

Monday, May 31, 2021

7PM—9PM via ZOOM

ILR—Learn Moose Cree “L” Dialect

NEW Beginner's 4-Part Syllabics

Register with Culture



Tuesday, June 1, 2021

Town Run

DEADLINE TO REGISTER

Snack & Yak on June 2

Register by 12 PM

6:30 PM Sessions via ZOOM

**Omushkego Aski
Traditional Customs Teachings**

with Elder Annie Metat

Traditional Parenting

Register with Culture

Wednesday, June 2, 2021

6:30 PM via ZOOM

Snack & Yak

With Kasey Bissaillion

Register with Program Facilitator

7PM—9PM via ZOOM

ILR—Learn Moose Cree “L” Dialect

Register with Culture



Thursday, June 3, 2021

Town Run

Saturday, June 5, 2021



Friday, June 4, 2021

BINGO #'s Drawn

Playing for Full-Card

LEGEND				
NUMBERS DRAWN THIS WEEK				
NUMBERS DRAWN PREVIOUSLY				
B	I	N	G	O
1	16	31	46	61
2	17	32	47	62
3	18	33	48	63
4	19	34	49	64
5	20	35	50	65
6	21	36	51	66
7	22	37	52	67
8	23	38	53	68
9	24	39	54	69
10	25	40	55	70
11	26	41	56	71
12	27	42	57	72
13	28	43	58	73
14	29	44	59	74
15	30	45	60	75

Sunday, June 6, 2021

Friendly Reminders:

**Participants must
PRE-REGISTER, BRING and
WEAR facemask for ALL
programs/activities.**

**Health Centre
705-864-0200**



**For the week of
May 31—June 6, 2021**

Summer Hours
Monday—Thursday
8:00 AM - 5:00 PM
Friday
8:00 AM - 12:00 PM

Please **PRE-REGISTER** and
WEAR A FACE MASK for the
interesting/interactive
programs, activities and
events offered in our
community.

Budding Moon

*When the waters from the land have emptied
into the rivers, all the plants awaken and reach
for the warm sun.*

The landscape regains its beauty.

Participation and feedback for
Activities/Events/Programs are
encouraged and greatly appreciated.
Submit feedback to **Tracy Martin** via

(705)-864-0200 or
healthcarecoordinator@chapleaucreehealth.ca

Be Bear Wise and **Prevent** Bear Encounters

Prevent and report encounters with black bears and learn who to contact.

Please refer to the link below for more info

<https://www.ontario.ca/page/prevent-bear-encounters-bear-wise>

1. [Who to contact](#)
2. [If you encounter a black bear](#)
3. [Prevent conflicts with black bears](#)
4. [Bear Wise tips and tools](#)
5. [When out in bear country](#)
6. [About black bears](#)
7. [Take community action](#)

Emergency

Call 911 or your local police

Non-emergency

Call [1-866-514-2327](tel:1-866-514-2327)

[TTY: 705-945-7641](tel:705-945-7641)

Who to contact

Not every bear sighting is an emergency situation. Here is who to call if you encounter a bear.

Emergency situations

Call 911 or your local police if a bear poses an immediate threat to personal safety and exhibits threatening or aggressive behaviour, such as:

- enters a school yard when school is in session
- stalks people and lingers at the site
- enters or tries to enter a residence
- wanders into a public gathering
- kills livestock/pets and lingers at the site

Police will respond first to an emergency situation, but may request assistance from the Ministry of Natural Resources and Forestry during daylight hours.

Non-emergency encounters

Call the toll-free Bear Wise reporting line at [1-866-514-2327](tel:1-866-514-2327) (TTY [705-945-7641](tel:705-945-7641)) if a bear:

- roams around or checks garbage cans
- breaks into a shed where garbage or food is stored
- bear is in a tree
- pulls down a bird feeder or knocks over a barbecue
- moves through a backyard or field but does not linger

This line operates 24 hours a day, seven days a week, from April 1 to November 30.

If you encounter a black bear

When bears are caught off guard, they are stressed, and usually just want to flee.

Stop. Do not panic. Remain calm.

Generally, the noisier the bear is, the less dangerous it is, provided you do not approach. The noise is meant to “scare” you off and acts as a warning signal.

Do

- Slowly back away while keeping the bear in sight and wait for it to leave.
- If the bear does not leave, throw objects, wave your arms and make noise with a whistle or air horn.
- Prepare to use bear spray.
- If you are near a building or vehicle get inside as a precaution.
- Drop any food you may be carrying and slowly move away.
- If a bear is in a tree, leave it alone. Leave the area. The bear will come down when it feels safe.

Do not

- Run, climb a tree or swim.
- Kneel down.
- Make direct eye contact.
- Approach the bear to get a better look.
- Attempt to feed a bear.

Bear warning signs

Black bear attacks are **extremely rare**.

A threatened black bear will give off warning signs to let you know you are too close. A black bear standing on its hind legs is not a sign of aggressive behaviour. The bear is trying to get a better look at you or catch your scent.

A defensive bear

A bear that feels threatened will:

- salivate excessively and exhale loudly
- make huffing, moaning, clacking and popping sounds with its mouth, teeth and jaws
- lower its head with its ears drawn back while facing you
- charge forward, and/or swat the ground with its paws (known as a 'bluff' charge)

A predatory bear

The bear will approach silently, usually in rural or remote areas, and may continue to approach regardless of your attempts to deter them by yelling or throwing rocks. If the bear attacks:

- use bear spray
- fight back with everything you have
- do not play dead unless you are sure a mother bear is attacking in defence of her cubs

After the bear leaves

- Report the bear encounter by calling [1-866-514-2327](tel:1-866-514-2327) (TTY [705-945-7641](tel:705-945-7641))
- Tell your neighbours about bear activity in the area.
- If the bear was eating non-natural food (such as garbage or bird food), remove or secure the item.

When to use self defence

If you have tried everything possible to get a bear to leave your property and you are afraid for your safety, you have the right to protect yourself and your property.

Killing a bear in self-defence must be an action of last resort.

Any action you take must be done:

- according to applicable laws (for example, discharging a firearm by-laws)
- safely
- in the most humane way possible

You do not need a hunting licence to kill a bear in self-defence. If you kill a bear and do not intend to keep it, you must **report it immediately** to your [local Ministry of Natural Resources and Forestry office](#).

If you kill a bear and want to keep it, you must [register for a Notice of Possession](#) with the Ministry of Natural Resources and Forestry.

Bear fact:

Most bears encountering a barking dog will climb a tree or run away, but in some instances the bear may chase the dog back to its owner and react defensively against the dog or person.

Prevent conflicts with black bears

Bears usually avoid humans, but they are attracted into urban and rural areas to get food.

Bears will be attracted to your neighbourhood by:

- strong food aromas
- the scent of garbage
- cooking smells
- ripe fruits and pet food left outside

If bears learn that they can find food where people live, they will return again and again as long as the food source is available and will even try to enter buildings. Relocation and dispatch of bears are poor ways of trying to prevent conflicts with bears.

To avoid bear encounters, follow these Bear Wise tips.



Garbage:

- put garbage out only on the morning of garbage day, not the night before
- put meat scraps in the freezer until garbage day
- put garbage in containers that have tight-fitting lids and store it in a bear-proof location such as your basement or a sturdy garage
- frequently wash garbage cans and recycle containers and lids with a strong-smelling disinfectant, such as bleach
- take garbage to the dump often, if you do not have curbside pick-up



Bird feeders:

- fill bird feeders only through the winter months
- put away feeders in the spring and instead, offer birds natural alternatives (for example, flowers, nesting boxes and fresh water)



Barbecue:

- burn off food residue and wash the grill right away
- empty the grease trap every time you barbecue
- remove all utensils, dishes and food after eating
- be aware that cooking odours can attract bears



Fruits and berries:

- pick all ripe and fallen fruit from trees and shrubs on your property
- plant non-fruit bearing trees and shrubs



Pet food:

- do not leave pet food outdoors, in screened-in areas or porches



Dogs:

- leash your dog(s) when walking through communities or out in bear country to reduce the potential of dogs harassing a black bear or of being attacked by one
- unleashed dogs may instigate a chase response that may lead the bear back to you
- check your yards for the presence of a black bear before letting your dogs out

Bear fact:

Bears love bird feeders. Bird seeds are a high source of calories for bears. Store bird seed and feeder indoors until winter months.

Bear Wise tips and tools

<https://www.ontario.ca/page/prevent-bear-encounters-bear-wise> link for more information to learn how to [keep bears away from your school, cottage and farm.](#)



About black bears

Black bears live throughout most of Ontario. They primarily inhabit forested areas where they are best able to find food, refuge and den sites.

Eating habits and diet

Their entire life revolves around food. When they are not hibernating, bears spend most of their time looking for food.

From the time they come out of hibernation until berry crops are available, bears live off their stored fat and the limited energy provided by fresh spring greens. They get most of their food energy by feeding on summer berry crops like blueberries, raspberries, and cherries. In the fall, they turn their attention to hazel nuts, mountain ash, acorns and beech nuts.

Though black bears will eat carrion, insects, fish, deer fawns and moose calves, the bulk of their diet is plant material. Their natural preference is to find lots of high energy food – like berry patches – that will help them fatten up fast. Their survival and ability to have and raise young depend on their ability to put on weight before going into winter hibernation.

The availability of their natural food varies from season to season and from year to year. When natural food sources are poor, black bears will travel long distances to seek out alternative sources of food.

When out in bear country

Bears are smart, curious, powerful and potentially dangerous. **And they don't like surprises.** If you are a hiker, cyclist, jogger, berry picker or you plan to spend some time in "bear country," learn to be Bear Wise to avoid an encounter.

Avoid bear-human interactions

Alert bears to your presence so they can avoid you. Make noise, such as singing, whistling or talking while in areas with restricted visibility or with high background noise, such as near streams and waterfalls.

While outdoors:

- travel in groups of two or more—people who travel alone are most vulnerable
- scan your surroundings and do not wear music headphones
- watch for signs of bear activity such as tracks, claw marks on trees, flipped-over rocks or fresh bear droppings
- leash your dog, as uncontrolled, untrained dogs may actually lead a bear to you
- pay attention, especially if you are working, gardening or berry picking
- rise slowly if you are in a crouched position so that you don't startle nearby bears
- avoid strong fragrances that may cause a bear to be curious
- put any food you are carrying in sealed containers in your pack

Be prepared

You should:

- carry a whistle or air horn
- learn how to use bear pepper spray and carry it somewhere that's easy to access
- consider carrying a long-handled axe, if you are in remote areas or deep in the forest

Bear fact:

Discuss bears with children. Teach children simple things like making sure they can always see an adult; to never approach a bear or other animals; to never run from a bear and if they see a bear to stay calm and call for help.



COVID-19 Pfizer Vaccine Clinic for Youth 12+ years By Appointment ONLY!

Date: June 15th, 2021

Time: 3:30-4:30 PM

Location: Band Office Basement

Any Chapleau Cree First Nation Youth 12 years of age on the date above qualify to receive their 1st (*first*) dose of the Pfizer vaccine.

Please call **Tracy** at **705-864-0200** to book your appointment.

Ministry of Health

What youth need to know about their COVID-19 vaccine appointment

Version 1.0 May 19, 2021

This guidance provides basic information only. This document is not intended to provide or take the place of medical advice, diagnosis or treatment, or legal advice.

Please read this document to know what to expect for your upcoming vaccine appointment.

Preparing for COVID-19 Vaccination

What do I need to bring to the appointment?

- Your health card/Ontario Health Insurance Plan (OHIP) card (even if it is expired). If you do not have an OHIP card that is okay. **You can still get vaccinated if you do not have an OHIP card, or if your OHIP card is expired.** Please bring another form of government-issued photo identification (ID) such as a driver's license, passport, Status card, or birth certificate. If you do not have a health card or government-issued photo ID, please speak to your principal and they can give you an official letter with your name, date of birth and address.
- Immunization record, if available, to keep track of the COVID-19 vaccine.
- Proof of COVID-19 immunization from first dose, if available and applicable
- An [allergy form](#), if you have are allergic to a component of your vaccine (you can read the ingredients of the vaccine in the [COVID-19 Vaccine Information Sheet: For Youth \(age 12-17\)](#)).
- Any assistive devices needed (e.g., scooter, wheelchair, cane) and items to help pass the time (e.g., cell phone, book).
- Reading glasses and/or hearing aid, if required.
- Mask that covers the mouth, nose and chin.

- A support person, if required (e.g., interpreter, someone to help you during the vaccination, your parent/guardian).
- If you are nervous about the vaccination, bring something to help distract yourself, such as a mobile device, headphones for music, or a book.

What do I need to do to prepare for the appointment?

- Read the [COVID-19 Vaccine Information Sheet: for Youth \(age 12-17\)](#) and follow up with your regular health care provider (such as your family doctor, nurse practitioner or pediatrician) with any questions you have. You may want to talk to your parent or guardian too.
- If you regularly take medication, you should continue and eat meals as usual. Make sure to eat before coming to the clinic to prevent feeling faint or dizzy while being vaccinated.
- Wear a loose-fitting top or a t-shirt so that the health care provider can easily access the upper arm for the vaccination.
- Do not wear any scented products.
- **If you have [symptoms of COVID-19](#), you should not attend the clinic. Get in touch with your school or the vaccine clinic and they can help you to rebook.**
- Do not arrive more than 10 minutes before the appointment time to avoid crowding at the clinic.
- You may need to wait outside before your appointment. Please dress for the weather.

What can I expect when I arrive at the appointment?

Health care providers are being very careful to prevent the spread of COVID-19 when providing immunizations. Clinic staff will take every precaution to ensure your health and safety during your visit. Public health measures, such as physical distancing, hand sanitization, mask-wearing will be in place at clinics. All health care providers, patients, other staff, and visitors need to follow all public health measures in the clinic. Please read and follow any signs or instructions provided at the clinic.

- You will be asked to provide an OHIP card or identification.

- You will be asked to answer a series of questions to see if you have the signs or symptoms associated with COVID-19 before entering the clinic (like the health screening you do before you come to school for example).
- You will be asked questions about your medical history (for example, about any allergies you have).
- Everyone will be asked to wear a mask while at the clinic, to clean your hands, and practice physical distancing from others (at least 2 metres/6 feet).
- You will be asked to stay for 15-30 minutes after receiving the vaccine to monitor for any unexpected changes in health or allergic reactions.

Can I consent to this vaccine?

COVID-19 vaccines are only provided if informed consent is received from the person to be vaccinated, including those aged 12 to 17, and as long as you have the capacity to make this decision. This means that you understand:

- what vaccination involves,
- why it is being recommended; and
- the risks and benefits of accepting or refusing to be vaccinated.

Even if you are able to provide informed consent, it would be a good idea to talk about this decision with your parent/guardian or an adult you trust such as your principal or a teacher.

If you are not able to consent to receiving the vaccine, you require consent from your substitute decision-maker, such as their parent or legal guardian.

What if I have allergies?

The health care provider at the vaccine clinic will ask if you have allergies and talk through what is right for you – you may be asked to wait longer at the clinic after your immunization,

The [COVID-19 Vaccine Information Sheet: for Youth \(age 12-17\)](#) has details about the vaccine ingredients, including polyethylene glycol (PEG), tromethamine, and/or polysorbate 80.

For more detailed recommendations for individuals with allergies, please consult [Vaccination Recommendations for Special Populations](#) guidance document

What if I have other medical conditions?

Please consult the [Vaccination Recommendations for Special Populations](#) guidance document for information. If you have a medical condition for which you receive ongoing treatment, you may wish to speak to your health care provider about whether the vaccine is right for you.

What if I take blood thinners?

If you have a bleeding problem, bruise easily, or use a blood-thinning medicine (e.g. warfarin or heparin) you can receive the vaccine.

What if I fainted the last time I got a vaccine or I have a fear of needles?

If you have fainted, or became dizzy with previous vaccinations or procedures, or if you have a high level of fear about injections, you should still get the vaccine. Tell the health care provider at the clinic so that appropriate supports can be offered. You can also bring a person with you for support such as a friend or your parent/guardian.

COVID-19 Vaccination After Care

What should I do right after receiving the vaccine?

- After your vaccine, you should stay in the clinic for 15 to 30 minutes. This is to make sure you do not have an allergic reaction. Allergic reactions do not happen often. Staff giving vaccines know how to treat allergic reactions. Let staff know if you notice a skin rash, swelling of your face or mouth or throat, problems breathing, and/or feel unwell.
- If waiting inside the clinic, be sure to leave your mask on and remain at least 2 metres/6 feet away from others.
- Use the alcohol-based hand rub to clean your hands before leaving the clinic.

- Do not operate a vehicle or other form of transportation for at least 15 to 30 minutes after being vaccinated (as advised by the health care provider) or if you are feeling unwell.
- If someone is picking you up from the clinic, they should get you after the 15 to 30 minute waiting period in the clinic is finished. Your support person or driver should follow the direction of clinic staff regarding where to meet/collect you.

What should I expect in the next few days?

- You may have some side effects from the vaccine. They should go away in a few days.
- Common expected side effects include: pain, swelling and colour changes (e.g. red, purple) at the site where the needle was given. Applying a cool, damp cloth where the vaccine was given may help with soreness.
- Other symptoms may include: tiredness, headache, muscle pain, chills, joint pain, and fever. If needed, pain or fever medication (such as acetaminophen or ibuprofen) may help with pain or fever.
- Serious side effects after receiving the vaccine are rare. However, should any of the following adverse reactions develop within three days of receiving the vaccine, seek medical attention right away or call 911 if severely unwell: hives, swelling of the face or mouth or throat, trouble breathing, serious drowsiness, high fever (over 40°C), convulsions or seizures, or other serious symptoms (e.g., “pins and needles” or numbness).
- If you are concerned about any reactions you experience after receiving the vaccine, contact your health care provider. You can also contact your [local public health unit](#) to ask questions or to report an adverse reaction.

Things to remember after you receive the vaccine

- Continue wearing a mask, staying at least 2 metres from others and limiting/avoiding contact with others outside of your household.
- Do not receive any other vaccines from now until at least 28 days after any dose of your COVID-19 vaccine (unless considered necessary by your health care provider). Keep this sheet (or other immunization record) AND your printed COVID-19 immunization receipt from the vaccination today in a safe place and bring it with you for follow-up COVID-19 vaccinations as instructed by the vaccination clinic.

COVID-19 Vaccine Youth (Age 12-17) Consent Form

CONSENT FORM –COVID-19 Vaccine

Version 1.0 – May 21, 2021

Last Name	First Name	Identification number (e.g., health card, passport, birth certificate, driver's license)	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other: _____ <input type="checkbox"/> Prefer not to answer		Name of your Primary Care Clinician (Family Physician, Pediatrician or Nurse Practitioner)	
If Indigenous, please indicate your Indigenous identity: <input type="checkbox"/> First Nations <input type="checkbox"/> Métis (includes members of the Métis organization or Settlement) <input type="checkbox"/> Inuk/ Inuit <input type="checkbox"/> Other Indigenous, specify: _____ <input type="checkbox"/> Prefer not to answer <input type="checkbox"/> Unknown			
Mobile Phone	Parent or other Phone		
Street Address		City	
		Province	
		Postal Code	

<p>Date of Birth*</p> <p>_____ / _____ / _____</p> <p>month day year</p> <p>*You must be 12 or older at the time of your first dose</p>	<p>School you will be attending in the fall of 2021</p> <hr/> <p><input type="checkbox"/> Prefer not to answer</p> <p>Home school</p> <p>Unknown</p> <p>Not attending school</p>
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Is this your **first or second dose** of the vaccine?

☐ First

☐ Second

If second, please indicate the date of the first dose and name of vaccine administered:

_____/_____/_____ (month, day, year)

_____ Name of vaccine administered for a 1st dose

Consent to Receive the Vaccine

I have read (or it has been read to me) and I understand the Immunization Prepackage, including the following documents: 'COVID-19 Vaccine Information Sheet' or the 'COVID-19 Vaccine Information Sheet: For Youth (age 12-17)' and 'What youth need to know about their COVID-19 vaccine appointment'.

- I have had the opportunity to ask questions regarding the vaccine I am receiving and to have them answered to my satisfaction.

☐ I consent to receiving all recommended doses in the vaccine series.

OR

☐ I am consenting on the patient's behalf and I confirm that I am the patient's substitute decision maker (e.g., parent, legal guardian).

- I understand that I may withdraw this consent at any time.

Note: Please contact the vaccination clinic where you are supposed to receive the Covid-19 vaccine if you change your mind and no longer consent to receiving the vaccine. This will allow someone else to take your spot. If consent has been withdrawn by a substitute decision maker of an individual who resides in a congregate setting, then the congregate setting must contact the local public health unit.

Acknowledgement of Collection, Use and Disclosure of Personal Health Information

The personal health information on this form is being collected for the purpose of providing care to you and creating an immunization record for you, and because it is necessary for the administration of Ontario's COVID-19 vaccination program. This information will be used and disclosed for these purposes, as well as other purposes authorized and required by law. For example,

- it will be disclosed to the Chief Medical Officer of Health and Ontario public health units where the disclosure is necessary for a purpose of the Health Protection and Promotion Act. And
- it may be disclosed, as part of your provincial electronic health record, to health care providers who are providing care to you.

The information will be stored in a health record system under the custody and control of the Ministry of Health.

Where a Clinic Site is administered by a hospital, the hospital will collect, use and disclose your information as an agent of the Ministry of Health.

☐ **I acknowledge that I have read and understand the above statement.**

You may be contacted by a hospital, local public health unit, or the Ministry of Health for purposes related to the COVID-19 vaccine (for example, to remind you of follow up appointments and to provide you with a record of immunization). If you agree to receiving these follow up communications by email or text/SMS, please indicate this using the box below.

☐ **I consent to receiving follow-up communications:**

☐ **by email**

☐ **by text/SMS**

If you agreed to be contacted by email or text/SMS, please provide your email address or your text/SMS number:

Consent to Being Contacted About Research Studies

You have the option of consenting to be contacted by researchers about participation in COVID-19 vaccine related research studies. If you consent to be contacted, your personal health information will be used to determine which studies may be relevant to you, and your name and contact information will be disclosed to researchers. Consenting to be contacted about research studies does not mean you have consented to participate in the research itself. Participating in research is voluntary. You may refuse to consent to be contacted about research studies without impacting your eligibility to receive the COVID-19 vaccine.

If you do not wish to be contacted about research studies, please indicate this below.

If you consent to be contacted about research studies, and then change your mind, you may withdraw consent at any time by contacting the Ministry of Health at vaccine@ontario.ca.

Consenting to be contacted about research studies will not impact your eligibility to receive the Covid-19 vaccine.

I consent to be contacted about COVID-19 vaccine related research studies:

☐ **by email**

☐ **by phone**

☐ **by text/SMS**

☐ **by mail**

If selected by email, please provide your email address: _____

☐ **I do not consent to be contacted about COVID-19 related research studies**

Signature	Print Name	Date of Signature

If signing for someone other than yourself, indicate your relationship to the person you are signing for:

☐ If signing for someone other than myself, I confirm that I am the substitute decision maker.

FOR CLINIC USE ONLY							
Agent	COVID-19	Product Name		Lot #		Dose Amount:	
Anatomical Site	<input type="checkbox"/> Left deltoid <input type="checkbox"/> Right deltoid	Route	Intramuscular (IM)		Dose #:		
Date Given	_____ / _____ / _____ (mm/dd/yyyy)			Time Given	_____ : _____ am pm	AEFI? (after receiving current dose)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Given By (Name, Designation)					Location		
Authorized By							
Reason for Immunization		<input type="checkbox"/> Youth 12+ <input type="checkbox"/> Age Priority Population – Age Eligible Population <input type="checkbox"/> Other reason: _____					
Reason Immunization Not Given		<input type="checkbox"/> Immunization is contraindicated <input type="checkbox"/> Practitioner recommends immunization but no PATIENT consent <input type="checkbox"/> Practitioner decision to temporarily defer immunization <input type="checkbox"/> Medically Ineligible <input type="checkbox"/> Patient withdrew consent for series					

Your dose 2 of 2 is
scheduled for:

----- / ----- / ----- (mm/dd/yyyy) ----- : ----- am pm

SCREENING-COVID-19 Vaccine

Last Name	First Name	Identification number (e.g., health card, passport, birth certificate, driver's license)					
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Prefer not to answer <input type="checkbox"/> Other: _____							Name of your Primary Care Clinician (Family Physician or Nurse Practitioner)
Home Phone	Mobile Phone	Email Address					
Street Address				City		Province	Postal Code
Date of Birth (month, day, year) ____ / ____ / ____	Age	Is this your first or second dose of the vaccine? <input type="checkbox"/> First <input type="checkbox"/> Second Name of Vaccine: _____ If second, please indicate the date of the first dose: ____ / ____ / ____ (month, day, year)					

<p>If the client is receiving the AstraZeneca/COVISHIELD or Janssen COVID-19 Vaccine:</p> <p>Have you experienced major venous and/or arterial thrombosis with thrombocytopenia following vaccination with any vaccine?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
<p>Have you experienced a previous cerebral venous sinus thrombosis (CVST) with thrombocytopenia or a heparin-induced thrombocytopenia (HIT)?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>

<p>Have you been sick in the past few days? Do you have symptoms of COVID-19 or have a fever today?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
<p>Have you had a serious allergic reaction within 4 hours to the COVID-19 vaccine before?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
<p>Do you have allergies to polyethylene glycol, tromethamine (Moderna only) or polysorbate?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
<p>Have you had a serious allergic reaction to a vaccine or medication given by injection (e.g., IV, IM), needing medical care?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
<p>Have you received another vaccine (not a COVID-19 vaccine) in the past 14 days?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
<p>Do you have a weakened immune system or are you taking any medications that can weaken your immune system (e.g., high dose steroids, chemotherapy)?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, are you receiving stem cell therapy, CAR-T therapy, chemotherapy, immune checkpoint inhibitors, monoclonal antibodies or other targeted agents?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
	<p>If yes, please provide details</p>
<p>Do you have a bleeding disorder or are taking blood thinners?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>
<p>Have you ever felt faint or fainted after receiving a vaccine or medical procedure?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>If yes, please provide details</p>

Moose Cree is a severely endangered dialect of Cree. It has very few fluent speakers and revitalization is the conscious effort to save the language from falling out of use for generations to come.

Introducing the **Indigenous Language Revitalization (ILR) CLASSES** *with the Moose Cree (L-Dialect) for Adults*

The weekly classes are focused on helping people build their vocabulary and conversational skills. Classes will consist of casual conversation with other learners and fluent speakers on a variety of topics.

No prior knowledge of or fluency in Cree is necessary. All levels of fluency are encouraged to join!

Easy and friendly learning groups via ZOOM.

Weekly resources: Word of the Day & infographics, virtual flashcards, lessons and worksheets.

NEW! Beginner 4-Part Syllabics Classes offered on Monday Evenings @ 6:00 PM

May 17, 24, 31 & June 7 – <https://westernuniversity.zoom.us/j/98525055521>

The new beginner classes will use a syllabics-only approach, meaning this is the only alphabet we will see and use in our activities. The structure will be very similar to our beginner classes along with basic pronunciation, grammar rules, and some vocabulary.

Weekly ILR Intermediate Classes offered on Wednesday Evenings @ 7:00 PM – 9:00 PM

<https://westernuniversity.zoom.us/j/98824871041>

Indigenous Language Revitalization (ILR) is an organization created to keep the Moose Cree “L-Dialect alive. The zoom classes are hosted by ILR Lead, Terrance Sutherland, a member of the Moose Cree First Nation and ILR Coordinator, Ricki Archilles, Ph.D. Candidate, University of Western Ontario both residing in Kapuskasing, ON and other co-host speakers of the L-Dialect.

If you are interested in registering for Cree Classes, please email Cheryl Dupuis at culture@chapleaucree.ca





OMUSHKEGO ASKI

Way of Life & Traditional Customs Teachings

with Elder, Annie Metat & Knowledge Keepers

CREATING A SENSE OF CALM AND BALANCE

What children learn from Grandparents & Elders stick with them
Singing to the baby before birth is very important
Role models of the Grandparents, Elders, Aunts, Uncles and older Siblings
Being open and honest & standing up for what you believe
Dances, songs and language connects you to traditions and identity

7:00 PM ZOOM SESSIONS **REVISED SCHEDULE** (May 27)



- Traditional Parenting | Tues., June 1/21
- Seasonal Cycles & Grandmother Moon Teaching | Tues., June 8/21
- Moss Bags & Tikinagan Teachings | Dates to be determined*
- Spirit Names, Clans & Colours | Dates to be determined*

* More information to follow

To **REGISTER** please email Cheryl at culture@chapleaucree.ca

(Updated) Meeting ID: **224 600 4355**

Password: **7058640200**

Snack & Yak

June 2, 2021

6:30 PM via Zoom

Registration Procedure:

Please call **705-864-0200** or Email:

programfacilitator@chapleaucreehealth.ca

REGISTRATION DEADLINE: June 1st by 12:00 PM

Meeting ID: **306 708 5721**

Passcode: **7058640200**

Ingredients and grocery bag will be dropped off
before the event.

Log on to Zoom and cook together!