" means a member of the First Nation eighteen years of age or older.
- g. "Indian" means a person who is Indian within the meaning of the *Indian Act*.
- h. "Marriage" includes a common law relationship.

2. ENTITLEMENT AS OF RIGHT

- a. The following persons are entitled to enrollment on the Citizenship List, provided always that such persons have 50% Indian blood as determined by this Code and apply for on citizenship [sic] the basis of descent from a person who acquired his other [sic] membership by descent from a member:
 - i. Persons registered or entitled to be registered as citizens of the Henvey Inlet First Nation on the date this Code comes into force, except that no person who, but for this Code would otherwise qualify for band membership pursuant to sec. 11 (2) of the *Indian Act*, R.S.C. 1970, c. 1-6, as amended by S.C.1985, c. 27, shall be admitted to citizenship in the First Nation, and
 - ii. Persons descended from First Nation Citizens, whether or not those persons also have Indian status as defined by the laws of Canada, provided that children also entitled by descent to membership in another Band in Canada or Tribe in the United States will only be enrolled if a consent from the non-citizen parent is filed with the First Nation Council.
- b. For the purposes of this Code, all persons described in paragraph (a)(i) shall be deemed to have 100% Indian blood.

- c. Where a person claims 50% or more Indian blood for the purpose of applying for enrollment and is not deemed to have 100% Indian blood by clause (b), the applicant must provide a declaration in the form prescribed by the First Nation Council signed by three Citizen members, one of whom must be an elector, and all of whom have knowledge of the applicant's lineage and can confirm his or her degree of Indian blood.

3. OTHER ENTITLEMENTS

- a. The following persons may be entitled to enrollment as Citizens of the First Nation:
 - i. Indian spouses of First Nation Citizens;
 - ii. Citizens of other First Nations or Bands in Canada or Tribes in the United States who wish to transfer citizenship to the First Nation;
 - iii. Former members of the First Nation who have transferred to other Bands in Canada or Tribes in the United States and now wish to re-apply for citizenship in the First Nation;
 - iv. Former members of First Nation who were enfranchised for reasons other than marriage to a Non-Indian.
- b. Persons described in clause (a) will only become enrolled as citizens if the First Nation Council is prepared to recommend their applications to the electors of the First Nation and a majority of the electors approve the application by secret ballot at a special meeting called for the purpose.
- c. Persons applying under this section for enrollment must be prepared to satisfy the First Nation Council and the electors that:
 - i. They qualify as having 50% Indian blood;
 - ii. They are self-sufficient and will make a valuable contribution to the community;
 - iii. They are willing to participate in the First Nation's culture, language and traditions.

4. RESIDENCY

- a. The following persons are entitled to reside on First Nation Territory subject to First Nation Laws and to the prior interests of others including the common interest of the First Nation itself in its lands:
 - i. Any person married to a citizen of the First Nation who is not a citizen of the First Nation; and
 - ii. Any child adopted by a citizen of the First Nation who is not a citizen of the First Nation.

- b. All persons other than citizens, those described above in clause (a) or otherwise lawfully in possession of First Nation Territory with the approval of the First Nation Council, are trespassers if they attempt to use, exercise rights or claim any interest in First Nation Territory.
- c. The First Nation Council may grant residency rights to any person for a period not exceeding one year on application in the prescribed form, but no right of renewal shall be expressed, implied or enforceable in any way.
- d. For greater certainty, no person described in clause (a) or(c) acquires any other rights by virtue only of acquiring a right to reside on First Nation Territory.

5. TRANSFERS TO OTHER BANDS

- a. Citizens may transfer to any other Band in Canada or Tribe in the United States if the Council of the admitting Band or Tribe consents. Persons who transfer to another Band or Tribe shall no longer be enrolled as citizen.

6. ADOPTION

- a. No children who are, or are entitled as of right to be, First Nation Citizens shall be adopted by non-citizens without consent of the First Nation Council. Such adoption has no effect on their entitlement to enrollment as citizens of the First Nation.

7. ADMINISTRATION

- a. All matters relating to the processing of applications for enrollment, maintenance of the Citizenship List, membership votes and appeals shall be regulated by the First Nation Council.

8. APPLICATIONS

- a. Any person seeking enrollment as a citizen must make an application in writing to the Henvey Inlet First Nation council and, if the applicant is a child, this may be done by a parent or guardian on behalf of the applicant.
- b. The onus is on the applicant to demonstrate entitlement to enrollment as a citizen.
- c. Decisions as to entitlement and enrollment shall be made by the First Nation Council and notice shall be given in a reasonable manner to the applicant and the First Nation of any decision. Such decisions are final and binding unless appealed within the prescribed period.

9. APPEALS

- a. Any applicant, any First Nation citizen or the representative of either may initiate an appeal of a citizenship decision of Council by lodging an appeal in writing with the Council within 60 days of notice of the decision. The appeal shall set out the particulars of the decision and the grounds for the appeal.

- b. Upon receipt of an appeal, Council shall arrange for 30 days clear notice to be given to electors of the particulars of the appeal and the date of a general meeting to consider the appeal.
- c. At the general meeting, any citizen and, with the consent of the member of Council presiding any other person may speak to the issue of the appeal. The matter shall then be final and binding.

10. GENERAL PROVISIONS

- a. The First Nation and all citizens of the First Nation shall be immune to civil liability for any act, omission or statement made in good faith in relation to membership matters.
- b. No person shall receive any payment out of the funds of the First Nation by virtue of enrollment, transfer or resignation at any time.
- c. The provisions of this Code shall be conclusively deemed to be consistent with the aboriginal and customary practices of the First Nation.
- d. Council may appoint by Band Council Resolution a Citizenship Committee, which shall consist only of registered Band Members, to perform the duties assigned to Council in Paragraphs 3 (b), 3(c), 8(c) and 9(b).

Upcoming Recycling Workshop!!



Please be advised that a recycling workshop will be hosted at the end of May, so look in your mailboxes for further details!!

Start jotting down any questions that you may have!!!

**NEW GARBAGE
DATES TO BE
ANNOUNCED!**

**KEEP YOUR EYE
OUT FOR FLYERS
TO BE
CIRCULATED!**

Do your part in saving
the environment.



GARBAGE AND RECYCLING PICKUP DAYS

Our First Transfer Station Pickup date is Wednesday November 3, 2021

Sunday	2:00pm – 6:00pm	Garbage
Wednesday	8:00am – 12:00pm	Recycling

You are responsible for cleaning out your own garbage bins.

NEW RECYCLING PROCEDURE

Now that we will be using our transfer station and are sending our trash and recycling to other outlets, we need to follow their protocols. We will now have a three-stream recycling bin to assist with this and we will be using each bin for different recyclable items.

1. Each bin **must** be lined with a **clear liner (transparent or blue clear is fine)**. **ONLY** garbage will be placed in black garbage bags. If only black bags are coming from a residence, pickup will be discontinued until a meeting with the Lands Office has been done.
2. The blue bin is for plastics, the yellow bin is for metals and the green bin is for paper. Cut all boxes and either tie them together or use one box as a bin for them. Glass needs to be placed in a separate bin, which has not been provided but the old recycling bin can be used for this with a clear liner. If there is any broken glass, please put all pieces within a small container i.e., margarine/butter container, coffee bin.
3. There are no bag limits for recycling but there is a two (2) garbage bag limit per each household, so **ONLY two garbage bags will be picked up per week.**
4. Garbage pickup days are Sundays and recycling pickup days are Wednesdays. No other items will be picked up on each set day.
5. If there is a difference between the accepted lists that were provided and the plastic resins list, follow the accepted lists as this was provided directly to us whereas the plastics resins list is a generic information page.

This procedure was procured by our Waste Contractor and approved by Council.

Cardboard
Metals/Cans
Plastics



9-1-1 now in Henvey Inlet First Nations.

Introducing 9-1-1 for emergency calls to fire, police and ambulance services.

If you are not in this area, please consult your local telephone directory or check with your municipal office for emergency numbers in your area.

What is 9-1-1?

9-1-1 is a single emergency telephone number that makes it faster and easier for anyone to reach **police, fire, or ambulance emergency services.**

The three-digit number, **9-1-1**, is short and easy to remember. Your call will be answered at the Public Safety Answering Point (PSAP) for your municipality. The **9-1-1** operator will then forward your call to the appropriate agency — police, fire or ambulance.

How much does it cost?

You now have access to enhanced **9-1-1** service for a fee of 13¢ per line, per month. This charge will be listed on your phone bill and covers the cost of providing and maintaining the telephone network portion of your municipality's **9-1-1** system.

With enhanced **9-1-1** service, the address you are calling from will automatically be displayed to the **9-1-1** operator. The necessary emergency services can then be dispatched. Please note: this does not apply to cellular phones or four-party service.

Take the time to teach all members of your household the importance of 9-1-1 and celebrate a safer Ontario, together.

Important

If you need police, fire or ambulance services in a **non-emergency situation**, please refer to your phone book for the ten-digit numbers.

Police/OPP: 705 857 2121

Fire: 705 857 2121

Ambulance: 705 857 2121

How to use 9-1-1

- If at home, dial 9-1-1.
- If at a business or other location, you may need to dial an outside line before dialing 9-1-1.
- If at a pay phone, dial 9-1-1. No payment required.
- If using a cellular phone, dial 9-1-1 and give the exact location of the emergency, including city or town.
- T.T.Y./Teletypewriter users only: after dialing, press the space bar intermittently until a response is received.
- When your call is answered, the 9-1-1 operator will ask: police, fire or ambulance? Indicate the emergency service you need.



Information From HIFN Fire Department

Carbon Monoxide

Please be advised that the Chief Fire Official has the authority to enforce the Fire Code within his or her jurisdiction and should be contacted prior to implementing any opinion expressed in the following information.

Visit the Office of the Fire Marshal and Emergency Management website for a list of questions/answers pertaining to the legislation. [Visit their website now.](#)

Ontario is taking another step to keep families and homes in Ontario safe by making carbon monoxide alarms mandatory in all residential homes.

The new regulation, which comes into effect October 15, 2014, updates Ontario's Fire Code following the passage of Bill 77 last year. These updates are based on recommendations from a Technical Advisory Committee which was led by the Office of the Fire Marshal and Emergency Management and included experts from fire services, the hotel and rental housing industries, condo owners and alarm manufacturers.

Carbon monoxide alarm will now be required near all sleeping areas in residential homes and in the service rooms, and adjacent sleeping areas in multi-residential units. Carbon monoxide alarms can be hardwired, battery-operated or plugged into the wall.

Broadly speaking, these amendments will have the following effect:

- Testing and maintenance requirements that apply to smoke alarm now apply to CO alarms
- Under the Fire Code amendments, CO alarms will be required in existing residential occupancies, where:
 - Single dwelling homes (e.g., privately owned homes) have an attached storage garage and/or a fuel burning appliance.
 - CO alarms will be required only near sleeping areas of these occupancies and not throughout the entire home.
 - Multi-unit buildings (e.g., apartment buildings or condominium buildings, hotels, etc.) have an attached storage garage and/or a fuel burning appliance/service room. Within these buildings, CO alarms will only be required:
 - Near sleeping areas of suites that contain a fuel burning appliance within the suite.
 - Near sleeping areas of suites that are adjacent to a storage garage and/or service room with a fuel burning appliance.

Link to Ontario Regulation 194/14: http://www.e-laws.gov.on.ca/html/source/regs/english/2014/elaws_src_regs_r14194_e.htm

Quick Facts

- More than 50 people die each year from carbon monoxide poisoning in Canada, including 11 on average in Ontario.
- Bill 77, an Act to Proclaim Carbon Monoxide Awareness Week and to amend the Fire Protection and Prevention Act, 1997, received royal assent in December 2013.
- The first Carbon Monoxide Awareness Week will take place November 1-8, 2014.
- The Ontario Building Code requires the installation of carbon monoxide alarms in homes and other residential buildings built after 2001.

Why Should I Care About Carbon Monoxide?

It Kills.

Many Canadians die every year from carbon monoxide poisoning in their own homes, most of them while sleeping.

It Injures.

Hundreds of Canadians are hospitalized every year from carbon monoxide poisoning, many of whom are permanently disabled. Everyone is at Risk - 88% of all homes have something that poses a carbon monoxide threat.

Carbon Monoxide is a colourless, odourless, tasteless, toxic gas that enters the body through the lungs during the normal breathing process. It replaces oxygen in the blood and prevents the flow of oxygen to the heart, brain and other vital organs.

Where does Carbon Monoxide Come From?

Produced when carbon-based fuels are incompletely burned such as:

- Wood
- Propane
- Natural Gas
- Heating Oil
- Coal
- Kerosene
- Charcoal
- Gasoline

What Are the Main Sources of Carbon Monoxide in my Home?

Wood burning/gas stoves, gas refrigerators, gasoline engines, kerosene heaters and others.

How Can I Tell if There is a Carbon Monoxide Leak in my Home?

- Headache, nausea, burning eyes, fainting, confusion, drowsiness.
- Often mistaken for common ailments like the flu
- Symptoms improve when away from the home for a period of time
- Symptoms experienced by more than one member of the household.
- Continued exposure to higher levels may result in unconscious, brain damage and death.
- The elderly, children and people with heart or respiratory conditions may be particularly sensitive to carbon monoxide.

Environment

- Air feels stale/stuffy
- Excessive moisture on windows or walls
- Sharp penetrating odour or smell of gas when furnace or other fuel burning appliance turns on.
- Burning and pilot light flames are yellow/orange, not blue
- Pilot light on the furnace or water heater goes out
- Chalky white powder or soot build up occurs around exhaust vent or chimney.

How Can I protect Myself and my Family?

- Regularly maintained appliances that are properly ventilated should not produce hazardous levels of carbon monoxide
- Have a qualified service professional inspect your fuel burning appliance(s) at least once per year.
- Have your chimney inspected and cleaned every year by a W.E.T.T. certified professional.
- Be sure your carbon monoxide alarm has been certified to the Canadian Standard Association (CSA) CAN/CGA 6.19 standard or the Underwriters Laboratories (UL) 2034 standard.
- Install a carbon monoxide alarm in or near the sleeping area(s) of the home.
- Install the carbon monoxide alarms(s) in accordance with the manufacturer's instructions.

What Should I Do if my Carbon Monoxide Alarm Starts Beeping?

ALWAYS REACT TO A CARBON MONOXIDE ALARM THAT HAS ALARMED! GET OUT OF YOUR HOME AND CONTACT YOUR LOCAL FIRE DEPARTMENT FOR ASSISTANCE.

To Keep Safe Please Remember:

You have a responsibility to know about the dangers of carbon monoxide. Your knowledge and actions may save lives.

A carbon monoxide alarm is a good second line of defense. It is not a substitute for the proper care and maintenance of your fuel burning appliance(s). Take the time to learn about the use of carbon monoxide alarms in your home to ensure you are using the equipment properly and effectively.

Where To Install A Carbon Monoxide Alarm

Since carbon monoxide moves freely in the air, the suggested location is in or as near as possible to sleeping areas of the home. The human body is most vulnerable to the effects of carbon monoxide during sleeping hours. To work properly the unit must not be blocked by furniture or draperies. Carbon Monoxide is virtually the same weight as air and therefore the alarm protects you in a high or low location.

For maximum protection, a carbon monoxide alarm should be located outside primary sleeping areas, in sleeping areas and in each level of your home.

Where NOT to Install a CO Alarm

Some locations may interfere with the proper operation of the alarm and may cause false alarms or trouble signals.

CO alarms should not be installed in the following locations:

- Where the temperature may drop below 4.4o C (40oF) or exceed 37.8oC (100oF).
- Near paint thinner fumes or household cleaning products. Ensure proper ventilation when using these types of chemicals.
- Within 1.5m (5 feet) of any cooking or open flame appliances such as furnaces, stoves and fireplaces.
- In exhaust streams from gas engines, vents, flues or chimneys.
- Do not place in close proximity to an automobile exhaust pipe; this will damage the alarm.

Maintenance

Test your carbon monoxide alarm regularly to make sure it is operating properly. The owner's manual should tell you how to test your alarm. Remember to check the manual for information on when to buy a new carbon monoxide alarm.

If you have any questions regarding CO safety, please contact your local fire department.

First Alert



Protect What Matters Most

SYMPTOMS OF CARBON MONOXIDE

DID YOU KNOW?

CARBON MONOXIDE (CO)
Cannot be seen, and has no smell or taste.

WAITING UNTIL POISONING HAS OCCURRED IS TOO LATE. SYMPTOMS CAN OCCUR IN LESS THAN 20 MINUTES IF CONCENTRATIONS BECOME TOO HIGH.



Symptoms can include:

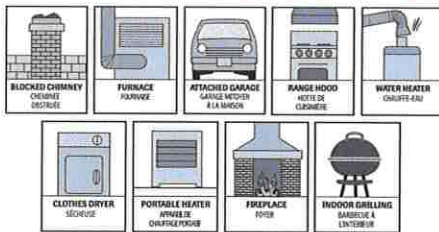
- Shortness of breath
- Headache
- Nausea
- Dizziness
- Confusion
- Drowsiness
- Impairment of vision or hearing

FIRST ALERT ALARMS ARE POWERED BY DURACELL BATTERIES



WHERE DOES CARBON MONOXIDE COME FROM?

POTENTIAL SOURCES OF CO



There are many potential sources of CO in your home that you and your family use every day. When operating properly the trace amounts of CO produced are typically not dangerous, and are vented safely outside your home.

Problems arise when something goes wrong (an appliance malfunctions, vents clog, debris blocks a chimney or flue, exhaust seeps into your home from the garage). All of these problems could increase the CO to dangerous levels.

"Carbon Monoxide is the leading cause of fatal poisonings in North America..."
- Canadian Safety Council

PLACEMENT OF ALARMS AND EXTINGUISHERS



Smoke & Fire Alarm Carbon Monoxide Alarm Fire Extinguisher

AVAILABLE AT



SAVE MONEY ON PRODUCTS THAT SAVE LIVES
See attached printable coupons

Learn more at firstalert.ca and brkcanada.ca





FIRE SAFETY HOME VISITS

A Member of Henvey's Fire Department will be doing Home Visits during the Month of May, to educate homeowners on fire safety and prevention or to answer any questions they may have.

An inspection will be done on all fire related items (extinguishers, smoke detectors, fire places etc.)
(This is not an inspection for renovation)

**Fire
prevention
starts
with you!**

HIFN Fire Department:
(705) 857-2121

Ambulance/Police (OPP):
(705) 857-2121

For Emergencies dial 9-1-1





Fire Safety Tips for Your Home

Fire detectors save lives

Install smoke and carbon monoxide detectors and remember to charge the batteries.

Create an escape plan

Ensure all members of the family know the emergency exits at home in case of fire.

Switch off appliances

Double check and make sure appliances are not left running after use.

Monitor your extinguishers

Constantly check your fire extinguishers and replace as necessary.

Clean vents and dryers

Clean lint filters after use and ensure all vents are unobstructed.



**BE AWARE AND
STAY SAFE!**

EDUCATION NEWS



EXCITING NEWS!!!

HIFN has purchased Playground Equipment for Britt School. We are hoping to have it installed and fully available to the students by May 31st! A small grant from Ontario Hydro was also used to fund this project. Gchii -miigwech!

REMINDERS

This year there are no parent-teacher interviews at the high school however parents are reminded to reach out to your children's teachers if you have any concerns. You can also contact our Grad Coach, Lynn Rider. Students are also encouraged to contact Lynn for support.

POST SECONDARY APPLICATIONS

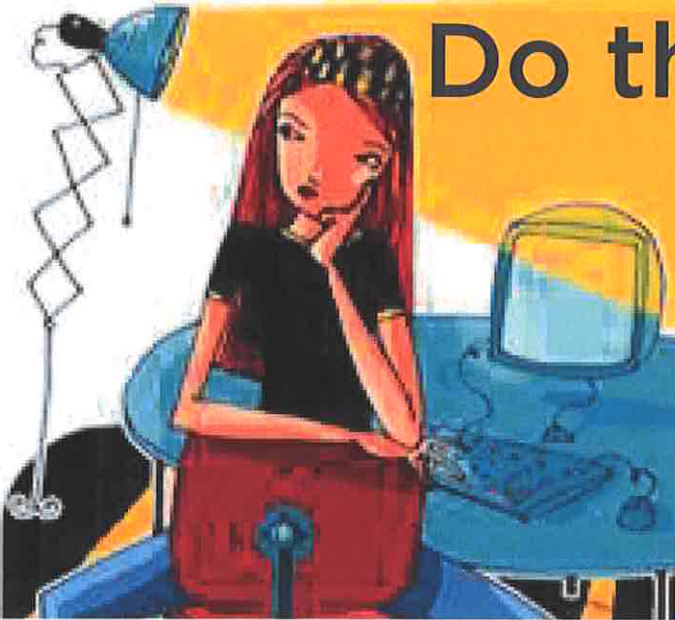
Students applying to College or University must submit their applications by May 15th in order to be considered for funding next September. The HIFN Application and the Post-Secondary Policy are available at hifn.ca or you can pick them up at the Education office. Anyone needing assistance with this is encouraged to stop by the Education office.

STUDENT VOLUNTEER HOURS

Students who begin recording their volunteer hours this year will only need to complete 20 hours due to the pandemic. If you do not start them until next year, you will need to get 40 hours. If you need help with this, please contact Genevieve at the band office.

MIIGWETCH, Genevieve

Do the Right Thing!



You may not realize it, but you have a lot of power when you're online: you can cheer people up, make them laugh, and help to make your school, your town or even the whole world a better place. The flip side is that what you do can make things worse, too. That's why you have to think about what you say and do online, and try your best to do the right thing.

Doing the right thing online mostly comes down to the **three R's of respect: respect people's privacy, respect people's feelings and respect people's property.**

Respect People's Privacy

Our friends share stuff with us all the time: pictures they took, what they're thinking, even where they are. Every time a friend shares something with you, you have to decide whether you should share it with anybody else.

Here are some things to think about when you're making that call:

What might happen if what I'm sharing gets sent to people who weren't supposed to see it? How will my friend feel if their parents see it? Their teachers? Their friends, girlfriends or boyfriends?

If there are other people in what your friend shared with you, think about this:

- How will they feel if I share this this?
- Is there anything they'd be worried about?

Respect People's Feelings

Sometimes we don't realize how the things we do and say online make other people feel. That's because we don't see or hear a lot of the things that let us know how someone is feeling, like the look on their face or how their voice sounds.

Here are some things to think about when you're talking to people online:

- **Griefing, trolling and pranking are pretty common in a lot of online places.** Sometimes this is just "part of the game," but before you get into it you should think about how what you're doing or saying might feel to the other person. Also, remember that the rules are different in different places: stuff that's normal to do in your favourite online game might not be OK when you're talking to your friends.

- **It's really easy for drama to get started online, and it's just as easy for it to blow up into something serious.** When you read or see something online that gets you angry, take the time to cool down before you reply. Ask yourself if maybe you're reading it wrong and seeing things that the person who wrote it didn't mean to say. Finally, if drama does get started between you and somebody else, try talking to them in person to sort it out.
- **If one of your friends gets involved in drama or is being picked on by a bully, ask them what you can do to help.** It's great to stand by your friends, but just taking their side against somebody else might make things worse: most of the time, people who've been bullied say that what helps them the most is to have somebody listen and give them support.
- **If you have a boyfriend or girlfriend, don't get into things like keeping tabs on where they are or watching who they're texting or talking to online.** Don't ever ask your girlfriend/boyfriend for a picture or anything else that he or she doesn't want to share. If your boyfriend or girlfriend does any of those things to you, you should talk to your parents, your friends, an adult you trust or a helpline about it.



Respect People's Property

The Internet can feel like a great big mall, and most of the time there's no security guards to make sure we're not stealing anything. That doesn't mean that you don't have to show respect for the people who made all of the games, videos, music and other great stuff that's online.

Here are some things to think about when you're watching, listening to or playing stuff online:

- **Just because something's online doesn't mean you can take it and use it.** For things you are allowed to use, always give credit to the person or company who owns the copyright.
- **It's also not true that you can do anything you want so long as you give credit to the person who made it.** That's important, but you also need to respect what they want done with it: when somebody makes something like a game, a song or a movie, they own it and they deserve to control what happens to it. They may choose to give it away, but if they want to charge for it that's their right. With all the stuff that's free online, if something isn't free it's because the person who made it expects to get paid. Check out our tip sheet *Getting the Goods Ethically* for info on how to find what you want online.
- **Don't think that cheating a big company is different from cheating a person.** For one thing, selling and licensing the stuff they make is how a lot of artists make a living: if companies stop doing this because they aren't making money, it's the artists who suffer.
- **Respecting people's property also applies to using someone else's work in essays and assignments.** Sometimes plagiarism is accidental: for instance, most students know that copying whole assignments is cheating, but they may not know that rephrasing things and stitching them together to look like their own work counts as cheating as well. Remember, if you can find something online, so can your teacher, so play it safe and make sure you give the source for any ideas that aren't yours.
- **There can be lots of pressure when assignments are due, but don't take short cuts.** If you copy something somebody else wrote for your school work, you're not only cheating that person, you're really cheating yourself out of a chance to learn something and you're cheating all the other kids in your class – the ones who didn't copy – as well.

ONTARIO WORKS NOTICE

DROP IN @ LEARNING CTR.

MONDAY, MAY 16TH, 2022

10 A.M. TILL 12 NOON

**MORNING SNACKS PROVIDED AND
3 DRAWS FOR DOOR PRIZES!**



MIIGWECH



WE ARE HIRING!!

Open to Shwe Miikaan job seekers and businesses
Come learn more about opportunities with
Shwe Miikaan Miller 2020 LP at the job fair!

Upcoming Job Postings:

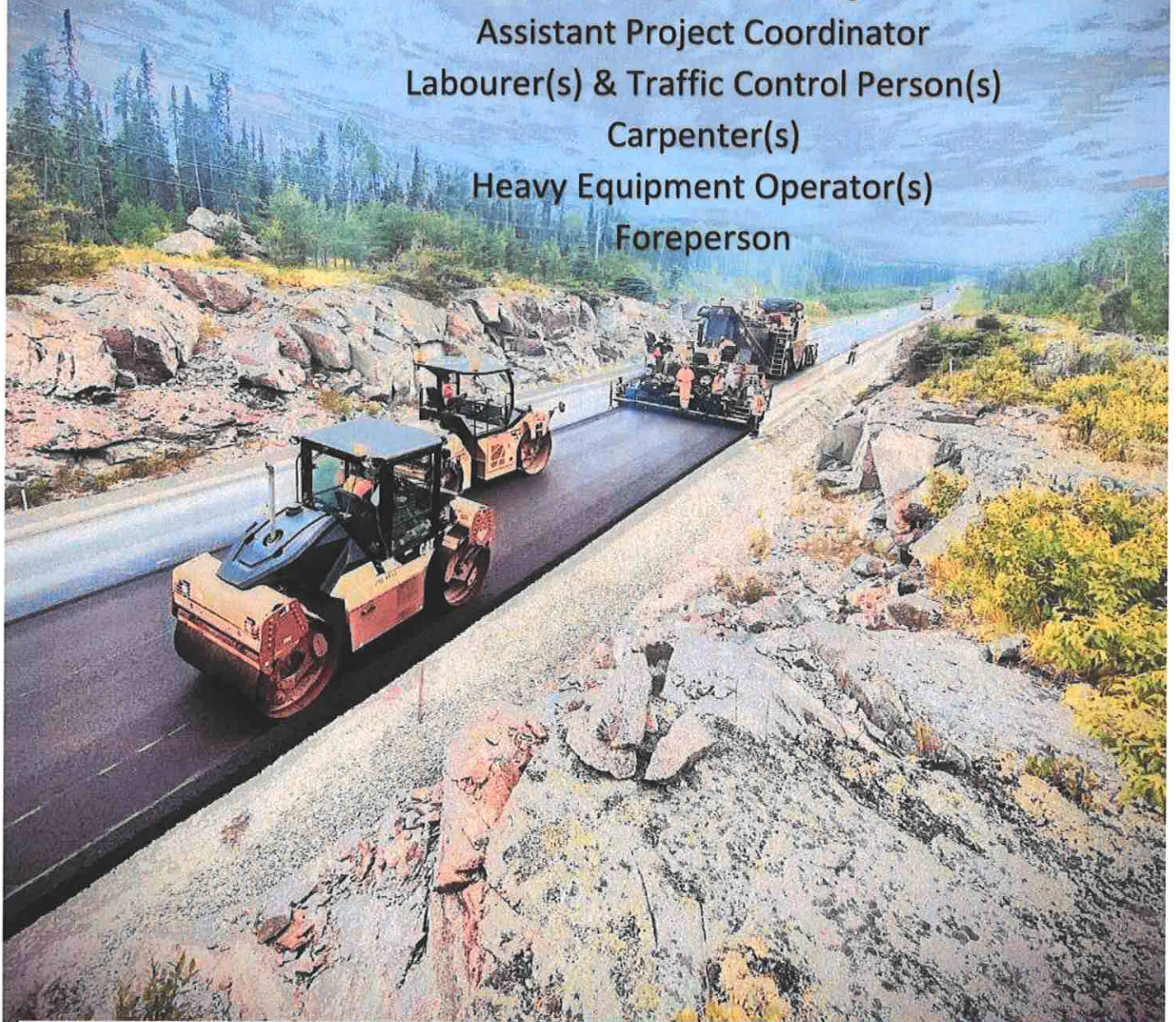
Assistant Project Coordinator

Labourer(s) & Traffic Control Person(s)

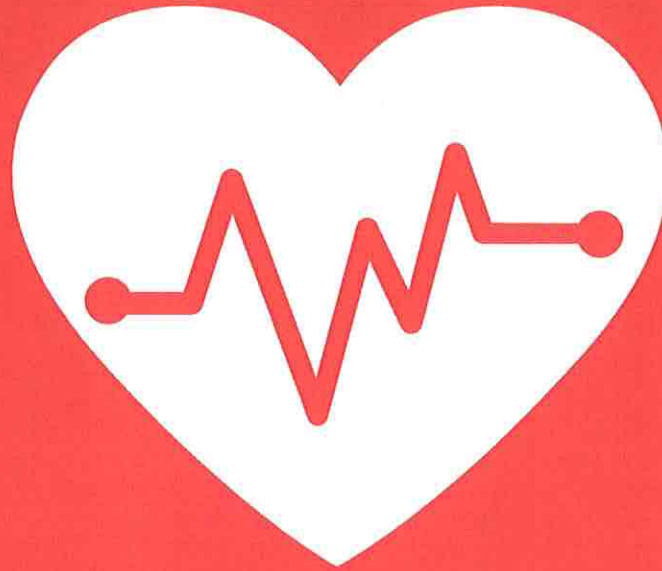
Carpenter(s)

Heavy Equipment Operator(s)

Foreperson



When: May 12, 2022 **Where:** Magnetawan Band Office **Time:** 2 p.m. - 5 p.m.



SAVE THE DATE!

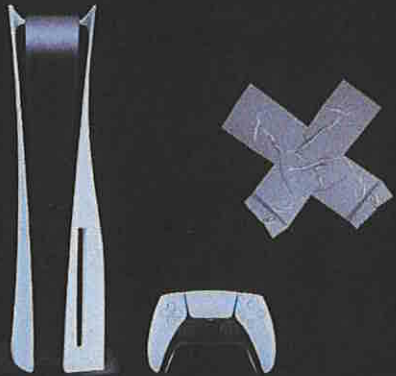
FIRST AID/CPR is being
planned for
July 4 to 8, 2022
**MANDATORY FOR STAFF
TO ATTEND**
Call Health Centre to add name to
list!

HENVEY INLET POW WOW COMMITTEE



FUNDRAISER FOR POW WOW

\$5000 CASH DRAW



2ND PRIZE: PS5
GAMING EXT
PACKAGE



3RD PRIZE:
\$1000 CASH

Draw Date : Sunday June 12, 2022

TICKETS \$20 EA. EMT'S ACCEPTED!

TICKETS AVAILABLE @ S&N STORE/HIFN GAS BAR

FOR MORE INFO VISIT: HENVEY INLET 2022

POW WOW FACEBOOK PAGE



LIC. # 2022/23-001R



HENVEY INLET FIRST NATION 19TH ANNUAL TRADITIONAL POW WOW



"HONORING OUR MEN"

JUNE 11 & 12, 2022

Host Drum:

THUNDER EARTH

M.C.:

DARREN MCGREGGOR

Co-Host Drum:

**BLACK BULL
MOOSE**

Head Dancers:

**MALE DANCER- LORNE PAWIS
FEMALE DANCER- TEE MCGREGGOR**

Arena Director:

ROBERT STONEYPOINT

GRAND ENTRY SATURDAY @ 12PM

COMMUNITY FEAST @ 5PM

CAMPING AVAILABLE, WE ARE LOCATED 45 MINS SOUTH OF SUDBURY AND 1 HOUR NORTH OF PARRY SOUND. (PICKEREL RIVER ROAD EXIT)

DRUG & ALCOHOL FREE EVENT

Contact Info: Kimberly McQuabbie kmcquabbie@gmail.com



ON THE LAND
Adventure

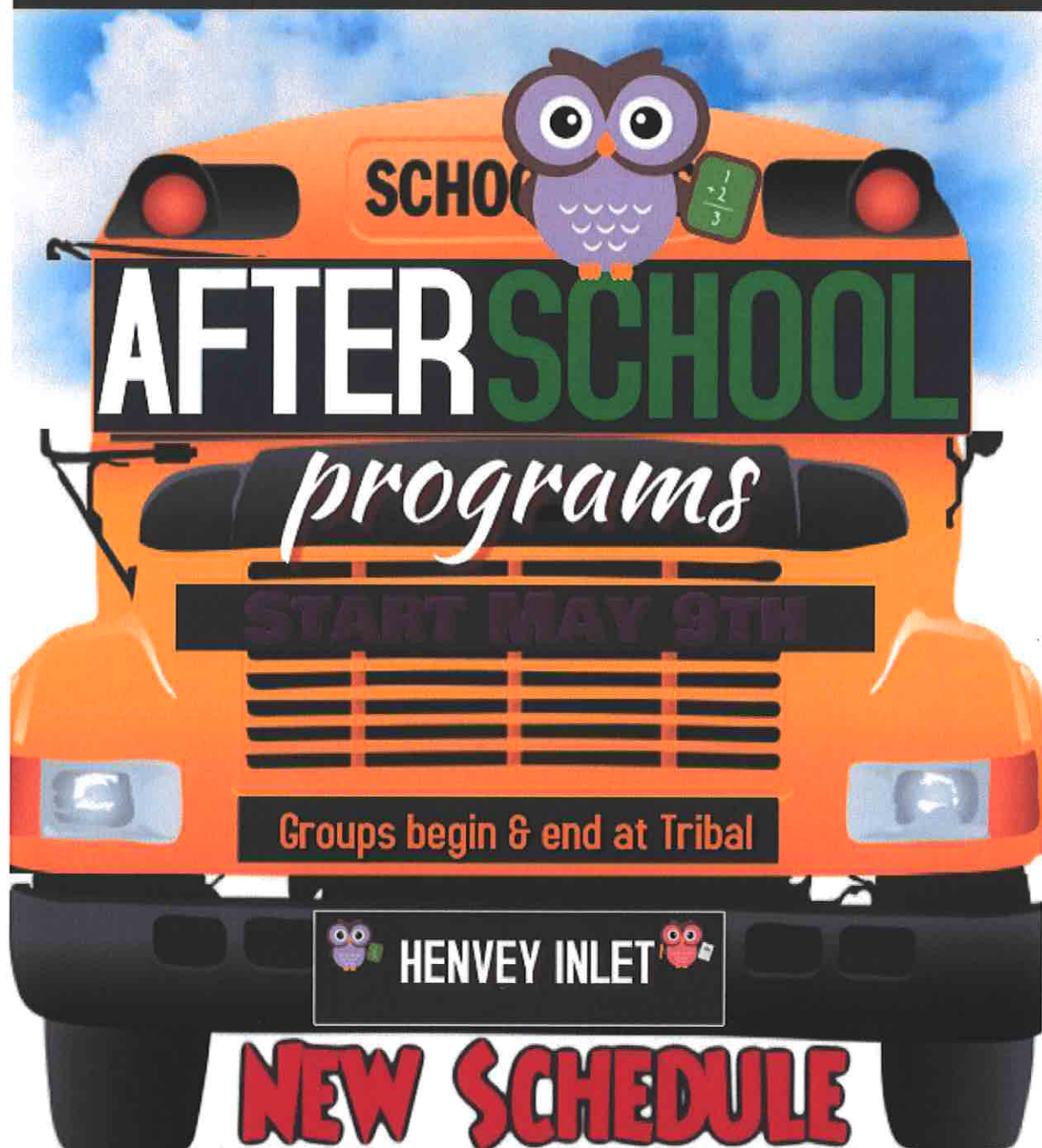
Weekend in June TBD • Reserve your spot with
Angele Dubois at
For Henvey Youth 12-24 705-918-1590

SLEEP IN A TRAPPER'S TENT - WILD GAME MEALS - RIDE ON ATV's
- ON THE LAND PROGRAMING FOR YOUTH 12-24

Dates, more details and registration to come-just looking for interest

www.mukwaadventures.com

SNACKS, CRAFTS, SPORTS, OUTINGS & LOTS OF OUTDOOR PLAY



Monday & Tuesday 3:30-5:30PM for youth ages 6-8
Wednesday & Thursday 3:30-5:30PM for youth ages 9-11

REGISTRATION (ON NEXT PAGE) CAN BE DROPPED OFF AT TRIBAL OR THE BAND OFFICE
CONTACT ANGELE DUBOIS @ 705-918-1590 WITH ANY QUESTIONS



Youth Leadership Program

For Youth 12+

Starts May 9th

Monday and Tuesday evenings 6:30-8:30pm

@ Tribal with Angele Dubois

Youth in this program can expect to plan 3 community events, go on outings, take part in workshops and cultural activities as well as play sports, games and have snacks.

**Parents or youth with questions can call or text
705-918-1590 or email angele.dubois2@gmail.com**



AFTER SCHOOL & YOUTH LEADERSHIP PROGRAM PARTICIPANT REGISTRATION FORM

Henvey's After School & Youth Leadership programs use sport and play to build essential health, education and life skills among children and youth. Angele Dubois is an employee of Henvey Inlet and will deliver these programs Monday-Thursday and some weekends.

Youth who participate can expect to have fun, meet others, share ideas, be challenged and expect to learn more about how they can be a youth leader in our community. During program youth will engage in a variety of games, leadership workshops, arts and crafts, sports, and other exciting activities. It is important to dress for outside weather and to wear comfortable clothing to play in.

My child will join the youth program...

- After School for youth 6-8 years old on Monday & Tuesday 3:30-5:30pm
- After School for youth 9-11 years old on Wednesday & Thursday 3:30-5:30pm
- Youth Leadership for youth 12 and up on Monday and Tuesday 6:30-8:30pm

PARTICIPANT INFORMATION

Name: _____

Birth Date: _____ Age: _____ Gender: _____

Address: _____

Health Card Number: _____

Special medical concerns/dietary restrictions: _____

Parent/Guardian (or emergency contact) Full Name: _____

Email: _____

Phone (work and/or home): _____

I consent to my child's participation in the After School (ages 6-11) or Youth Leadership programs (ages 12+) activities in my community.

I consent to my child's participation in special events and initiatives associated with these programs in my community, including but not limited to: Sports clubs; activities facilitated by Henvey Inlet partner organizations; community events, tournaments and traditional teachings and activities.

I understand that my community's Youth programs have a zero-tolerance policy for violence, drugs or alcohol. Anyone found engaging in such activities will be excused from program activities, at the discretion of the Community Mentor.

I _____, agree to follow these policies and acknowledge the implications of breaking the rules.

Participant Signature

Parent/Guardian Signature



AFTER SCHOOL & YOUTH LEADERSHIP PROGRAM PARTICIPANT REGISTRATION FORM

PARTICIPANT RISK WAIVER

I understand that, as in all sports/activities, there is a risk of physical injury and damage to property. I hereby give my consent for my child/youth _____ (print child/youth's name):

- To receive emergency medical care which may become necessary in the course of such activities.
- I further agree not to hold Henvey Inlet Staff, the Community Mentor or anyone acting on Henvey Inlet's behalf, responsible for any injury occurring to the named participant during youth program activities.
- Upon registration of my child in the youth program, I permit my child to participate in a full range activities, and I authorize the Community Mentor and/or Henvey Inlet staff in the event of an accident or illness affecting the above named participant; to authorize on my behalf all procedures, including admission to hospital and necessary treatment therein, as he/she may deem essential for the care and well-being of the participant. Such action shall be taken only when immediate contact with the undersigned cannot be made.

Signature of Parent/Guardian

Date

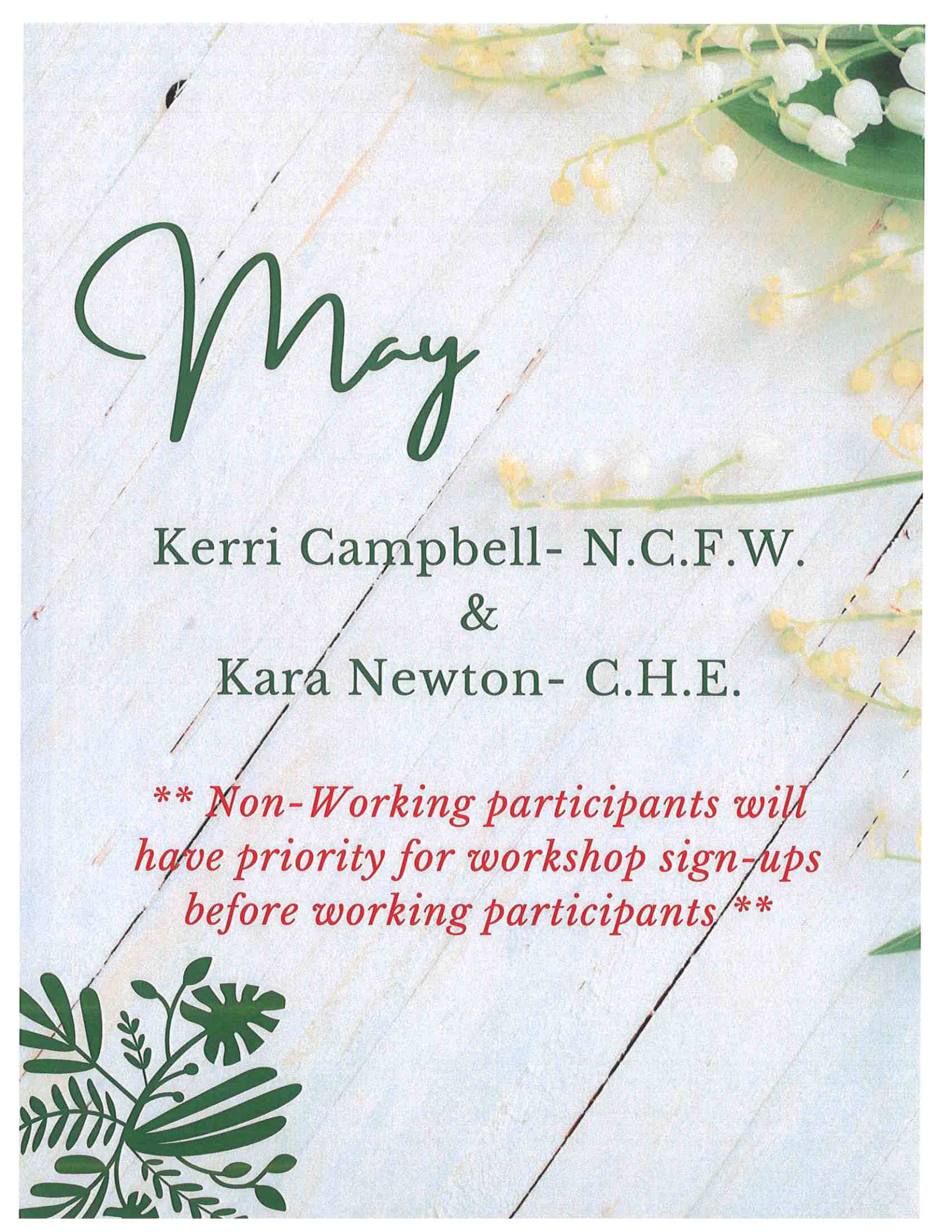
PHOTO AND RESEARCH CONSENT

Henvey Inlet requests permission to use, copy, or display participant's name, photograph, or video recorded image to promote events & advertisements on websites, news releases, brochures, pamphlets or other:

- Yes, I grant permission to use my child's photo, or video recorded image.
- Yes, I grant permission to Henvey Inlet's partner organizations to use my child's photo, or video recorded image.
- I agree (or give consent for my child) to participate in research associated with the youth program which may include: having a discussion associated with the youth program research tape-recorded, quotes from my child being used, without any information that would identify my child, for the purposes of program improvement and reporting to partners and donors.
- No, please do not use my child's photo, or video of my child.

Signature of Parent /Guardian

Date



May

Kerri Campbell- N.C.F.W.

&

Kara Newton- C.H.E.

*** Non-Working participants will
have priority for workshop sign-ups
before working participants ***





Community
Health
Educator

May
2022

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
24	25	26	27	28	29	30 Mother's Day Photos
01	02	03 Mental Health First Aid Training 1-4PM	04 Adventure in Cooking 4:30pm	05 Mental Health First Aid Training 1-4PM	06 Diabetes Awareness Day Virtual Conference 10-4:30pm	07
08 Mother's Day	09	10	11 Adventure in Cooking 4:30pm	12 ORGANIZATION WKSHP	13	14
15	16	17	18 Adventure in Cooking 4:30pm	19 BEGINNER GARDEN WKSHP	20	21
22	23 OFFICES CLOSED	24	25 Adventure in Cooking 4:30pm	26 PARENTING	27	28
29	30	31	01	02	03	04



**BAND REP
LEAD
PROGRAM**

May 2022

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
24	25	26	27	28	29	30 Mother's Day Photos
01	02	03 Home Visit Walking Program	04 Adventure In cooking	05 Home Visit	06	07
08 Mother's Day	09	10 Walking Program	11 Adventure In cooking	12 Organization Workshop	13	14
15	16	17 Family Court Walking Program	18 Adventure In cooking	19 Gardening For Beginners	20	21
22	23 Office Closed	24 Walking Program	25 Adventure In cooking	26 PARENTING PROGRAM	27	28
29	30	31 Walking Program	01	02	03	04

Home Organization Workshop

18+



Creative and exciting tips to improve the functionality of your living space!!!

When: Thursday May 12, 2022 10am

Please call the Health Centre to sign up there is limit of 6 participants.

354-A Pickerel River Rd.
Pickerel, ON
POG 1J0

Phone: (705)857-1221 or 866-252-3330
Fax: (705) 857-0730

*If transportation is needed please contact the Health Centre 3 days prior to the event to make arrangements



VEGETABLE GARDENING

For Beginners



MAY 19, 2022

10:00 AM

Age 18+

CALL DARCY TO SIGN UP! SPACE IS LIMITED TO THE FIRST 6 TO CALL!

PARENTING WORKSHOP



PLEASE JOIN KERRI AND KARA
THURSDAY MAY 26, 2022
10:00 AM

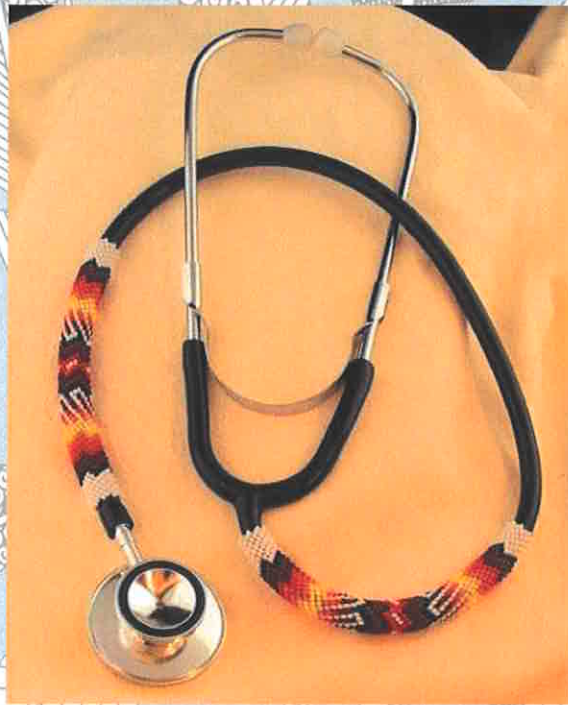
UPON SIGNING UP, PLEASE ENSURE THAT YOU HAVE PROVIDED DARCY WITH YOUR ASSOCIATED ZOOM EMAIL, TO ENSURE THAT THE ZOOM INVITE IS RECEIVED BEFORE THE WORKSHOP BEGINS.

SHOULD YOU REQUIRE A TABLET TO BE LOANED TO YOU, PLEASE INFORM DARCY AT THE TIME OF SIGN UP!

Miigwetch!! *Age 18+*

**SPACE IS LIMITED TO THE FIRST 6 TO CALL IN!!!
CONTACT DARCY TO SIGN UP!!!**

Community Health Nurse



BRENDA CONTIN

May 2022

Brenda Contin- Community Health Nurse

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
	P.S: Pick up vaccine Staff Mtg OFFICE	Membership Mtg/OFFICE	COVID CLINIC: 8:00 am -7:30 pm	OFFICE: Input vaccinations into COVAX	Housing Mtg P.S.:	
8	9	10	11	12	13	14
	Community Cleanup Band Council	PCL/C&C Mtg/OFFICE	OFFICE	OFFICE	OFFICE	
15	16	17	18	19	20	21
	OFFICE ELDER MEMBERSHIP SURVEY	OFFICE ELDER MEMBERSHIP SURVEY	OFFICE	OFFICE	NOT IN OFFICE	
22	23	24	25	26	27	28
	STAT HOLIDAY	OFFICE	OFFICE	SKHC BOARD MTG	OFFICE	
29	30	31				
	FINANCE	FINANCE				



MAY 4TH, 2022

COVID 19 VACCINE CLINIC

Dose 2, 3 or 4th booster will be available!

Please call Darcy at Health Centre to book an appt.

PLEASE NOTE If you or your family are in isolation or have been told to stay home by a medical professional, you are not to attend this clinic.

LOCATION: O&M BUILDING OFFICE # 1

TIME: 8:30 AM – 4:00 PM



**HENVEY INLET HEALTH
CENTRE NURSING
PROGRAM**

**MASKS WILL BE
MANDATORY**

Any HIFN member or staff wanting a 2nd 3rd or 4th booster shot (if eligible) are welcome. Boosters can only be administered 3 or more months after receiving the 1st, 2nd or 3rd dose.

**O&M BUILDING
OFFICE # 1**

Non-Insured Health Benefits Program Updates for April 2022

Pharmacy benefit information

New pharmacy benefit listings

The following medications and products are covered as open benefits without prior approval:

- Aermony Respiclick (fluticasone propionate) inhalers, used daily to decrease asthma attacks
- Foquest (methylphenidate hydrochloride) time release capsules for the treatment of Attention Deficit Hyperactivity Disorder (ADHD)
- Nexplanon (etonogestrel), a hormonal birth control implant
- Nyvepria (pegfilgrastim), used to increase white blood cells for patients receiving chemotherapy
- Vocabria (cabotegravir) and Cabenuva (cabotegravir-rilpivirine) for the treatment of adult clients with stable, suppressed HIV

The following new listings are covered as limited use benefits with prior approval:

- Baqsimi (glucagon) nasal powder for the treatment of severe hypoglycemia reactions for clients on insulin
- Kalydeco (ivacaftor), Orkambi (ivacaftor/lumacaftor) for the treatment of cystic fibrosis
- Olumiant (baricitinib) for the treatment of moderate to severe rheumatoid arthritis
- Rozlytrek (entrectinib) for the treatment of advanced or metastatic non-small cell lung cancer
- Zejula (niraparib) for the maintenance treatment of ovarian, fallopian tube, or primary peritoneal cancer after chemotherapy
- Vyndaqel (tafamidis meglumine) for the treatment of adult patients with cardiac disease caused by transthyretin amyloid cardiomyopathy

Check the [NIHB drug benefit list](#) for complete listings and coverage criteria.

Sublocade now covered without prior approval

- Sublocade is a monthly injection used for the treatment of opioid use disorder
- NIHB now covers Sublocade without prior approval
- Sublocade is most effective when used as part of an opioid treatment program that includes counselling and support
- Prescribers need special certification for Sublocade and it must be injected by a trained healthcare provider

- Talk to your healthcare provider about whether this medication is right for you and how it will be administered
- As a reminder, Suboxone and methadone are also covered for the treatment of opioid use disorder without prior approval
- Clients who receive coverage for these medications will be enrolled in the NIHB client safety program

Medical supplies and equipment information

Coverage of gauze packing strips for wound care

- NIHB now covers up to 40 bottles per year of regular gauze packing strips
- Prior approval is not required within program price and replacement guidelines
- Find more information in the [Medical surgical equipment and supplies benefits list](#)

Medical equipment covered by another benefit plan

- NIHB may cover supplies, maintenance, or repairs of medical equipment that was covered by another benefit plan or purchased by the client, if:
 - the equipment is an eligible benefit under NIHB, and all policies and criteria for coverage of the item are met
 - the supplies, maintenance, or repairs are not covered by another benefit plan
- Information normally required for prior approval of the item, such as testing or assessment information, diagnosis, device make and model, and medical justification, must be submitted along with proof of other coverage or purchase
- The coverage of supplies, maintenance, and repairs follows the policies set out in the [Medical supplies and equipment guide and benefit lists](#)

General program information

Client web accounts

- NIHB clients now have the option of creating a secure, online personal account through the Express Scripts Canada NIHB provider and client website
- Express Scripts Canada processes claims for NIHB pharmacy, medical supplies and equipment, dental, vision care and mental health counselling benefits
- Your secure web account can be used to view claims and submit client reimbursement requests for these benefits
- To create an online web account, please visit the [Express Scripts Canada website](#) and click 'Create Web Account'
- Account registration and password resets cannot be done on a mobile device. You must use a computer with a web browser (Internet Explorer, Microsoft Edge, Google Chrome, Safari or Mozilla Firefox)

- Your name, date of birth, and status number must match exactly as it appears on your First Nation status card or Inuit land claim beneficiary card to avoid issues with account creation
- If you have problems with your client account or need to reset your password, please contact Express Scripts Canada's NIHB call centre at [1-888-441-4777](tel:1-888-441-4777) for assistance

Payment by direct deposit

- If you have submitted a claim for client reimbursement, you can receive payment through direct deposit into your bank account. This is the fastest and most secure way to receive payment
- To enroll with Express Scripts Canada for direct deposit:
 - send a completed copy of the Direct Deposit and Communication Preference Form for NIHB Clients. The form is found at the bottom of the [client reimbursement page](#)
 - provide a void cheque or bank letter, and include your contact information in case there is a need to contact you about your payment
- Claim payments are made by Express Scripts Canada every two weeks. Once the claim is processed, clients who are enrolled for direct deposit will receive payment on these dates
 - direct deposit is not available for payment to someone other than the client, such as to a parent for their child's claim, or to a client under 16 years of age. These payments can only be made by cheque
- Claims for medical transportation benefits are processed by the NIHB program through Indigenous Services Canada's regional offices. For reimbursement of medical transportation benefits, fill out and return the [Indigenous Services Canada direct deposit form](#)
- If you can't receive payment through direct deposit, you can receive payment by cheque. Be sure to include your mailing address when you send your client reimbursement request

How to find an enrolled provider

- Many providers of non-insured health benefits are enrolled with NIHB to bill the program directly for eligible items or services provided to clients
- To find an enrolled provider in your area, please contact:
 - your [NIHB regional office](#) for medical supplies and equipment, vision care or mental health counselling providers
 - the [Drug Exception Centre](#) for pharmacy providers
 - the [Dental Predetermination Centre](#) for dental and orthodontic providers
- You may also contact an NIHB Navigator in your region for assistance finding an enrolled provider
- Express Scripts Canada is not able to help you find an enrolled NIHB provider, and will transfer or refer you to an NIHB call centre

COVID-19 Information for Close Contacts

If you have been told or suspect you have been exposed to someone who tested positive for COVID-19, follow these steps to take care of yourself and protect others:

Step 1: Determine if you need to self-isolate

Refer to the flow chart on the next page to determine if you need to isolate and for how long. Your isolation period will depend on your vaccination status, symptoms, if you live with a positive case, and if you are immunocompromised

Step 2: Getting tested for COVID-19

People living in First Nation communities are eligible to be tested for COVID-19. Options for testing include: rapid antigen, rapid molecular or PCR test.

Step 3: Receiving your COVID-19 lab results

If your COVID-19 test result is positive:

- Self-isolate immediately and let your close contacts know of their exposure.
- If you had a rapid molecular or PCR test, you may be contacted by a public health official, healthcare provider or community representative who will tell you how long you must stay home and self-isolate.
- If you did a rapid antigen test at home, it is recommended that you inform the community health nurse in your community of the positive result.

Please follow-up with your household and close contacts and provide them with the information on this fact sheet, so they can protect themselves and their communities. A nurse, health care provider or representative may also call your contacts.

A **close contact** is someone to whom you have had prolonged exposure (for more than 15 minutes or multiple close encounters) within 2 meters or less, in the 48 hours before you developed symptoms **or** 48 hours before you got tested for COVID-19 (if you have no symptoms) until you started self-isolating.

Examples of close contacts:

- Someone in your household
- Someone that had physical contact with you such as shaking hands, hugging, kissing, being sneezed or coughed on
- Someone you provided care to (taking care of your parents, children, etc.)

If your COVID-19 test result is negative:

Continue to self-monitor or self-isolate for the recommended time period based on the flow chart below.

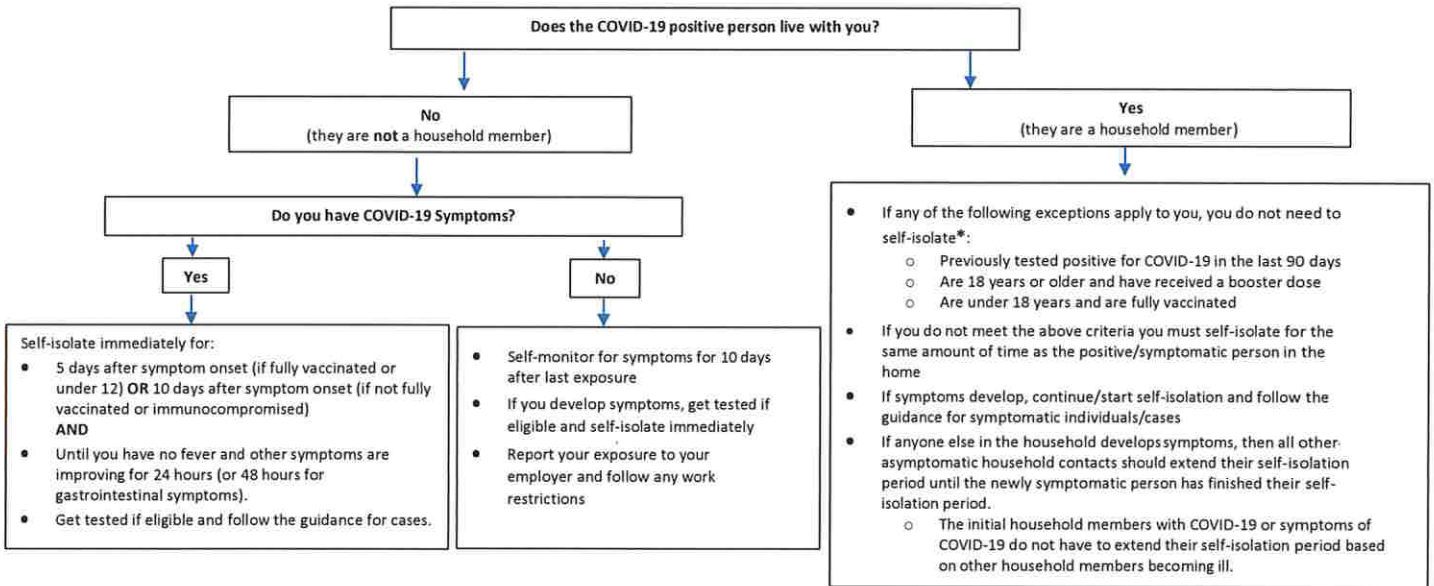
Self-monitor for symptoms for 10 days from the last time you were in contact with the individual with the positive COVID-19 test. If you develop symptoms, continue to self-isolate and get tested if it is available, follow directions on flow chart below.

Additional requirements for all close contacts:

In addition to completing the self-isolation or self-monitoring period, individuals must do the following, for a total of 10 days after last exposure to COVID-19:

- Continue to wear a well fitted mask in all public settings
 - Individuals should maintain masking as much as possible in public settings
 - Avoid activities where mask removal would be necessary (i.e., dining out)
- Physical distance and follow other public health measures
- Avoid visiting anyone who is immunocompromised or at higher risk of illness (i.e., seniors)
- Avoid visiting or working in any highest-risk settings (unless you have previously tested positive for COVID-19 on a RAT or molecular test in the last 90 days):
 - Hospitals and health care settings, including complex continuing care facilities and paramedic services.
 - Home and community care workers
 - Congregate living settings with medically and socially vulnerable individuals including, but not limited to, long-term care homes, retirement homes, First Nation elder care lodges, group homes, shelters, hospices, correctional institutions, Provincial demonstration schools and hospital schools

Flow Chart for Close Contacts



For all scenarios:

- If available, you may choose to get tested. Testing options may include: rapid antigen, rapid molecular, or PCR testing.
- If your COVID-19 test result is positive, follow the guidance for cases.
- If your COVID-19 test result is negative, complete your applicable self-monitoring or self-isolation period and continue to monitor for symptoms.
- If you develop symptoms, self-isolate immediately, get tested if available, and follow the guidance for cases.
- In all scenarios, symptoms need to be improving for 24 hours (or 48 hours if gastrointestinal symptoms) and no fever present prior to ending self-isolation
- In addition to completing the self-isolation or self-monitoring period, individuals must do the following, for a total of 10 days after last exposure:
 - Wear a well fitted mask in all public settings, physical distance and follow public health measures
 - Do not visit or attend work in any highest risk settings (unless you have tested positive for COVID-19 on a RAT or molecular test in the past 90 days)
 - Do not visit anyone who is immunocompromised or at higher risk of illness
- Notify your employer and follow any work restrictions

*Immunocompromised household members that do not meet the exceptions to self-isolation should self-isolate for 10 days after last exposure to a case/symptomatic person

*Close contacts who live in a highest risk setting should self-isolate for 10 days from last exposure, regardless of vaccination status. Asymptomatic close contacts who work/volunteer/attend a highest risk setting can follow the guidance for contacts regarding self-monitoring/self-isolation in the community. Close contacts should not be working in highest risk settings for 10 days from last exposure (unless they previously tested positive for COVID-19 by rapid antigen or molecular test in the last 90 days).

COVID-19 Information for Individuals with Symptoms

If you have any one of these symptoms:

- Fever/chills
- Cough
- Shortness of breath
- Decrease/loss of smell and taste

OR

If you have two or more of these symptoms:

- Extreme fatigue
- Runny nose/nasal congestion
- Sore throat
- Headache
- Muscle aches/joint pain
- GI Symptoms (i.e. vomiting or diarrhea)

It is highly likely you have a COVID-19 infection.

What you must do:

1. Self-isolate immediately. See the table below to see how long you should self-isolate for.

If you are:	Self-isolate for:
<ul style="list-style-type: none"> • Fully vaccinated¹ against COVID-19 • Less than 12 years old 	5 days after your symptoms started
<ul style="list-style-type: none"> • 12 years and older and not fully vaccinated • Immunocompromised² • Admitted to hospital because of COVID-19 related illness • Live in a highest risk setting³ 	10 days after your symptoms started
<ul style="list-style-type: none"> • Severely ill and require care in the ICU 	20 days after the date you started to have symptoms

Before ending your self-isolation period, your symptoms need to be improving for at least 24 hours (48 hours for gastrointestinal symptoms such as diarrhea and vomiting) and no fever present.

Important notes about self-isolation

- The day your symptoms started is day 0 of your self-isolation period. This means that the first day of your 5 or 10 day self-isolation period is the day **after** your symptoms started.

January						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4 Symptom Onset Day 0	5 Test Date Test is Positive Day 1	6 Day 2
7 Day 3	8 Day 4	9 Day 5	10 Discontinue Isolation	11	12	13

- In addition to completing your self-isolation period, you must do the following for a total of 10 days (or 20 if immunocompromised) after symptom onset:
 - Continue to wear a well-fitted mask in all public settings.
 - Maintain masking as much as possible in public setting.
 - Avoid activities where mask removal would be necessary (i.e., dining out)
 - Not visit anyone who is immunocompromised or at higher risk of illness (i.e. seniors, elders).
 - Not visit any highest risk settings.

- If you are in distress, go to the nearest emergency department or call 9-1-1 (experiencing significant trouble breathing, chest pain, fainting or have significant worsening of any chronic disease symptoms).
- Be sure to tell them that you are COVID-19 positive so correct precautions can be used to decrease the transmission of the virus.

How to self-isolate

- Stay home, do not leave your house (do not have visitors).
- Avoid contact with people in your home as much as possible—stay in a separate room away from others and use a separate bathroom.
- If you are in a room with other people, keep a distance of at least 2-metres from others and wear a well-fitted face mask.
- Sneeze or cough into your sleeve.
- Wash your hands often with soap and water or alcohol-based hand sanitizer.

2. Notify your household and close contacts.⁴

- Please let your close contacts know that they have been exposed to COVID-19.
- Your household members will need to self-isolate while you are self-isolating.
- Your household members **do not** have to self-isolate if they have **no** symptoms **and**:
 - They are 18 years of age and older and have received their COVID-19 vaccine booster dose.
 - They are under 18 years of age and fully vaccinated.
 - They previously tested positive for COVID-19 in the last 90 days (based on positive rapid antigen or molecular test).
- Advise your close contacts to follow the directions on the fact sheet: **COVID-19 Information for Close Contacts**.
 - If your close contact **lives** in a highest risk setting they must self-isolate for 10 days from the last time you were in contact with them (even if they are fully vaccinated)
 - If your close contact **works, volunteers or attends** a highest risk setting they, should **not** attend for 10 days from your last contact with them (even if they are fully vaccinated)
 - Workers should notify their employer of their exposure and follow any work restriction guidelines
 - Close contacts who have previously tested positive for COVID-19 in the last 90 days, with either a rapid antigen or molecular test, can attend work in a highest-risk setting if they do not have symptoms of COVID-19

3. Get tested for COVID-19 (if testing is available).

- People living in First Nation communities are eligible to be tested for COVID-19. Testing options may include: rapid antigen, rapid molecular or PCR test.

1. **Fully vaccinated** means it has been at least 14 days since you received: the full series of a COVID-19 vaccine authorized by Health Canada (e.g., 2 doses of Moderna, Pfizer-BioNTech **OR** AstraZeneca/COVISHIELD, or one dose of Janssen [Johnson & Johnson]) or any combination of such vaccines **OR** one or two doses of a COVID-19 vaccine not authorized by Health Canada (e.g., Sinopharm) followed by one dose of a COVID-19 mRNA vaccine authorized by Health Canada (e.g., Pfizer-BioNTech or Moderna) **OR** three doses of a COVID-19 vaccine not authorized by Health Canada (e.g., Abdala).

2. Examples of immunocompromised include cancer chemotherapy, untreated HIV infection with CD4 T lymphocyte count <200, combined primary immunodeficiency disorder, taking prednisone >20mg/day (or equivalent) for more than 14 days and taking other immune suppressive medications. Factors such as advanced age, diabetes, and end-stage renal disease are generally not considered severe immune compromise impacting non-test based clearance.

3. **Highest risk settings include:** hospitals (including complex continuing care facilities and paramedic services), home and community care workers and congregate living settings (long-term care, retirement homes, First Nation elders homes or care lodges, group homes, shelters, hospices and correctional institutions).

4. A **close contact** is anyone you spent at least 15 minutes (or several short periods of time) with in close proximity (you were less than 2 meters away from them), without appropriate protective measures (for example wearing a mask and/or using PPE) in the 48 hours prior to the day your symptoms started or if you have no symptoms prior to the day your positive test was collected

COVID-19 Information for Positive Cases

If you tested positive for COVID-19, please follow these steps:

1. Self-isolate immediately. See the table below to see how long you should self-isolate for.

If you are:	Self-isolate for:
<ul style="list-style-type: none"> Fully vaccinated¹ against COVID-19 Less than 12 years old 	5 days after the date you started to have symptoms or the date you were tested (whichever is earlier/applicable)
<ul style="list-style-type: none"> 12 years and older and not fully vaccinated Immunocompromised² Admitted to hospital because of COVID-19 Live in a highest risk setting³ 	10 days after the date you started to have symptoms or the date you were tested (whichever is earlier/applicable)
<ul style="list-style-type: none"> Severely ill and require care in the ICU 	20 days after the date you started to have symptoms or the date you were tested (whichever is earlier/applicable)

Before ending your self-isolation period, your symptoms need to be improving for at least 24 hours (48 hours for gastrointestinal symptoms such as diarrhea and vomiting) and no fever present.

Important notes about self-isolation

- The day your symptoms started or your test was collected is day 0 of your self-isolation period. This means that the first day of your 5 or 10 day self-isolation period is the day **after** your symptoms started or your test was collected.

January						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4 Symptom Onset Day 0	5 Test Date Test is Positive Day 1	6 Day 2
7 Day 3	8 Day 4	9 Day 5	10 Discontinue Isolation	11	12	13

- In addition to completing your self-isolation period, you must do the following for a total of 10 days (or 20 if immunocompromised) from symptom onset:
 - Continue to wear a well-fitted mask in all public settings.
 - Maintain masking as much as possible in public setting.
 - Avoid activities where mask removal would be necessary (i.e., dining out).
 - Not visit anyone who is immunocompromised or at higher risk of illness (i.e. seniors, elders).
 - Not visit any highest risk settings.
- If you are in distress, go to the nearest emergency department or call 9-1-1 (experiencing significant trouble breathing, chest pain, fainting or have significant worsening of any chronic disease symptoms).
- Be sure to tell them that you are COVID-19 positive so correct precautions can be used to decrease the transmission of the virus.

Highest risk settings

- For people who test **positive** and **live** in a **highest risk setting**:
 - Self-isolate for **10 days** from the day your symptoms started or the day your test was collected if you have no symptoms.
- For people who test **positive** and **work, volunteer or attend** a highest risk setting:

- Self-isolate for either **5 or 10 days** and **do not attend** the highest risk setting for **10 days** from the day your symptoms started or the day your test was collected if you have no symptoms.
- Workers in these settings should notify their employer and follow any work restrictions.

How to self-isolate:

- Stay home, do not leave your house (do not have visitors).
- Avoid contact with people in your home as much as possible—stay in a separate room away from others and use a separate bathroom.
- If you are in a room with other people, keep a distance of at least 2-metres from others and wear a well-fitted face mask.
- Sneeze or cough into your sleeve.
- Wash your hands often with soap and water or alcohol-based hand sanitizer.

2. Notify your household and close contacts.⁴

- Please let your close contacts know that they have been exposed to COVID-19.
- Your household members will need to self-isolate while you are self-isolating.
- Your household members **do not** have to self-isolate if they have **no symptoms and**:
 - They are 18 years of age and older and have received their COVID-19 vaccine booster dose.
 - They are under 18 years of age and fully vaccinated.
 - They previously tested positive for COVID-19 in the last 90 days (based on positive rapid antigen or molecular test).
- Advise your close contacts to follow the directions on the fact sheet: **COVID-19 Information for Close Contacts**.
 - If your close contact **lives** in a highest risk setting they must self-isolate for 10 days from the last time you were in contact with them (even if they are fully vaccinated).
 - If your close contact **works, volunteers or attends** a highest risk setting they should not attend for 10 days from your last contact with them (even if they are fully vaccinated); workers **should notify their employer of their exposure** and follow any work restrictions.
 - Close contacts who have previously tested positive for COVID-19 in the last 90 days, with either a rapid antigen or molecular test, can attend work in a highest-risk setting if they do not have symptoms of COVID-19.

1. **Fully vaccinated** means it has been at least 14 days since you received: the full series of a COVID-19 vaccine authorized by Health Canada (e.g., 2 doses of Moderna, Pfizer-BioNTech **OR** AstraZeneca/COVISHIELD, or one dose of Janssen (Johnson & Johnson)) or any combination of such vaccines **OR** one or two doses of a COVID-19 vaccine not authorized by Health Canada (e.g., Sinopharm) followed by one dose of a COVID-19 mRNA vaccine authorized by Health Canada (e.g., Pfizer-BioNTech or Moderna) **OR** three doses of a COVID-19 vaccine not authorized by Health Canada (e.g., Abdala).

2. Examples of immunocompromised include cancer chemotherapy, untreated HIV infection with CD4 T lymphocyte count <200, combined primary immunodeficiency disorder, taking prednisone >20mg/day (or equivalent) for more than 14 days and taking other immune suppressive medications. Factors such as advanced age, diabetes, and end-stage renal disease are generally not considered severe immune compromise impacting non-test based clearance.

3. **Highest risk settings include:** hospitals (including complex continuing care facilities and paramedic services), home and community care workers and congregate living settings (long-term care, retirement homes, First Nation elders homes or care lodges, group homes, shelters, hospices and correctional institutions).

4. A **close contact** is anyone you spent at least 15 minutes (or several short periods of time) with in close proximity (you were less than 2 meters away from them), without appropriate protective measures (for example wearing a masking and/or using PPE) in the 48 hours prior to the day your symptoms started or if you have no symptoms prior to the day your positive test was collected

Home Care Nurse



DEBBIE BRENNAN

May 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 OFFICE Administration HOME VISITS	3 OFFICE Medical Consultations	4 OFFICE HOME VISITS	5 OFFICE HOME VISITS	6 OFFICE	7
8	9 OFFICE Administration HOME VISITS	10 OFFICE Medical Consultations	11 OFFICE HOME VISITS	12 OFFICE HOME VISITS	13 OFFICE	14
15	16 OFFICE Administration HOME VISITS	17 OFFICE Medical Consultations	18 OFFICE HOME VISITS	19 OFFICE HOME VISITS	20 OFFICE	21
22	23 Office closed Holiday!	24 OFFICE Medical Consultations	25 OFFICE HOME VISITS	26 OFFICE HOME VISITS	27 OFFICE	28
29	30 Health Info. WORKSHOP PREP.	31 OFFICE BP/BS Screening Clinic				



DEBBIE BRENNAN
HCN

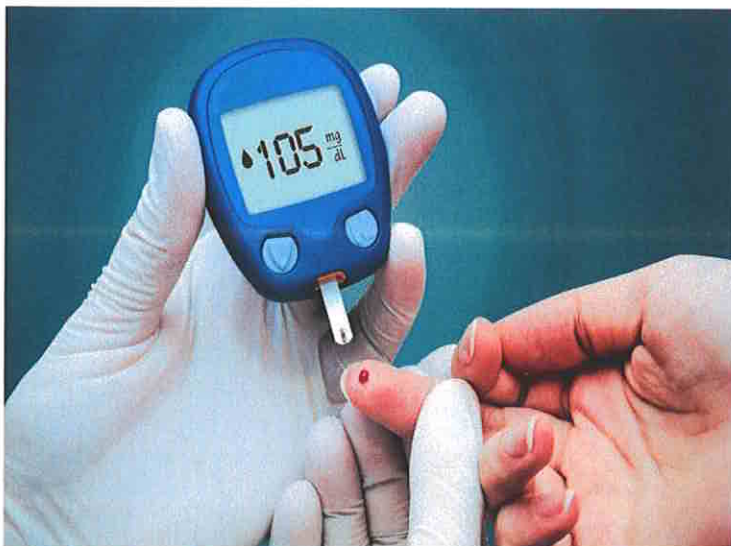
Blood Pressure/ Blood Sugar Clinic

Location: Health Centre Program Trailer
Tuesday May 31, 2022 @10am- 3pm



NO SIGN-UP NEEDED!

Up to 3 individuals who visit Debbie to have their B.P./B.S. checked will be eligible to win 2 bags of perishables such as; fruit, veggies, eggs, bread, and healthy treats.



For Information Contact:
Debbie Brennan, H.C.N.
705-857-1221

May Measurement Month

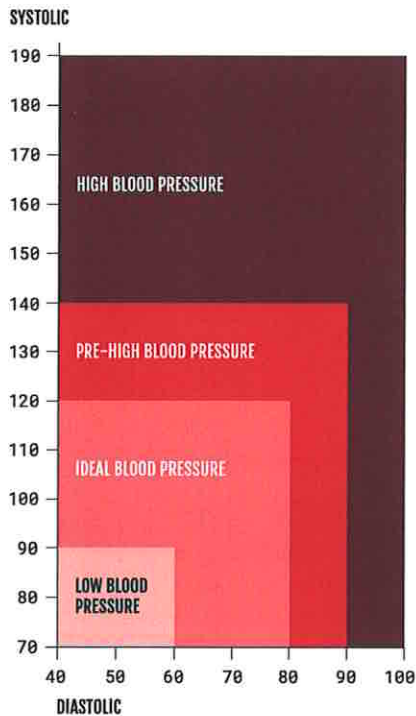
Every year, 17 May is dedicated to World Hypertension Day (WHD). However, as a result of the rapidly growing burden of disease associated with the global increase in hypertension, the International Society of Hypertension (ISH) and the World Hypertension League (WHL) has designated the entire month of May as **May Measurement Month (MMM)**.

During this month we aim to screen millions of people world-wide who are over the age of 18 years and have ideally not had their BP measured within the previous year.

The data collected in MMM will be used, firstly to highlight to the public the importance of high blood pressure, and secondly, to motivate governments to improve local screening facilities and policies, and thereby reduce the global burden of hypertension, which causes many cardiovascular diseases that include stroke, heart attack, kidney failure and dementia.

We encourage you to get involved!

BLOOD PRESSURE NUMBERS EXPLAINED



WHAT HAPPENS NEXT?

You have your blood pressure reading, now to understand what the numbers are telling you. A blood pressure reading consists of two numbers:

SYSTOLIC – The first number, which indicates pressure in the arteries when the heart beats.

DIASTOLIC – The second number, which indicates pressure in the arteries when the heart relaxes between beats.

If the first number is 110 and the second number is 70, this would be written as 110/70. Blood pressure is measured in millimetres of mercury (mmHg) so the reading would be 110/70mmHg or may be referred to as 110 over 70.

Please use the chart on the left to determine whether your blood pressure is within the healthy range.

AS A GENERAL GUIDE:

140/90MMHG OR HIGHER

YOU MAY HAVE HIGH BLOOD PRESSURE
Start making lifestyle changes and see a doctor as soon as possible.

120/80MMHG TO 140/90MMHG

AT RISK OF DEVELOPING HIGH BLOOD PRESSURE
Start making lifestyle changes and check your blood pressure again within a couple of months.

90/60MMHG TO 120/80MMHG

IDEAL BLOOD PRESSURE
Maintain your healthy lifestyle and continue to have regular blood pressure checks.

90/60MMHG OR LOWER

LOW BLOOD PRESSURE
This isn't usually a problem but may result in dizziness or cause you to feel faint. It's possible that it is a sign of another health issue, if you are concerned, please discuss this with a trained medical professional.

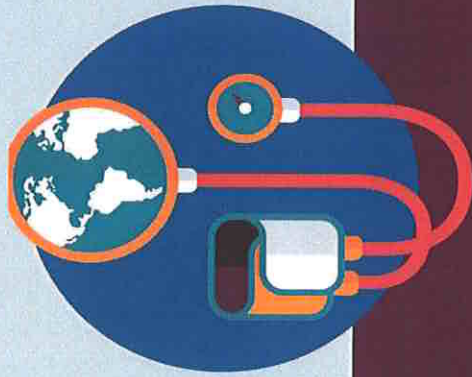
#TheBigSqueeze

-  www.facebook.com/MayMeasure
-  [@MayMeasureOrg](https://twitter.com/MayMeasureOrg)
-  [maymeasureorg](https://www.instagram.com/maymeasureorg)

If you have concerns about any of the above, please seek advice from a trained medical professional.

COMBATING HYPERTENSION

THE LEADING CAUSE OF PREVENTABLE DEATH WORLDWIDE



Hypertension, or high blood pressure, may be symptomless but it kills **9.4 million** people worldwide every year









If untreated, hypertension can cause death or serious health consequences in a number of ways:

- 
HEART ATTACK
- 
STROKE
- 
DEMENTIA
- 
KIDNEY FAILURE
- 
VISION LOSS

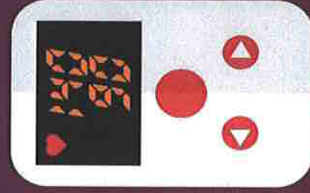
2/3 of those with hypertension are in developing countries

PREVENTION IS KEY!

-  Eat healthily and reduce salt consumption
-  Eat more fruit and vegetables
-  Limit alcohol intake
-  Don't smoke
-  Be physically active
-  Maintain a healthy body weight

Only 50% of those with hypertension are aware they have it

- Check your blood pressure regularly - whether at home, at a clinic, a pharmacy or elsewhere
- If you are being treated for hypertension, take your medicine even when you feel good - follow treatment advice of healthcare professionals



For more information: <http://ish-world.com/news/5/WHL-and-ISH-Hypertension-Fact-Sheet/>



High blood pressure (hypertension)

Overview

High blood pressure (hypertension) is a common condition in which the long-term force of the blood against your artery walls is high enough that it may eventually cause health problems, such as heart disease.

Blood pressure is determined both by the amount of blood your heart pumps and the amount of resistance to blood flow in your arteries. The more blood your heart pumps and the narrower your arteries, the higher your blood pressure. A blood pressure reading is given in millimeters of mercury (mm Hg). It has two numbers.

- **Top number (systolic pressure).** The first, or upper, number measures the pressure in your arteries when your heart beats.
- **Bottom number (diastolic pressure).** The second, or lower, number measures the pressure in your arteries between beats.

You can have high blood pressure for years without any symptoms. Uncontrolled high blood pressure increases your risk of serious health problems, including heart attack and stroke. Fortunately, high blood pressure can be easily detected. And once you know you have high blood pressure, you can work with your doctor to control it.

Symptoms

Most people with high blood pressure have no signs or symptoms, even if blood pressure readings reach dangerously high levels.

A few people with high blood pressure may have headaches, shortness of breath or nosebleeds, but these signs and symptoms aren't specific and usually don't occur until high blood pressure has reached a severe or life-threatening stage.

When to see a doctor

You'll likely have your blood pressure taken as part of a routine doctor's appointment.

Ask your doctor for a blood pressure reading at least every two years starting at age 18. If you're age 40 or older, or you're 18 to 39 with a high risk of high blood pressure, ask your doctor for a blood pressure reading every year.

Blood pressure generally should be checked in both arms to determine if there's a difference. It's important to use an appropriate-sized arm cuff.

Your doctor will likely recommend more-frequent readings if you've already been diagnosed with high blood pressure or have other risk factors for cardiovascular disease. Children age 3 and older will usually have blood pressure measured as a part of their yearly checkups.

If you don't regularly see your doctor, you may be able to get a free blood pressure screening at a health resource fair or other locations in your community. You can also find machines in some stores that will measure your blood pressure for free.

Public blood pressure machines, such as those found in pharmacies, may provide helpful information about your blood pressure, but they may have some limitations. The accuracy of these machines depends on several factors, such as a correct cuff size and proper use of the machines. Ask your doctor for advice on using public blood pressure machines.

Causes

There are two types of high blood pressure.

Primary (essential) hypertension

For most adults, there's no identifiable cause of high blood pressure. This type of high blood pressure, called primary (essential) hypertension, tends to develop gradually over many years.

Secondary hypertension

Some people have high blood pressure caused by an underlying condition. This type of high blood pressure, called secondary hypertension, tends to appear suddenly and cause higher blood pressure than does primary hypertension. Various conditions and medications can lead to secondary hypertension, including:

- Obstructive sleep apnea
- Kidney disease
- Adrenal gland tumors
- Thyroid problems
- Certain defects you're born with (congenital) in blood vessels
- Certain medications, such as birth control pills, cold remedies, decongestants, over-the-counter pain relievers and some prescription drugs
- Illegal drugs, such as cocaine and amphetamines

Risk factors

High blood pressure has many risk factors, including:

- **Age.** The risk of high blood pressure increases as you age. Until about age 64, high blood pressure is more common in men. Women are more likely to develop high blood pressure after age 65.
- **Race.** High blood pressure is particularly common among people of African heritage, often developing at an earlier age than it does in whites. Serious complications, such as stroke, heart attack and kidney failure, also are more common in people of African heritage.
- **Family history.** High blood pressure tends to run in families.
- **Being overweight or obese.** The more you weigh, the more blood you need to supply oxygen and nutrients to your tissues. As the amount of blood flow through your blood vessels increases, so does the pressure on your artery walls.
- **Not being physically active.** People who are inactive tend to have higher heart rates. The higher your heart rate, the harder your heart must work with each contraction and the stronger the force on your arteries. Lack of physical activity also increases the risk of being overweight.
- **Using tobacco.** Not only does smoking or chewing tobacco immediately raise your blood pressure temporarily, but the chemicals in tobacco can damage the lining of your artery walls. This can cause your arteries to narrow and increase your risk of heart disease. Secondhand smoke also can increase your heart disease risk.
- **Too much salt (sodium) in your diet.** Too much sodium in your diet can cause your body to retain fluid, which increases blood pressure.
- **Too little potassium in your diet.** Potassium helps balance the amount of sodium in your cells. A proper balance of potassium is critical for good heart health. If you don't get enough potassium in your diet, or you lose too much potassium due to dehydration or other health conditions, sodium can build up in your blood.
- **Drinking too much alcohol.** Over time, heavy drinking can damage your heart. Having more than one drink a day for women and more than two drinks a day for men may affect your blood pressure.

If you drink alcohol, do so in moderation. For healthy adults, that means up to one drink a day for women and two drinks a day for men. One drink equals 12 ounces of beer, 5 ounces of wine or 1.5 ounces of 80-proof liquor.

- **Stress.** High levels of stress can lead to a temporary increase in blood pressure. Stress-related habits such as eating more, using tobacco or drinking alcohol can lead to further increases in blood pressure.
- **Certain chronic conditions.** Certain chronic conditions also may increase your risk of high blood pressure, including kidney disease, diabetes and sleep apnea.

Sometimes pregnancy contributes to high blood pressure as well.

Although high blood pressure is most common in adults, children may be at risk, too. For some children, high blood pressure is caused by problems with the kidneys or heart. But for a growing number of kids, poor lifestyle habits — such as an unhealthy diet and lack of exercise — contribute to high blood pressure.

Complications

The excessive pressure on your artery walls caused by high blood pressure can damage your blood vessels as well as your organs. The higher your blood pressure and the longer it goes uncontrolled, the greater the damage.

Uncontrolled high blood pressure can lead to complications including:

- **Heart attack or stroke.** High blood pressure can cause hardening and thickening of the arteries (atherosclerosis), which can lead to a heart attack, stroke or other complications.
- **Aneurysm.** Increased blood pressure can cause your blood vessels to weaken and bulge, forming an aneurysm. If an aneurysm ruptures, it can be life-threatening.
- **Heart failure.** To pump blood against the higher pressure in your vessels, the heart has to work harder. This causes the walls of the heart's pumping chamber to thicken (left ventricular hypertrophy). Eventually, the thickened muscle may have a hard time pumping enough blood to meet your body's needs, which can lead to heart failure.
- **Weakened and narrowed blood vessels in your kidneys.** This can prevent these organs from functioning normally.
- **Thickened, narrowed or torn blood vessels in the eyes.** This can result in vision loss.
- **Metabolic syndrome.** This syndrome is a group of disorders of your body's metabolism, including increased waist size, high triglycerides, decreased high-density lipoprotein (HDL) cholesterol (the "good" cholesterol), high blood pressure and high insulin levels. These conditions make you more likely to develop diabetes, heart disease and stroke.
- **Trouble with memory or understanding.** Uncontrolled high blood pressure may also affect your ability to think, remember and learn. Trouble with memory or understanding concepts is more common in people with high blood pressure.
- **Dementia.** Narrowed or blocked arteries can limit blood flow to the brain, leading to a certain type of dementia (vascular dementia). A stroke that interrupts blood flow to the brain also can cause vascular dementia.

[By Mayo Clinic Staff](#)

Mayo Clinic Footer

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N.N.A.D.A.P.

Louise Ashawasegai



Harm reduction

Do come and exchange your full containers for an empty one at trailer 4.

Needle exchange every day.....

Please do use sharps container through out the community to keep our children safe.

CHOOSING A NEW DIRECTION:

Solutions to End the Drug Poisoning Crisis in Ontario

This document proposes 4 policy solutions to reduce drug poisoning deaths and injuries in Ontario, presented by the MDSCNO*. Implementing these policies will significantly reduce the harms, including death, experienced by people who consume unregulated drugs. They will also improve community safety by reducing drug-related crime and drug poisoning rates, while simultaneously decreasing community costs incurred by first responders, police and courts responding to the current drug poisoning crisis.

More than 14,000 Ontarians have lost their lives to drug poisoning in the last five years- almost all of these were preventable deaths. Since the start of the COVID-19 pandemic, the drug poisoning situation has gotten worse. Between February and December 2020, there was a 79% increase in the number of opioid-related deaths across Ontario. Since then, in the first half of 2021, rates of fatal drug poisonings more than doubled in 15 of 34 public health units across the province. The current reality is that people who use unregulated drugs face health inequities and structural barriers that augment the health challenges they experience.

Change is possible. The current drug poisoning crisis needs to be addressed through a coordinated emergency response; learning from the success of the COVID-19 response. Processes that already exist to manage consumer health and safety offer unrealized opportunities to prevent drug poisonings. Harms resulting from the drug poisoning crisis are the result of policy choices, not individual moral failings. Action can be taken today to improve the health and safety of all residents of Ontario.

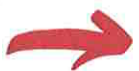
PROPOSED SOLUTIONS



DECLARE THE PROVINCE'S DRUG POISONING CRISIS TO BE AN EMERGENCY UNDER THE EMERGENCY MANAGEMENT AND CIVIL PROTECTION ACT (EMCPA, RSO 1990) & CREATE A PROVINCIAL TASK FORCE TO ADDRESS THE CRISIS IN THE FOLLOWING WAYS:



Provide the Task Force with the authority to recommend immediate policy and practice changes, and with investments to deliver real change.



Publish targets to reduce the incidence of drug poisoning and track this data publicly. Taking immediate action to end fatal and non-fatal drug poisonings must be the key priority.



Appoint experts to the Task Force from a variety of sectors to advance evidence-informed policy and practice changes. Experts need to include people who consume - and previously consumed - unregulated drugs, addiction specialists, mental health providers, and representatives from various sectors such as harm reduction, enforcement and justice, public health, and housing & homelessness.



Provide real-time data for drug poisonings and associated indicators from across the province. Timely and accurate data is necessary to accurately measure desired changes.

2

EXPAND EVIDENCE-INFORMED HARM REDUCTION PRACTICES THROUGHOUT ONTARIO.

Provide communities with adequate funding for harm reduction supports based on identified community needs. These may include safe supply programs, consumption and treatment site services, on-demand access to opioid substitution therapies and other evidence-informed harm reduction and treatment services.



Empower local Public Health units and/or community partners to introduce the harm reduction services identified above without delay. People who use drugs must be included in the design and delivery of these services.



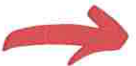
Design harm reduction supports and services that are accessible and co-located with other aligned health and social services. This may include mobile service provision in rural areas.



3

ELIMINATE THE STRUCTURAL STIGMA THAT DISCRIMINATES AGAINST PEOPLE WHO USE DRUGS.

Decriminalize possession of drugs for personal use. Criminalizing and charging people who use drugs creates barriers that prevent people from obtaining housing or work, and from accessing services to manage and mitigate the use of unregulated drugs.



Mandate minimum standards of education on the topics of substance use and mental health within regulated professions whose members work with the public. Systemic stigma against the use of unregulated drugs is embedded in our society and must be actively addressed by changes to educational processes, and service policies and practices.



4

INCREASE INVESTMENTS IN PREVENTION AND EARLY INTERVENTION SERVICES THAT PROVIDE FOUNDATIONAL SUPPORT FOR THE HEALTH, SAFETY AND WELL-BEING OF INDIVIDUALS, FAMILIES AND NEIGHBOURHOODS.

Planning that links early intervention services across multiple sectors is required. Currently services for people affected by substance use, if such services exist at all, are scattered across a spectrum of sectors and ministries – including health, addiction, mental health, social services, corrections, and child welfare. Siloed planning processes cannot address complex problems. A cross-sectoral planning approach is needed.



Investing in upstream prevention approaches provides real opportunities to build safe and healthy individuals, families and neighbourhoods for both present and future generations. Funding for neighbourhood-level services remains a chronic deficiency despite decades of evidence which supports the return-on-investment of these services. Sustained investments in prevention efforts negate the need for more expensive downstream funding in future years, providing high value across multiple public and private sectors.



The four solutions outlined above identify the core areas where implementing change can immediately improve the health of people who use substances and the safety and well-being of communities at large. Applying a public health approach to address the drug poisoning crisis will create a healthier and safer path forward on behalf of all residents of Ontario and reframe the current drug poisoning crisis as a solvable problem.

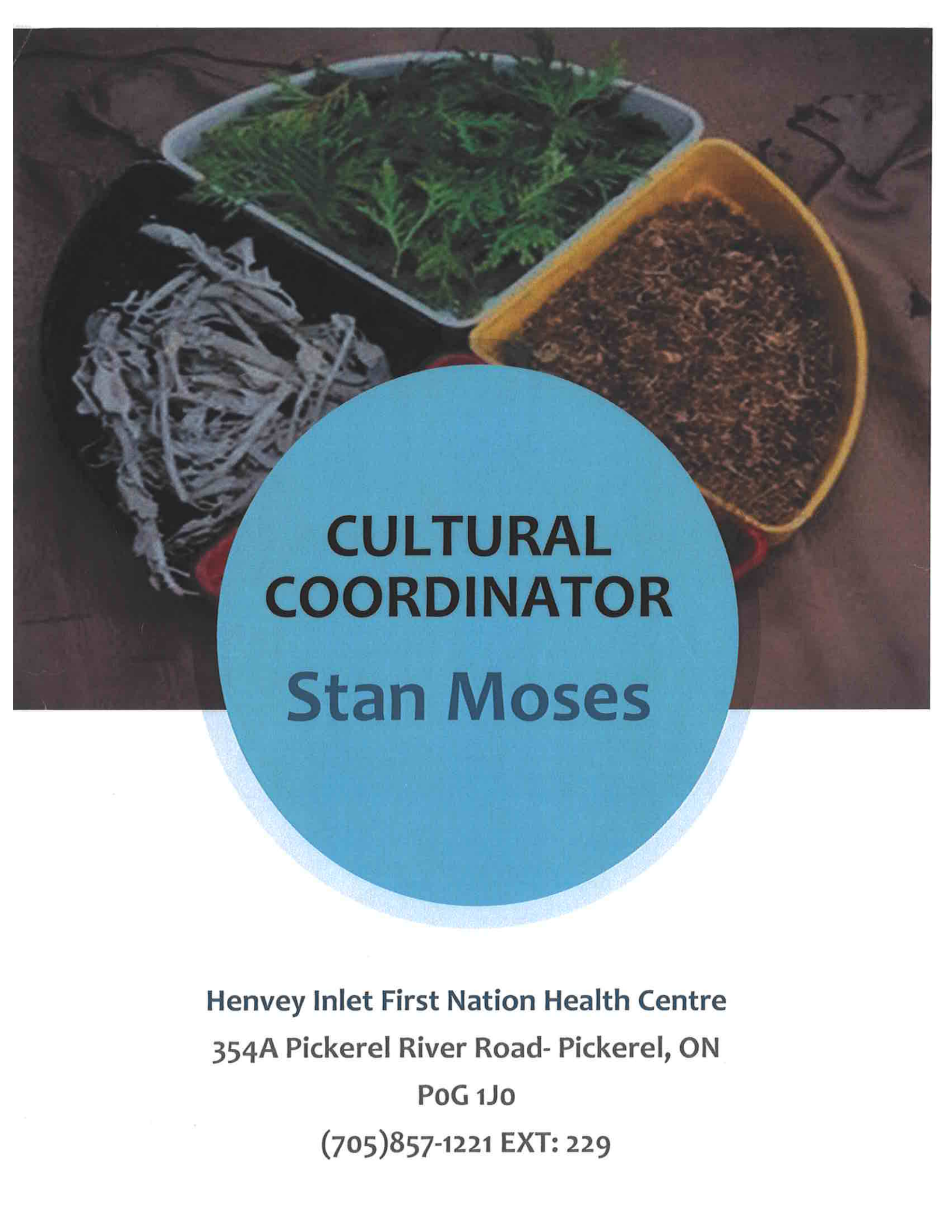
***ABOUT THE MDSCNO**

The Municipal Drug Strategy Coordinators Network of Ontario (MDSCNO) represents 37 drug strategies across the province. They work together to prevent and reduce harms related to substance use from a 4-Pillar Model which incorporates prevention, harm reduction, treatment, and community safety perspectives.

Distress lines

When in need of someone to talk to. Operated by various agencies. Open 24 hours a day (unless otherwise indicated):

- **Toronto Distress Centres:** 416 408-4357 or 408-HELP
- **Gerstein Centre:** 416 929-5200
- **Spectra Helpline:** 416 920-0497 or 905 459-7777 for Brampton and Mississauga residents
TTY: 905 278-4890; *Languages: English, Punjabi, Hindi, Urdu, Spanish, Portuguese*
- **Assaulted Women's Helpline:** 416 863-0511; Toll-free: 1 866 863-0511
- **Kids Help Phone:** 1 800 668-6868; *Languages: English and French*
- **Community Crisis Line Scarborough and Rouge Hospital:** 416 495-2891 for 24/7 telephone crisis support.
Service borders: south to the lake, north to Steeles Avenue, east to Port Union Road, and west to Victoria Park
- **Durham Crisis and Mental Health Line:** 905 666-0483
- **Distress Centre Halton:** *For Residents of the Halton Region (Burlington, Halton Hills, Milton, and Oakville). Oakville: 905-849-4541; Burlington: 905-681-1488; Milton/Halton Hills: 905-877-1211*

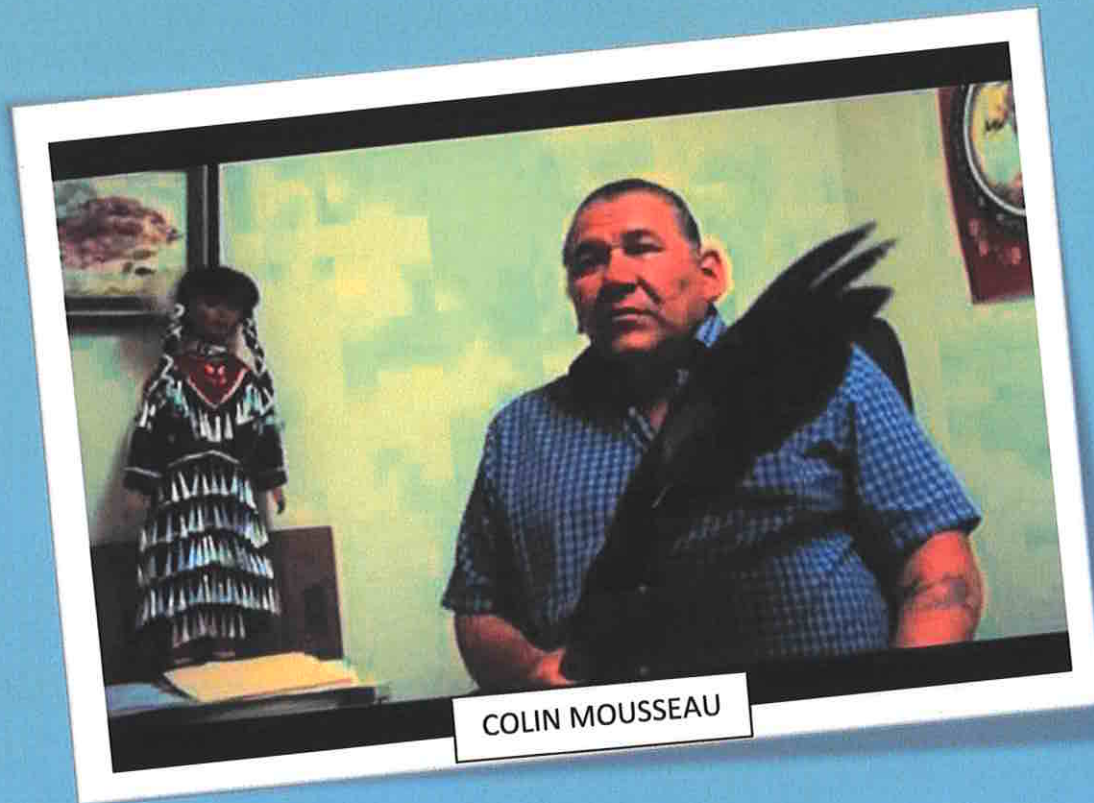


**CULTURAL
COORDINATOR**
Stan Moses

**Henvey Inlet First Nation Health Centre
354A Pickerel River Road- Pickerel, ON**

PoG 1J0

(705)857-1221 EXT: 229



COLIN MOUSSEAU

COLIN MOUSSEAU TRADITIONAL HEALER

DATES:

Sat. May 7 – Client Appts. All Day

Sun. May 8 – Lodge Preparation/Making
down by Lands Office

Mon. May 9 – Client Appts. All Day

WHERE: Client Appts in Trailer 3

TIMES: Appts. Between the times of
9:00am – 5:00pm (6 per day)

CONTACT: Stan Moses (705) 857-1221

**TO BOOK AN APPOINTMENT OR
CANCEL YOUR APPOINTMENT
PLEASE CONTACT:**

Darcy Ashawasegai
HENVEY INLET FIRST NATION
Health Centre 705 857-1221



MEN'S CIRCLE

With

STAN MOSES

10 Participants MAX

WHEN: Tuesday May 3, 2022

WHERE: Program Trailer

TIME: 5pm- 8pm

Please call to SIGN-UP!! This helps with knowing how much to budget for! Call/leave a message for Darcy to Sign-up!

For further information or if you need a ride with in the community please contact:

CULTURAL COORDINATOR STAN MOSES 705-857-1221



MEN'S CIRCLE

With

STAN MOSES

10 Participants MAX

WHEN: Tuesday May 17, 2022

WHERE: Program Trailer

TIME: 5pm- 8pm

Please call to SIGN-UP!! This helps with knowing how much to budget for! Call/leave a message for Darcy to Sign-up!

For further information or if you need a ride with in the community please contact:

CULTURAL COORDINATOR STAN MOSES 705-857-1221



MEN'S CIRCLE

With

STAN MOSES

10 Participants MAX

WHEN: Tuesday May 31, 2022

WHERE: Program Trailer

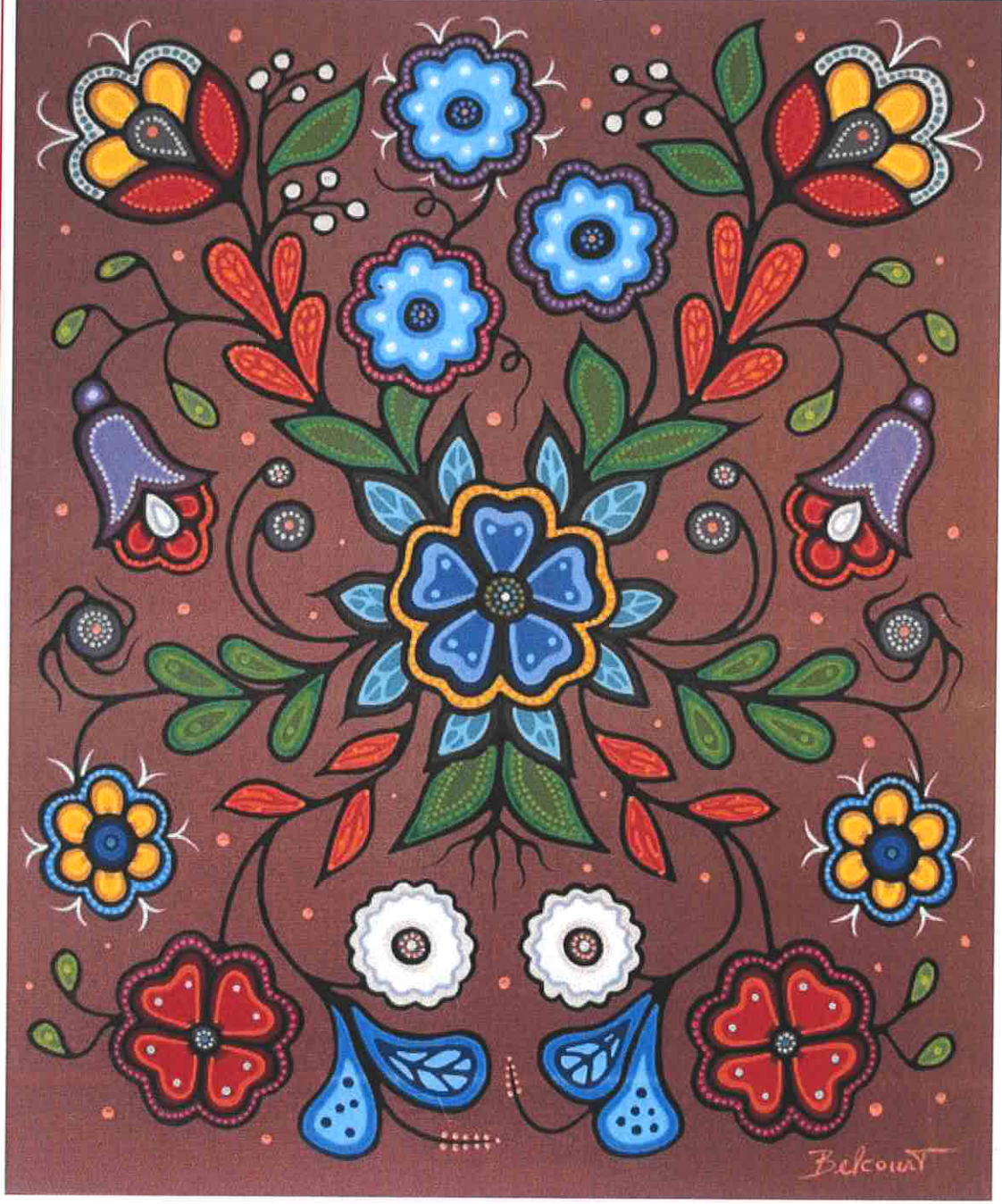
TIME: 5pm- 8pm

Please call to SIGN-UP!! This helps with knowing how much to budget for! Call/leave a message for Darcy to Sign-up!

For further information or if you need a ride with in the community please contact:

CULTURAL COORDINATOR STAN MOSES 705-857-1221

COMMUNITY WELLNESS PROGRAM NEWS



This program is designed to deliver primarily client and participant-based services to Aboriginal individuals, families and children. The priority focus of programming is related to reducing family violence.


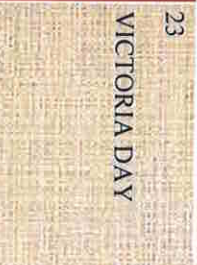


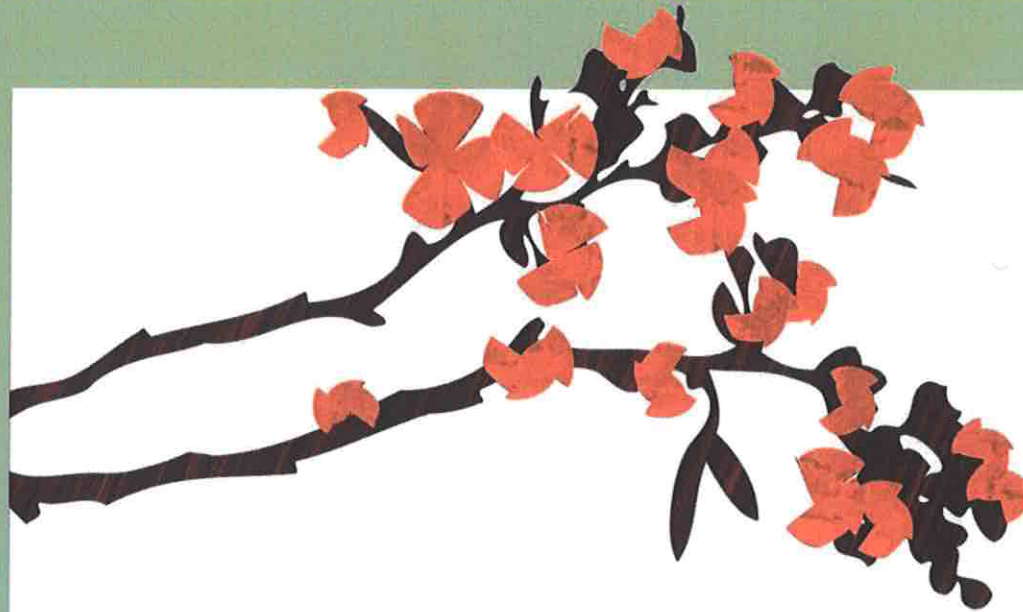
COMMUNITY WELLNESS PROGRAM

Let us fill our lives with endless spring. Let us bloom with joy; let us dance and sing.

MAY 2022



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
	IN OFFICE	REGALIA MAKING	HOME VISITS SPECIALTY SEWING	GENEALOGY & CEMETERY RESEARCH	REGALIA MAKING	
8	9	10	11	12	13	14
MOTHER'S DAY	IN OFFICE	REGALIA MAKING	HOME VISITS SPECIALTY SEWING	GENEALOGY & CEMETERY RESEARCH	REGALIA MAKING	
15	16	17	18	19	20	21
FULL MOON CEREMONY 	IN OFFICE	REGALIA MAKING	CEDAR BATHS W/MARY ELLIOTT	GENEALOGY & CEMETERY RESEARCH	REGALIA MAKING	
22	23	24	25	26	27	28
	VICTORIA DAY 	REGALIA MAKING	HOME VISITS A.M. OUT OF OFFICE P.M.	GENEALOGY & CEMETERY RESEARCH	REGALIA MAKING	
29	30	31				
	IN OFFICE	REGALIA MAKING				



SPECIALTY SEWING

INDIVIDUAL REQUESTS/MAY 2022

WHEN: **ANYTIME**

WHERE: **HEALTH CENTRE/TRAILER #3**

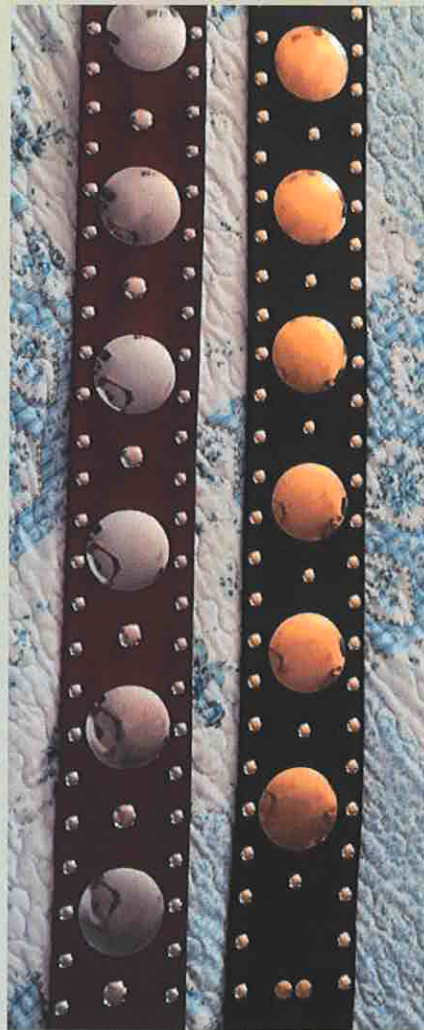
For some time now I have been asked to make special items for ceremonial use, special gatherings where an article of clothing is needed and especially items for a deceased loved one.

I do enjoy sewing and don't mind requests like this within reason. I will be extending this invitation to anyone who is needing something special please come see me in Trailer #3 at the Health Centre.

I will also be making moss bags, baby blankets, baby moccasins as part of a welcoming to new babies in the community. Please give me some advance notice and come select fabric choices and colors.

**LUANA MCQUABBIE/HIFN COMMUNITY WELLNESS WORKER 705 857-1221
EXT 227**

Individual Sessions in MAY



SIGN-UP IS NOW CLOSED.

REGISTERED PARTICIPANTS WILL BE MEETING WITH ME ONE ON ONE BY BOOKED APPOINTMENTS. AVAILABLE APPOINTMENTS ARE TUESDAYS AND FRIDAYS ALL DAY.

CWW LUANA MCQUABBIE 705 857-1221 EXT 227
HEALTH CENTRE/TRAILER #3

REGALLIA MAKING



NEW MONUMENT COMING THIS SPRING 2022 FOR THE OLD PICKEREL CEMETERY

A SNEAK PEEK AT THE NEW MONUMENT HIFN PURCHASED THAT WILL BE DELIVERED THIS SPRING.

PLEASE SEE THE [DRAFT LISTING](#) TO MAKE SURE YOUR LOVED ONE IS LISTED AND THE INFORMATION IS CORRECT. ALL NAMES WILL BE INSCRIBED ONTO THE MONUMENT BEFORE DELIVERY.

FOR FURTHER INFORMATION CONTACT THE COMMUNITY WELLNESS WORKER AT THE HEALTH CENTRE.



CWW LUANA MCQUABBIE

354-A PICKEREL RIVER ROAD
TRAILER #3
PICKEREL, ON P0G1J0

Phone: 705 857-1221 EXT 227

Email:

luana.mcquabbie@henveymedicalcentre.com

PICKEREL OLD CEMETERY-573 Pickerel River Road FRENCH RIVER INDIAN RESERVE NO. 13, ON

Surname	Given Name	Also known as	Date of Birth	Date of Death	Plot Site Identification
ASHAWASAGA	Ambrose	Ajawassige	Dec 2, 1899	Nov 20, 1979	Marker. Ambrose Ashawasega. Age 81.
ASHAWASAGA	Serena	Missabie	Oct 14, 1922	Sep 29, 1973	
ASHAWASAGA	Silas		Nov 18, 1879	Nov 8, 1966	Age 87
ASHAWASAGA	Stephen	Etienne	Sep 30, 1897	Jul 22-28, 1974	
ASHAWASAGA	Stephen Henry		May 15, 1930	Jul 4, 1982	
ASHAWASAGA	Edward Garry	Ajawassige	Sep 21, 1955		
ASHAWASAGAI	Alice Carol		Oct 26, 1951	June 19, 2001	
ASHAWASAGAI	Carolyn Dawn		Aug 13, 1965	Feb 20, 1995	
ASHAWASAGAI	Gordon		Feb 14, 1953	Jul 8, 1993	
ASHAWASAGAI	Gordon Lenn		Aug 21, 1951	Mar 30, 1998	
ASHAWASAGAI	Henry Andre		Mar 28, 1909		
ASHAWASAGAI	Victoria		Jun 22, 1948	Mar 2, 1980	Granite Plaque.
ASHAWASEGA	Elwood Midford	Ajawassige	Apr 27, 1942	Mar 5, 2009	
ASHAWASEGA	Rita		Feb 11, 1955	Dec 10, 1987	
ASHAWASEGA	Shirley Caroline	Contin/Cantin	Jun 7, 1946	Feb 20, 1995	
ASHAWASEGA	Steven				
ASHAWASEGAI	Ethan Walter			Sept 21, 200?	
ASHAWASEGAI	Nellie Joan	Missabie	Jun 25, 1941	Nov 9, 1991	Cement Headstone.

PICKEREL OLD CEMETERY-573 Pickerel River Road FRENCH RIVER INDIAN RESERVE NO. 13, ON

Surname	Given Name	Also known as	Date of Birth	Date of Death	Plot Site Identification
BLACKSTOCK	Margie		May 14, 1937	May 13, 1991	Wooden Cross intact.
COMMANDA	James Michael		May 15, 1940	Nov 13, 2006	
CONTIN	Edna Laura	King	July 7, 1941	Dec 26, 1993	
CONTIN	Elizabeth	Commandant	Dec 14,1914		
CONTIN	Eugene Irvin		Nov 3, 1958	Feb 19, 1959	
CONTIN	Frank		Jan 6, 1903	1972	
CONTIN	Francis David		June 3, 1950	Apr 4, 2002	
CONTIN	Francis Irving		Mar19, 1928	Apr 30, 1979	
CONTIN	Harvey Clarence		Apr 28, 1931	Jan 5, 1993	
CONTIN	Howard Benedict		Mar 26, 1926		Cremated. May be on Cantin Island?
CONTIN	Kira Hope		1997	1997	
CONTIN	Leonard		Mar 6, 1926	Jan 11, 1987	
CONTIN	Lloyd	Pawis	June 30, 1945	Sept 12, 1986	Headstone. 1944-1986
CONTIN	Louis		May 2, 1923	July 15. 1988	
CONTIN	Michelle Kimberley		Apr 5, 1976		
CONTIN	Paul			1991	
CONTIN	Tony				
CUBBAGE	James J. M.		Apr 25, 1990		

PICKEREL OLD CEMETERY-573 Pickerel River Road FRENCH RIVER INDIAN RESERVE NO. 13, ON

Surname	Given Name	Also known as	Date of Birth	Date of Death	Plot Site Identification
HOLMES	Cheryl Phyllis		Aug 16, 1951		
JOSEPH	Simon		Dec 6, 1915		
KAGAGINS	Alauna Rose		Nov 5, 2016	Nov 5, 2016	
KAGAGINS	Dianne Marlene		Sept 6, 1967	1986	Headstone. Diane M. Kagagins 1967-86
KAGAGINS	Raymond Jr.		Feb 20, 1990	Feb 23, 1990	
MADORE	Delia	Moreau	May 15, 1941	Jul 20, 2016	Headstone shared w/Gavin Nettagog.

PICKEREL OLD CEMETERY-573 Pickerel River Road FRENCH RIVER INDIAN RESERVE NO. 13, ON

Surname	Given Name	Also known as	Date of Birth	Date of Death	Plot Site Identification
MCKENZIE	Phillip		Abt 1921	May 1, 1972	Headstone. Sapper. R.C.E. Age 51
MCQUABBIE	Andrew	Amikwabi	1871	1968	
MCQUABBIE	Clifford	Amikwabi	April 1, 1936	June 4, 1999	
MCQUABBIE	Daniel David		Apr 12, 1957	May 9, 1980	
MCQUABBIE	Elvina Mary	Ajawassige	July 9, 1915	Jan 22, 1996	Granite Plaque.
MCQUABBIE	Gerald Thomas Michael		Jun 25, 1950	July 17, 1961	Cement Headstone.
MCQUABBIE	Harry	Amikwabi	Dec 16, 1912	July 26, 1987	Headstone.
MCQUABBIE	Henry Russell David	Amikwabi	Feb 18, 1948	July 7, 1976	Cement Headstone. Ken R. D.
MCQUABBIE	Lorraine Rachel	Pawis	Feb 18, 1933	Sep 13, 1975	
MCQUABBIE	Marilyn Theresa Audrey	Amikwabi	Nov 24 1944	July 8, 2015	Cremated.
MCQUABBIE	Peter Edwin	Amikwabi	Apr 9, 1946	Mar 15, 2006	
MCQUABBIE	Joseph Robert Johnson	Amikwabi	Mar 15 1954	July 17, 1961	
MCQUABBIE	Susan	Jako/Issac	Jan 6, 1886	Aug 10,1979	Cement Headstone.
MCQUABBIE	Willard		Nov 5, 1926	Dec 19, 1988	

PICKEREL OLD CEMETERY-573 Pickerel River Road FRENCH RIVER INDIAN RESERVE NO. 13, ON

Surname	Given Name	Also known as	Date of Birth	Date of Death	Plot Site Identification
MISSABIE	Charlie		June 5, 1884	May 2, 1959	
MISSABIE	Florence	Essens	Oct 2, 1891	Jan 14, 1987	
MISSABIE	Margaret		Feb 2, 1917	Mar 29, 1974	Cement Headstone.
MOSES	James		1902	Jan 15, 1960	
MOSES	Josephine	Amikwabi	Jan 2, 1902	1954	Age 52

PICKEREL OLD CEMETERY-573 Pickerel River Road FRENCH RIVER INDIAN RESERVE NO. 13, ON

Surname	Given Name	Also known as	Date of Birth	Date of Death	Plot Site Identification
NEODEGIJIG	Edward		Mar 27, 1960		
NEODEGIJIG	Lee		1972	1972	
NETTAGOG	Gavin Aaron Joseph		Jan 4, 1986	Nov 24, 2006	Cremated. Shares Headstone w/Delia M
NEWTON	Lloyd Edmund		Nov 6, 1935	Aug 17, 2020	Cremated.
NOGANOSH	Gilbert	Bert	Oct 18, 1925	Aug 27, 1955	
NOGANOSH	Dora Virginia	Contin/Newton	May 3, 1933	Dec 31, 1986	
NOGANOSH	Gilbert		Aug 10, 1920	July 1, 1968	
PAWIS	Archie Paul		Jan 18, 1974	Apr 1990	
PAWIS	Conrad		Nov 5, 1971	Apr 29, 1989	
PAWIS	Mary Jane		Jul 12, 1974	Feb 15, 1980	
PAWIS	Milton Archie		May 4, 1943	Apr 18, 2015	
WICKAMAKIS	Beatrice		Feb 17, 1925	Jun 11, 1979	Headstone. Beatrice 1925-1979 R. I. P.
WICKAMAKIS	Albert		Jun 15, 1901	Dec 1, 1979	
WILLIAMS	Brian		Mar 27, 1952	Jul 20, 1979	Wooden Cross intact.
WILLIAMS	Wade Elvis		Aug 3, 1956	Jun 14, 1987	Wooden Cross intact.

Genevieve Cantin Oct 19, 1893 (Cantin Island?)

Dominic Contin June 23, 1935 ?

John Lloyd Gahgahke July 18, 1931 (Bekanon on Lot?)

Alvin Lloyd Loucks Feb 25, 1948 ?

Lawrence Neodijig Oct 17, 1943 ?

This is a draft only. Definitely need more research to be done before the listing is complete. Please contact CWW Luana McQuabbie is you have any further information or see an error. Thanks.



To be used for :

CEMETERY RESEARCH

*FAMILY GENEALOGY
RESEARCH*

ELDERS CALENDAR

HERITAGE COLLECTION INFO NEEDED

BIRTH NOTICES
BAPTISMAL RECORDS
MARRIAGE RECORDS
DEATH NOTICES
FUNERAL CARDS
OBITUARY CARDS
NEWSPAPER CLIPPINGS
CEMETERY RECORDS

*All NOTICES, RECORDS, CARDS AND
CLIPPINGS will be returned to their original owner
after a copy has been made for the
Heritage Collection.*

*Please come see CWW Luana McQuabbie in
TRAILER #3 with your items or call the number and
extention below to set-up a time where I can come
see you at your home.*

*As a special thank you will receive \$5.00 in cash per
item as long as I don't already have it in my
collection.*



LUANA MCQUABBIE
HIFN COMMUNITY WELLNESS WORKER
Phone: 705 857-1221 EXT 227
E-mail: luana.mcquabbie@henveymedicalcentre.com



CREATING YOUR OWN PERSONAL FAMILY TREE

“GETTING STARTED WITH AncestryDNA”

MAY 2022 (ON-GOING),
HIFN HEALTH CENTRE/TRAILER #3

Gathering family history involves tracing a continuous line of descent from a given ancestor. In past times many First Nation people were taught to memorize their genealogy and this data was recited at marriages, funerals and at other feasts and ceremonies. Over time, the ability to trace one's ancestry by memory became a lost art.

Today anyone wishing to trace his or her ancestry must search through vital statistical records such as births, marriages and deaths, and through various government and private records as well as ancestry research through on-line sites and AncestryDNA testing kits to obtain information on their own family lineage. Testing kits available. Come start your family tree today.



TO MAKE AN APPOINTMENT FOR AN INDIVIDUAL SESSION PLEASE CONTACT

CWW LUANA MCQUABBIE 705 857-1221 EXT 227

MAY 15
2022

FULL MOON CEREMONY
With Judy Contin

263 PICKEREL RIVER ROAD

8:00 PM



All Women & Young Women are welcome, no matter what phase of their moon time they find themselves.

Women gather at various phases of the Moon to honor Nokomis, our Grandmother, in order to restore our Feminine Power and to restore the balance between the feminine and masculine sides of ourselves. In our Moon ceremony we learn the teachings of the current moon cycle and share our experiences of these Women's Teachings. Ceremonies are held around each Full Moon

Please remember to:

- Wear a Skirt and warm clothes (be prepared to be outside)
- Bring Tobacco for an offering
- Bring Yellow cloth to make a tobacco tie offering
- Bring a Chair to sit on
- Blanket
- Food to share with the other women

CWW Luana McQuabbie
Henvey Inlet First Nation Health Centre/Trailer #3
705 857-1221 EXT 227



CEDAR BATHS FOR WOMEN & SELF CARE

W/MARY ELLIOTT OF ATIKAMEKSHENG ANISHNAWBEK

WEDNESDAY, MAY 18TH, 2022

10 A.M. - 2 P.M.

HIFN HEALTH CENTRE/PROGRAM TRAILER



- *SHARING CIRCLE
- *PIPE CEREMONY
- *CEDAR BATHS BY YOU
W/SELF-CARE TEACHINGS
- * CLOSING CIRCLE
- *FEAST

~TAKE HOME YOUR OWN PERSONAL CEDAR BATH BUNDLE~

PLEASE CALL THE HEALTH CENTRE TO SIGN UP. MAX 12.

FOR MORE INFORMATION CONTACT: CWW LUANA MCQUABBIE 705 857-1221 EXT 227



CEDAR BATHS FOR WOMEN & SELF CARE

W/MARY ELLIOTT OF ATIKAMEKSHENG ANISHNAWBEK

About Mary

Mary Elliott is from Atikameksheng Anishnawbek. She is a member of the Turtle/Bird Clan family. She is a Great Grandmother to 1. Grandmother to 8 and a Mother to 3 beautiful daughters.

Over the past 35 years Mary has travelled extensively to many First Nation and Urban communities sharing her knowledge and expertise pertaining to walking a good path. Being raised with the culture of Anishnawbek and the strong cultural knowledge & experience she has, Mary has been able to articulate this into the presentations she has been asked to facilitate.

Now as a Grandmother, she has been asked to do Openings, provide support to delegates of conferences, One on One support, and debrief with those who feel they need to.



CEDAR BATHS FOR WOMEN & SELF CARE

W/MARY ELLIOTT OF ATIKAMEKSHENG ANISHNAWBEK

WEDNESDAY, MAY 18TH, 2022

10 A.M. - 2 P.M.

HIFN HEALTH CENTRE/PROGRAM TRAILER

MENU

FISH/PICKEREL

CORN SOUP

SCONE

FRESH MIXED SALAD

FRESH MIXED BERRIES

LEMONS

BUTTER

GARDEN HOUSE DRESSING

BOTTLED WATER/FIJI OR SMART

PLATES & BOWLS

NAPKINS, SPOONS & FORKS

SALT & PEPPER

MAX 12 PARTICIPANTS

FOR MORE INFORMATION CONTACT: CWW LUANA MCQUABBIE 705 857-1221 EXT 227



CEDAR BATHS FOR WOMEN & SELF CARE

W/MARY ELLIOTT OF ATIKAMEKSHENG ANISHNAWBEK

*****CATERER NEEDED*****

HIFN HEALTH CENTRE/PROGRAM TRAILER

MENU

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CORN SOUP
SCONE
FRESH MIXED SALAD
FRESH MIXED BERRIES
LEMONS
BUTTER
GARDEN HOUSE DRESSING
BOTTLED WATER/FIJI OR SMART
PLATES & BOWLS
NAPKINS, SPOONS & FORKS
SALT & PEPPER

**15 PEOPLE IN TOTAL, SUBMIT CATERING BID TO CWW LUANA
BY MAY 10 @ 4PM.**

FOR MORE INFORMATION CONTACT: CWW LUANA MCQUABBIE 705 857-1221 EXT 227

DUE TO COVID RESTRICTIONS AND ALL OFFICES BEING CLOSED DOWN FOR A FEW MONTHS THE CALENDAR COULD NOT BE COMPLETED AND PRINTED ON TIME. THE NEW RELEASE DATE WILL BE CLOSER TO THE END OF THE YEAR. THANK YOU FOR YOUR PATIENCE AND UNDERSTANDING.

CINDY LORANA MCQUINNABBE



2023 HIFN CALENDAR

ELDERS, A LINK TO THE PAST & BRIDGE TO OUR FUTURE