

2020-2021 Annual Report

POLICE STATION



COMMUNITY CENTER



HEALTH CENTER



KIUNA COLLEGE



CONSEIL DES ABÉNAKIS
ODANAK





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WORD FROM THE DIRECTOR

Kwaï mziwi!

T8ni kd'al8wziba kwani Covid-19 pandemic kwigw8mw8lek? How have you been coping in your homes during the Covid-19 pandemic? Thank goodness the public health department and our governments have relaxed the health measures over the last few days allowing us more freedom. The battle with Covid-19 is not yet won or over. At the time of writing, there are still challenges in reaching the 75% vaccination rate targeted by our governments for young Quebecers aged 18 to 39. That magic number of 75% vaccination rate with two doses is our way out and a near return to normal life. This is the Executive Management's 2020-2021 Annual Report to the Council. I will give an overview of the important activities that took place in Odanak over the past year.



DANIEL G. NOLETT
Executive Director

At the Council, we were in a slow mode of operation during the early months of the Covid-19 pandemic. The vast majority of staff were telecommuting, whether in the Administrative Office, the Health Centre (OHC) or the Environment and Land Office (BETO), from April through September. The rest of the employees, such as public works, did what they were allowed to do in terms of essential services. Police services also functioned normally. They had the thankless task of enforcing public health guidelines during the pandemic. It is not easy for them to have to ask people not to congregate, to respect social distancing (not to be within 2 metres of each other) and not to visit their loved ones in their homes, etc.

We could feel the tension and distress rising among people after the first four weeks of confinement. Especially among the elderly over 70 years old who could not go to public places

like the post office, the grocery store or even the church (there is no more mass since mid-March). Worse, they could not receive visitors at all at home. This is a more isolated clientele and under the circumstances, we set up a vigil with the help of police services and social workers who contacted them on a regular basis (every week) to inquire about their condition and to talk with them in order to break the isolation and to watch over the rising mental health problems during this difficult period. The efforts were mainly concentrated on the elderly with a loss of autonomy who could not even go for a walk among other things. With no more mass during confinement, everyone spent the Easter vacation at home and we were not able to have a family gathering as usual. It was very difficult! All of these measures that our governments have taken have had the sole purpose of protecting the general population and especially the more vulnerable population such as our elders. We wanted to avoid the spread of this terrible virus.

Home care was maintained for those who required follow-ups. Assisted living services were also maintained such as grocery shopping, meal preparation and bathing. Other health centre services were provided by phone or video conference; even psychologist consultations. The First Nations Child and Family Services (FNCFS) also made weekly phone calls to the Odanak families with whom the service providers do normal follow-ups.

An emergency food basket service for community members in need was set up by the OHC and the FNCFS during the first five to six months of the pandemic. In addition, we worked closely with other communities in the Bas-Saint-François, with Pierreville and Saint-François-du-Lac, and with the Centre d'Action



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Bénévole du Lac St-Pierre (CAB). Together, we set up a meals-on-wheels service for seniors aged 60 and over. The CAB distributed cold meals prepared by Traiteur Claire of Baie-du-Febvre. Eligible individuals could receive up to 10 meals per week. This service was in addition to the services of the CAB food counter which distributes food baskets every two weeks to individuals and families in need in the Bas-Saint-François. This service was maintained from April to the end of August. At the beginning of September, after the public health authorities announced the relaxation of health measures, we resumed our own meals-on-wheels service with hot meals served twice a week to individuals aged 60 and over in Odanak.

The Council set up an emergency financial assistance of \$500 in the spring of 2020 for community members residing in Odanak. The Council wanted to ensure that its members who had unfortunately lost their jobs or had to cease operations due to the pandemic would have the means to buy groceries while waiting to receive the Canada Emergency Response Benefit (CERB).

We believe that all of these efforts, combined with the services of our community organizations such as the CAB, have responded well to the basic needs of our members during the early months of the pandemic in the spring and summer of 2020. We have received a lot of positive feedback in this regard. We kept members informed of the evolution of our service provision and of the situation of the pandemic in general in Odanak through communiqués and our website and/or Facebook page which were updated on a daily or at least weekly basis.

After experiencing a decline in Covid-19 cases during the summer of 2020, we experienced a

resurgence of cases in Quebec in September. We had asked our employees to gradually return to the office starting September 8, but in the fall, the second wave of the pandemic hit us hard in Quebec. Our employees therefore returned to telework to follow public health recommendations. The nursing staff, however, remained in the OHC to provide essential services.

We have managed to minimize the number of Covid-19 cases in Odanak. Indeed, until now, we have only had nine (9) Covid-19 cases and no new cases since mid-February. So as of March 31, 2021, there are no more active cases in Odanak. There may be a luck factor, but we have been successful in implementing the measures prescribed by public health. We have tried to follow the Legault government's directives to the letter and it has paid off. Although we all suffered the isolation brought on by these strict measures during the lockdown, we nevertheless made it through. We will continue to strictly adhere to the public health recommendations and guidelines until this ugly soap opera episode is over in order to minimize the health impacts on all our community members and residents.

We held a Covid-19 vaccination clinic over the past few days. The clinic was held at the Kiuna Institution. Our OHC nurses were able to administer the first dose of Moderna vaccine to approximately 320 people in the community. The second dose is scheduled to be administered in mid-July.

Work on the 25-lot residential development project to extend Pakesso Street to Waban-Aki Street on the former CN property began in January and February 2020 and resumed in June. The remaining work consisted of connecting the Pakesso Street storm sewer line





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to the Sibosis Street line at its intersection with Waban-Aki Street, near the community centre. This required us to excavate Waban-Aki Street from street address 5 to the community centre. We were in the thick of it for part of the summer of 2020! The work was completed at the end of August. Just a reminder that this project is an investment of nearly \$1.5 million. A shared lane bike path was built on Pakesso Street, giving us about 1.25 km of bike and/or pedestrian path between Waban-Aki Street and the end of the bike path near Kiuna.

In mid-August, we received confirmation from the Secrétariat aux affaires autochtones (SAA) that the application for funding from the infrastructure fund had been accepted. In October 2020, the Construction Mathieu Laramée team proceeded with the expansion of the former administrative office at 102 Sibosis Street where the Grand Conseil de la Nation Waban-Aki Nation (GCNWA) offices are now located. With the expansion of the GCNWA due to its many mandates, it has become imperative to proceed with this expansion. This represents a \$1.2 million project of which 50% of the costs will be covered by the funding we will receive from the SAA and the other 50% through a loan with the BMO. None of our membership funds or the Council's consolidated surplus will be affected by this project as the entire cost of this project will be covered by the GCNWA through the rent that will be collected from them.

After experiencing sewer backups on Asban Street, including at the police station, the GCNWA technical services inspected the sanitary sewer line to assess its condition. They found that the pipe was defective and non-compliant. We then applied for funding from Indigenous Services Canada (ISC) to

replace the sanitary sewer line on Asban Street. The cost for this work is estimated at close to half a million dollars. We are awaiting confirmation of our application's eligibility for funding from ISC before proceeding with the work. We are confident that our application for funding is eligible under the Indigenous Services Canada (ISC) community Infrastructure Funding programs. If all goes according to plan, following acceptance by ISC, the project is expected to proceed to the tendering stage in a few weeks, with work to begin around May.

We have set up a working committee composed of staff members from the Odanak Health Centre, the FNCFS, the Abenaki Police Force, Quebec Native Women and the Maison La Nacelle in Nicolet to prepare Odanak's application to eventually host a shelter for these Indigenous women and children who wish to flee violence. We also conducted a small survey last December to determine the opinion of the population of Odanak as to the acceptability of this project. The survey showed an 85% rate of acceptability and community members are in favour of us becoming a host community for one of these centres. Based on this favourable support, our application was submitted to CMHC. CMHC will provide new funding of \$44.8 million over 5 years for the construction of 12 shelters, 10 of which will be located in First Nations communities on reserve across the country and 2 in the territories (Nunavut, Yukon and Northwest Territories).

After several years of hard work by the GCNWA on specific claims, we are hopeful that the Seigneurie de Saint-François and the 38 lot files will be settled soon. Indeed, the hearings before the Specific Claims Tribunal



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began on September 9th. Since at that time we were in a red zone (due to the Covid-19 pandemic), the hearings could not be held as planned in person at the Musée des Abénakis. They were therefore held by videoconference and members wishing to attend could do so by obtaining the Zoom link via our website. As of March 31, the only remaining testimony was that of our expert witness Jacques Frenette, anthropologist. Once his testimony is given in the spring of 2021, it will be up to each of the parties to prepare their arguments and submit them to the judge. To be continued.

Regarding the class action lawsuit filed by victims of federal Indian day schools, elders from the community who attended the Académie Saint-Joseph prior to its closure in 1959 have already received the settlement amount. A reminder for those who wish to file a claim, you have until July 13, 2022 to do so. For more information about this class action, you can visit the following website address: <https://indiandayschools.com/en/>

On November 13, 2020, the Council suffered a great loss with the passing of Councillor Claire O'Bomsawin. Claire served as an elected official on the Council for over 15 years. She will be greatly missed by the Council and the community. She loved her community and was proud of her heritage. Claire gave 100% to her

duties in order to defend the rights and interests of the Abenakis and especially the most vulnerable, including the elders. Following her death, the Council decided not to proceed with a by-election to fill her now vacant position, even though there is one year left on the Council's mandate.

I hope you enjoy reading our 2020-2021 annual report. You will notice, once again, that we are in excellent financial condition. After the activity reports of our various departments, you will find our condensed audited financial statements, which attest to this.

Wli nanawalmezikw,

Daniel Nolet,
Executive Director





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ODANAK ENVIRONMENT OFFICE



1. -STRIPED BASS PROJECT IN THE SOREL ISLANDS

Since 2019, we have been conducting a striped bass project in collaboration with the Wôlinak Environment and Land Office, the Grand Conseil de la Nation Waban-Aki and the Ministère des Forêts de la Faune et des Parcs. There are several distinct populations of this species and one of these lives year-round in the St. Lawrence River between Montreal and Kamouraska.



SAMUEL DUFOUR

Biologist, Director

In the past, the St. Lawrence River was home to a very abundant population of striped bass. This species was subject to heavy recreational and commercial fisheries, so much so that the population was considered extinct in the 1960s. The first turning point in the situation was protecting the species and its habitats. By giving striped bass a legal status of “threatened OR endangered”, all potential exploitation and destruction of its habitat was prohibited, in addition to promoting research to restore populations. A few years ago, wildlife managers initiated a process to reintroduce striped bass in the St. Lawrence. Since this fish had disappeared nearly 40 years ago, a source population had to be found in order to look for new individuals. The closest population was located in the Miramichi River in New Brunswick. Between 2002 and 2018, young individuals were captured in this river and transported to rearing ponds. The fish grew, spawned, and their offspring were released into the river each spring.

Today, after several years of effort, the situation seems to be gradually improving. Areas are being used again, new spawning grounds are being discovered, and young individuals are being caught (which is a sign of good reproduction). The numerous research projects, including our own, have greatly contributed to increase the knowledge on this species and its evolution.

Specifically, our project aims to identify the different critical habitats of this population at different times of the year, particularly in the Sorel Islands archipelago sector. We are monitoring the presence of spawners, eggs and

larvae while following the movement of individuals throughout the year using telemetric tools.

For the time being, the legal status of the species remains “endangered”. Since the pressures on its environment are still very present and the dynamics of animal populations is an extremely complex subject that evolves over long periods of time, it is essential to continue the research that will help the definitive recovery of this species and subsequently, to establish healthy and sustainable management methods. One thing is certain: we are on the right track!

2. EROSION-ARCHAEOLOGY PROJECT

The BETO participated, in partnership with the Ndakina Office and the Wôlinak Environment and Land Office, in a research project to evaluate the risks of erosion on the banks of Alsig8tegw (Saint-François River) and W8linaktegw (Bécancour River). This two-year project will help identify measures to be implemented so that the communities can adapt to this new reality, which will become more prevalent with climate change.

This first year of the project included extensive geological and geomorphological documentation of the Alsig8tegw and the W8linaktegw, as well as an archaeological and cultural potential study. The canoe and foot survey took place between July and October 2020. The results provided an erosion vulnerability index, hypotheses about erosion mechanisms, and erosion monitoring reports for 103 areas of archaeological potential (43 on the Alsig8tegw and 60 on the W8linaktegw).

This leads us to conclude that the summer 2021 fieldwork will be just as successful. The archaeological and geomorphological data obtained demonstrate the importance of the water system for the W8banakiak.

3. SIPS PROJECT (BANK SWALLOW)

In partnership with the Wôlinak Land and Environment Office, the BETO will conduct bank swallow inventories along the



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Alsig8tegw (Saint-François River) and the W8linaktegw (Bécancour River) starting in the spring of 2021. However, the planning work (i.e. survey, drafting of scientific protocols, literature review, landowner outreach, drafting of a “landowner's guide”) was completed in 2020-2021.

The Bank Swallow is a small insectivorous bird that gathers in large colonies when breeding. These colonies are located along vertical walls made of sand (cliffs, eroded river banks, quarries and sandpits, earth mounds, etc.), where the pairs dig a small tunnel to build their nest.

Although the species is still common in Canada, its population in this country has declined by 98% in 40 years and this decline continues. The reason for this decline is that the Bank Swallow uses vertical slopes for nesting and these are often areas of erosion or sand piles. Shoreline stabilization, damming, or sand mining operations can destroy nesting sites. The use of pesticides and insecticides also impacts insect populations, reducing the availability and quality of the bird's primary food source.

Specifically, our work will help locate and document new colonies in the wild. As most of the Alsig8tegw and the W8linaktegw shoreline is privately owned, we will be able to directly raise awareness of the importance of maintaining quality nesting habitat with landowners who harbour a colony (or who are likely to harbour one).

4. MATGUAS PROJECT (HARE): SMALL GAME HABITAT DEVELOPMENT

Since 2019, the BETO has adopted a wildlife-forest management plan (plan d'aménagement forêt-faune (PAFF)) to improve the quality of habitat for game, particularly snowshoe hare and ruffed grouse. This plan consists mainly of rejuvenating specific forest stands in order to promote softwood regeneration. In this way, young fir, spruce or pine stands will be able to provide winter protection habitat for hare and grouse, which is currently lacking on a regional scale. Silvicultural strategies vary depending

on the nature of the stand, but in general, the goal is to cut hardwood species so that young softwood shoots have sufficient light and space to grow quickly, while protecting seed trees (e.g. large healthy fir). This type of management also improves the habitat of several other species such as white-tailed deer, small mammals, forest birds, etc. Indeed, our PAFF also aims at protecting dead wood and fruit trees as well as creating forest gaps, drumming sites, vegetation openings and transition zones (ecotones). All these elements promote the integration of biodiversity in the broadest sense.

In conjunction with our PAFF, we also monitor the white-tailed deer population at the community level. We compile and analyze harvest statistics (hunting success, pressure, slaughter) and conduct aerial surveys every 3 years. These inventories allow us to better document the distribution of individuals on the territory, their density in sensitive areas (e.g. de la Commune yarding area) and to understand the reactivity of the herd according to previous winters. Moreover, as of winter 2022, we will install a NIVA station on the territory of Odanak. This type of station, used throughout Quebec by the Ministère des Forêts, de la Faune et des Parcs, allows us to monitor the severity of the winter (amount of snow received, depth of snow cover, duration of snow cover) and then to correlate this information with changes in white-tailed deer population. Our most recent survey has shown that the de la Commune yarding area in Odanak is one of the largest deer yarding areas in the region in terms of density (number of deer per km²). It will therefore be essential in the coming years to document the pressure that such a density can bring to the habitat. Grazing surveys will therefore be conducted in the short term to better estimate the amount of food available in the yarding area. A lack of food caused by excessive numbers of deer can have significant consequences if it occurs at the same time as a severe winter.

This highlights the importance of sound wildlife management to ensure the sustainability of the resource and a sustainable harvest over the long term!





5. FISH MONITORING AT THE DRUMMONDVILLE HYDROELECTRIC COMPLEX

Over the past three years, the BETO has been mandated by Hydro-Québec to detect and quantify the presence of fish in the spillway of the Drummondville hydroelectric dam during the summer period.

The flow of the Saint-François River is divided into two parts at this location: the power station which turbines a portion to produce energy, and the spillway that evacuates the excess water. When water levels are low, the topography of the river bed produces several small pits which become isolated from one another and fish may be trapped inside. Hydro-Québec therefore voluntarily leaves a continuous flow in the spillway during the spawning period so fish may move freely.

In summer, after the spawning period, Hydro-Québec managers adjust the flow pattern of the Saint-François River to turbine more water, resulting in virtually zero flow rate in the spillway. We therefore conducted several surveys in the most problematic pits, using a drone, in order to prevent fish from remaining captive and dying in these pits.

The excellent collaboration with Hydro-Québec's personnel thus makes it possible to modulate water flows in order to favour a good transition to a spillway with no outflow. Thus, during the transition, the operators adjust the turbine capacity of the plant if necessary to create a succession of water withdrawal in the spillway (many small "water spurts") thereby leading to a progressive withdrawal of the fish present in the pits.

With real-time observations, it is possible to confirm that no fish are caught, and if so, we can take the necessary steps to free them.

6. COPPER REDHORSE PROJECT

The copper redhorse is a fish species endemic to south-western Quebec (i.e. only location on the planet). Only part of the St. Lawrence River and its tributaries, including the Saint-François River, are home to this species. In order to

learn more about the spring distribution of this species, the Ministère des Forêts, de la Faune et des Parcs is currently using a rapidly growing scientific method: environmental DNA. In short, all animals leave fragments of their DNA in their living environment at one time or another (e.g. reproductive cells, feces, carcasses). By collecting water at specific locations and times, it is then possible to analyze these samples in the laboratory to determine whether or not the DNA of a given species is present in the sample. The BETO is proud to participate in the field component of this project, which is conducted right in front of the community.

7. TRAILS PROJECT

Since 2019, the BETO has upgraded the Odanak trails. More specifically, we built an entrance and a staircase directly in the back yard of the Musée des Abénakis in order to access the river's edge and the start of the current Tolba Trail. In addition, we extended the end of the Tolba Trail to reach the Koak Trail. Walkers (as well as visitors to the Museum) can therefore make a loop by combining the Tolba and Koak trails, and then return via Waban Aki Street. We have also improved the trail by adding two small wooden footbridges, an observation tower overlooking Marsh #2, numerous interpretive panels and benches.

Most of the work was completed in 2020, but several small improvements remain to be completed over the next few months (grading, signage, upgrading, etc.).

8. WASTE MANAGEMENT PROJECTS

a. Ecocentre

The 2020 season was the first full season of operation for the Ecocentre following its refurbishment, as well as the opening of the new reception building. The Ecocentre was open from the beginning of May through the end of November, with weather conditions permitting the Ecocentre to be open until the scheduled closing date. The Covid-19 situation did not overly affect the Ecocentre operations



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ODANAK ENVIRONMENT OFFICE



since very few people are there at the same time. Other than delays in pick-ups, the Ecocentre was open normally.

Traffic in 2020 was three times greater than in 2019, for a total of 1,628 visits. This represents a total of 288 tonnes of materials that were source-separated (wood, construction waste, shingles, metal, hazardous household waste, electronics), more than 180 mattresses and sofas, and 35 refrigeration appliances. Tires and batteries were not calculated, but a large number transited through the Ecocentre.

Green waste is not calculated, but we received more than the previous year and the situation required industrial shredding, as it was too compacted and the quantity too large to shred as it was received. Granular materials were stored on site: approximately 400 tonnes of concrete and asphalt and a large pile of sand that is easily reused.

Several additions were made in 2020: a surveillance camera system, widening of the entrance, levelling of the access road, preparation of user guides (for employees), new partnerships with different recycling companies, specialized training for the staff, collection of dead leaves and Christmas trees for Odanak members, planting of shrubs.

Several additions were planned for 2020 in order to be operational by the opening of 2021: installation of additional fences around the site, creation of a visual pamphlet (for users), sorting of metal to maximize profits when reselling to the recycling company.

b. Outreach

Awareness columns were prepared and posted on our Facebook page: single-use plastic, zero waste (bathroom, kitchen, on the go), green Christmas, green Halloween, rainwater collection, tabletop organics, used batteries, grass clippings, the 4R's (reduce, reuse, recycle, recover).

Several presentations and appearances at cultural events were planned, but many had to be cancelled due to the health situation. Virtual presentations were nevertheless given

in order to introduce the community to “zero waste” and to raffle kits to participants. In order to compensate for the activities that were not carried out, we increased our recycling efforts with different institutions in Odanak: collection of used batteries and used glasses at the post office, as well as collection boxes for office material, personal protective equipment and disposable masks in the different departments of the Abenakis of Odanak Council.

9. CORMORANT PROJECT

The BETO collaborated this summer with the Ministère des Forêts, de la Faune et des Parcs (MFFP) on a project concerning the double-crested cormorant in Lake Saint-Pierre. This exclusively fish-eating migratory bird, which is native to North America, has seen a significant increase in its populations over the past few decades after having been close to extinction in some areas in the early 1900s.

Double-crested cormorants arrive in the area in the spring and remain for the first part of the summer. Some individuals nest in trees or rock structures near water. In the second half of summer (mid-August), double-crested cormorants from north-eastern North America begin their winter birds migration south (southern U.S. and Central America) where they will spend the winter. During this pre-migration period, many individuals congregate and converge on the same travel corridors. The St. Lawrence River, for example, especially Lake St. Pierre, becomes a kind of highway where many birds individuals from the Great Lakes and the lower St. Lawrence River pass through. These individuals then take advantage of certain structures along the waterway to rest while benefiting from the important feeding potential of Lake Saint-Pierre. They therefore gain strength for a few weeks before heading south again, just like a rest stop!

In a context where the North American population is still growing and where certain fish populations are in a precarious situation (e.g. yellow perch in Lake Saint-Pierre), the MFFP and other organizations in the region are interested in better understanding their





potential impact on the environment. Over the past ten years, several actions have been undertaken in Lake Saint-Pierre, including studies on cormorant foraging, nest inventories and controls, counts of feeding individuals, counts of individuals resting on artificial structures, etc.

Several techniques have been used, some of them innovative, to address these questions: drone, seaplane, boat.

The BETO will continue to be actively involved in these projects to help sustain the fish populations of Lake St. Pierre.

10. OTHER SMALL PROJECTS

a. Community gardens

Once again this year, the BETO maintained the community garden and its greenhouse, as well as the medicinal plant garden located near the health centre, in order to ensure quality infrastructures for community members.

b. Communication activities

As every year, we participated in many communication activities. We presented our work at many meetings or scientific conferences.

c. Monitoring night owls

We conducted a nocturnal bird inventory on a spring night to participate in the federal government's National Bird Population Monitoring Program.

11. OTHER TASKS

- a. Consultations: watersheds, Table faune, and many others
- b. Support and advice to organizations: GCNWA, BETW, MFFP, and others
- c. Maintenance: Trails, developments, woodlands, parks, and others

- d. Maintenance and supervision of the rink
- e. Snow removal
- f. Staff and budget management
- g. Applications for funding
- h. Involvement in many of the Nation's committees

12. 2020-2021 PERSONNEL

- a. Samuel Dufour-Pelletier (Director)
- b. Luc G. Nolett (Field Team Supervisor)
- c. Michel Durand (Land Manager)
- d. Christopher Coughlin (Field Assistant)
- e. Evelyne Benedict (Field Assistant)
- f. Steeve Williams (Ecocentre attendant)
- g. Émile Gariépy (Environment project manager)
- h. Joannie Beaupré (Environment project manager)
- i. Stéphanie Harnois (Environment project manager)



Samuel Dufour-Pelletier

Director of Environnement
and Land Office



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ODANAK ENVIRONMENT OFFICE



For the year 2020-21 ending March 31, 2021, some lot transfers were made as well as outstanding estate documents. Several corrections were also made to existing records. In addition, the department mandated telework for all employees, which made communications more challenging.

During the year, the government changed certain procedures, including those for estates and for additions of lands to reserve.

Reminder:

The Abenaki of Odanak Council acquired a portion of Île Ronde, namely lot 879 the Maison Hosannah. In February 2017, by council resolution, the additions of lands to reserve process began. For the three lots owned by the Charles and Sylvie Préfontaine Farm on Île Ronde, the Band Council purchased them in May 2018. The additions of lands to reserve process is underway, but the progress of the file is stagnant and communications with the government have not resulted in any real progress on the dossier.

A meeting was held with the municipality of Saint-François-du-Lac to follow up on this matter. The municipality refuses to sign the document to release the land on Île Ronde. The file is proceeding and the government has assured me that this does not hinder the file.

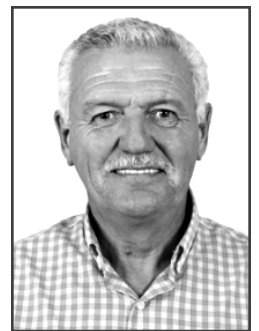
Talks are also in progress to have an easement or right of way to access the Domaine de Pierreville. A meeting was held with Mr. Maurice Lamontagne on this subject. He agrees to give up a part of his land for the access to the Domaine de Pierreville. The law firm of Sylvestre et associés of Saint-Hyacinthe has been hired to deal with the legal aspects of this file.

This firm is specialized in dealing with the Commission de protection du territoire agricole du Québec (CPTAQ). Pierre Pépin Land Surveyors were also hired to produce a plan and a report on the location of the future right of way.

Surveys have been completed on Pakesso Street where 31 lots are available for residential construction.

Do not hesitate to contact your land manager if you have any questions regarding your file. The location of markers is very important before any excavation work on your lot.

Thank you for your cooperation.



MICHEL DURAND
LAND MANAGER

Michel Durand

Land Manager

Odanak Environment and Land Office





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INCOME SECURITY PROGRAM



ACTIVITIES – INCOME SECURITY (2020-2021)

- Annual meeting of the communities adhering to the policy framework (Teams);
- Meetings (2) for the First Nations regional action plan on the reform of the Income Assistance Program (Teams);
- Joint meeting of the communities adhering to the policy framework and the FNHRDCQ (FNLC, single window, strategic plan) (Teams);
- Monthly meeting on pandemic-related income security program flexibilities (Teams);
- Information meetings (2) on Service Canada programs (Old Age Security, Guaranteed Income Supplement (GIS), Allowance and Allowance for survivor benefits, My Account and some new features (online application form and the Support Centre)) (Teams);
- Information sessions (1 in French and 1 in English) given by Service Canada to the public on the following topics: Old Age Security, Guaranteed Income Supplement (GIS), Allowance and Allowance for survivor benefits, My Account and some new features (online application form and the Support Centre);
- Virtual participation in the local action plan collaborative for Income Assistance Program reform (4 more meetings to come);
- Videoconferences (3) on the Canadian Emergency Response Benefit (CERB);
- Videoconferences (2) on special measures funding by Indigenous Services Canada;
- Online harassment training (Certificate of participation);
- Apply the administrative procedures included in the Income Security Framework Policy and follow-up on updates and apply them when required;
- Provide professional services to program beneficiaries in consideration of their individual needs;
- Conduct annual reassessments in order to update claimants' files;
- Develop healthy relationships with regional and provincial organizations related to income security, transfer to the province and employment;



ANN LANDRY
SOCIAL ECONOMIC
AND
POST-SECONDARY
(CEGEP) AGENT



ACTIVITY REPORT 2020 - 2021

INCOME SECURITY PROGRAM



Budget item, social assistance

In 2020-2021, the income security sector provided monthly financial assistance to 17 families and their dependents.

The income security sector paid out nearly \$192,116.00 to income security program beneficiaries. Based on statistics, herewith are the results for the past year:

Social assistance benefits expenditures	2020-2021
Basic allowance	\$140,532.00
Limited capacity allowance ¹	\$36,166.00
Special allowance ²	\$858.00
Exceptional measures (COVID-19 special allowance)	\$14,560.00
Total 2020-2021 ³	\$192,116.00

Further information on budget items

Note 1: Limited capacity allowances are provided to people with physical or mental incapacity or due to pregnancy, age (58 and over) and for children under the age of 5.

Note 2: Special allowances are provided to people with special needs in the following situations: illness, pregnancy, death of a family member, etc.

Note 3: Covid-19 exceptional measure s additional funding received by the department to assist recipients with the rising cost of food baskets and electricity.





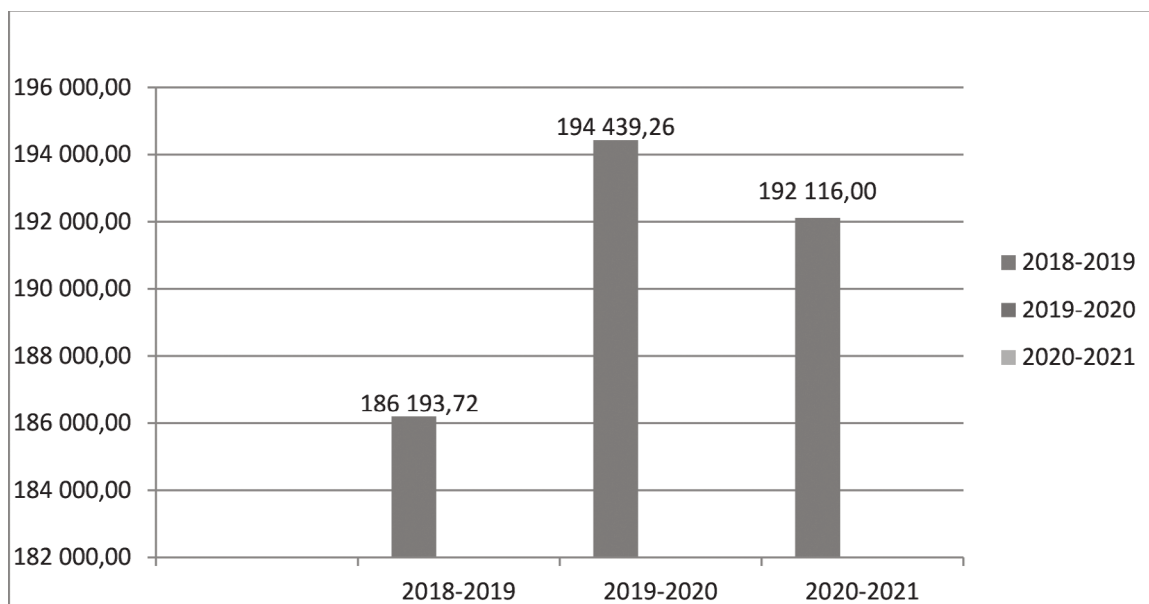
ACTIVITY REPORT 2020 - 2021

INCOME SECURITY PROGRAM



Statistics over the last (3) years

2018-2019, 2019-2020, 2020-2021



Breakdown of the number of people assisted in 2020-2021.

2020-2021 data					
	age	Head of household	dependents	total	
April	50	17	2	19	
May	50	17	2	19	
June	50	17	2	19	
July	50	17	2	19	
August	50	17	2	19	
September	51	16	2	18	
October	51	16	2	18	
November	51	13	2	15	
December	51	13	2	15	
January	51	13	2	15	
February	51	13	2	15	
March	53	12	2	14	
Average	51	15	2	17	

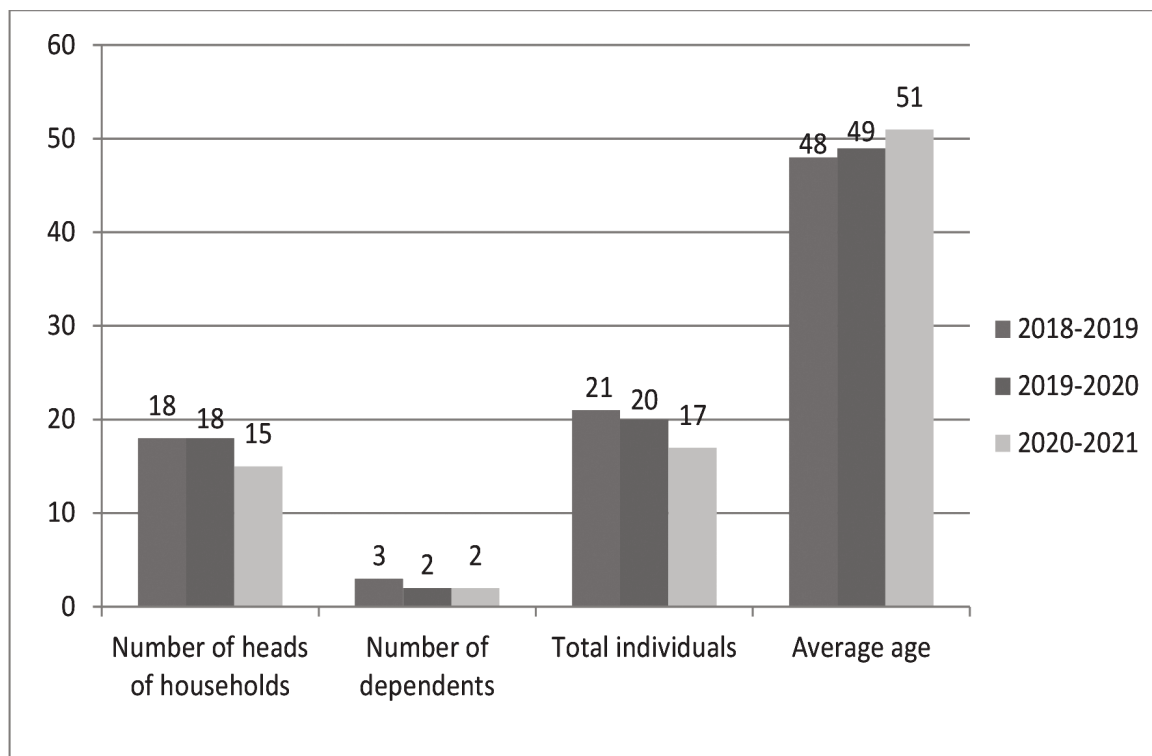


ACTIVITY REPORT 2020 - 2021

INCOME SECURITY PROGRAM



Statistics, yearly average 2018-2019, 2019-2020, 2020-2021



Employment and training, statistics over the last (3) years

Year	2018-2019	2019-2020	2020-2021
Training (adult, vocational (DEP), college)	1	0	0
Labour market	1	1	3
Employment assistance measures	1	1	0
Social reintegration	0	0	0
Employed following the project	0	0	0
Total number of participants	3	2	3

Ann Landry

Socio-economic assistance agent





ACTIVITY REPORT 2020 - 2021

EDUCATION

Education Sector Mission

- Promote, within the limits of available budgets and established guidelines, the increase in the level of education of members of the Odanak Band.
- Ensure that students from the Odanak Band receive the educational services to which they are entitled, while adopting measures that will promote educational success and prevent school dropout.
- Promote funding for studies by students who pursue education in a continuous manner.



NATHALIE CARDIN

EDUCATION
AGENT AND
ADMINISTRATOR
FOR INDIAN
REGISTRY

EDUCATION

A) ELEMENTARY LEVEL ON RESERVE

Number of status students: 22

Number of students who are citizenship code members: 3

Number of students who required individual homework assistance: 10

B) SECONDARY LEVEL ON RESERVE

Number of status students: 20

Number of students who are citizenship code members: 3

Number of students attending a public school: 13

Number of students attending a private school: 10

C) FINANCIAL ASSISTANCE TO FAMILIES:

Amount paid to **123** on-reserve and off-reserve **families** at the beginning of the school year:
\$ 80,515

D) COLLEGE LEVEL

2020 Summer Semester

Number of students: 0

On reserve students:

Off reserve students:

Graduates:

Drop-outs/failures:

2020 Fall Semester

Number of students: 42

On reserve students: 12

Off reserve students: 30

Graduates: 0

Drop-outs/failures: 4

2021 Winter Semester

Number of students: 38

On reserve students: 10

Off reserve students: 28

Graduates: 5

Drop-outs/failures: 4



**College graduates' programs of study:**

AEC Real estate brokerage
 AEC Special education
 DEC DEC Arts, Letters and Communication
 DEC Dance
 DEC Civil engineering technology

E) UNIVERSITY LEVEL

2020 Summer Semester	2020 Fall Semester	2021 Winter Semester
Number of students: 19	Number of students: 63	Number of students: 58
On reserve students: 4	On reserve students: 11	On reserve students: 6
Off reserve students: 15	Off reserve students: 52	Off reserve students: 52
Graduates: 3	Graduates: 2	Graduates: 8
Drop-outs/failures: 0	Drop-outs/failures: 4	Drop-outs/failures: 1

University graduates' programs of study:

Certificate in addictions counselling
 Certificate in human resources management
 Certificate in urban and property management
 Bachelor's degree in psychology
 Bachelor's degree in business administration
 Bachelor degree in English literature
 Bachelor's degree in civil engineering
 Bachelor's degree through cumulative programs (certificates in administration, marketing, international business)
 Bachelor's degree through cumulative programs (major in political science, minor in arts and science, certificate in international cooperation)
 Bachelor's degree in biological and ecological sciences
 DESS common law
 Master's degree in physiotherapy
 Master's degree in occupational therapy
 Master's degree in project management

F EXPENSES FOR BOTH LEVELS:

Tuition:	\$414,202.19
Books:	\$101,858.68
Subsistence allowance fees:	\$683,075.94
Total:	\$1,199,136.80





ACTIVITIES - EDUCATION

- Verify and follow-up on on and off reserve students' files at the elementary and secondary levels as well as from the post-secondary level at the university level. At the university level, 140 applications were received and verified for all three semesters (approximately 900 documents). At the college level, 80 applications were received and verified for all three semesters (approximately 425 documents). The goal is to verify that all criteria are respected under the education policies in effect;
- Manual update for sending elementary and secondary level checks at the beginning of the school year (preparation of letters, addition of new children and removal of graduates, change of address, change of grade, date of receipt of proof of attendance and preparation for sending checks and letters). In total, 158 families were eligible for financial assistance, but only 123 responded and received assistance;
- Manual update of on-reserve elementary and secondary school records;
- Several exchanges between parents, students and institutions;
- Receipt of various correspondences related to education (ISC, organizations, institutions offering special programs, etc.);
- Preparation of submissions and reports for the various FNEC programs;
- Signature of agreements with the FNEC;
- Approval of various FNEC program expenditures;
- Attending FNEC meetings;
- Member of various committees (community activities day);
- Update all documents used for education and ensure they are also available on the Internet;
- Application, receipt and payment of invoices to elementary, secondary, university and college institutions (an average of 23 universities are contacted per semester). At the college level, on average 5 colleges are contacted per semester by the person in charge of this level;
- Work in collaboration with the FNCFS, the Environment and Land Office, the Musée des Abénakis, the Odanak Health Centre as well as with members of the community for the organization and follow-up of activities in order to respect the budgets;
- Production of various documents for school transportation (forms and tickets for parents) and a list with the names of children and street for the bus driver's route;
- Nominal and Post-Secondary list report for ISC;
- Adding on the Band Council website educational activities or programs deemed interesting for youth;
- Support for the college level supervisor.





ACTIVITIES IN COLLABORATION WITH OTHER SECTORS AND/OR DEPARTMENTS:

Abenaki language courses;

Individual homework assistance;

Purchase of materials for community activity days (vigil and winter solstice);

Purchase of materials for youth for school break activities;

Purchase of a drone for youth science activities;

Purchase of a monarch kit for youth activities;

One (1) summer job at the Musée des Abénakis.

Nathalie Cardin

Education Agent and
Administrator for Indian Registry





ACTIVITY REPORT 2020 - 2021

REGISTRAR

ABENAKIS OF ODANAK LIST OF BAND MEMBERS AS OF MARCH 31, 2021

Odanak

Status members: 312

Citizenship code members: 10

Status members – other Nations: 8

Non-Indigenous: 129

Total population: 459

Off reserve

Status members: 2,276

Citizenship code members: 145

Total: 2,421

Total status members: 2,588

Total citizenship code members: 155

Grand total: 2,743

ACTIVITIES

- Production of the monthly report of events reported for ISC (births, additions to the band list, deaths, changes of address, marriage, cards issued, etc.);
- Updates to band list and residents list;
- Receiving applications for citizenship code and sending letters of approval;
- Assistance provided to complete ISC application forms and send forms to applicants;
- Answering various questions from registered members and those who wish to apply;
- Family research to inform people about their eligibility.

Nathalie Cardin
Registrar



The programs of the ETSC (employment and training service centre) are support and guidance measures, training and professional development measures, and employability measures. The following is a brief description of the measures:

SUPPORT AND GUIDANCE MEASURES (“A” MEASURES)

- Information about the job market, provide job notice boards, etc.
- To offer professional resources that can help the clients develop professional integration strategies

TRAINING AND PROFESSIONAL DEVELOPMENT MEASURES (“B” MEASURES)

- Enables individual clients to acquire the professional competencies required for a specific job
- Enables a client to finish their high school education in order to obtain a better job or allows a client to enter the job market

EMPLOYABILITY MEASURES (“C” MEASURES)

- Job creation initiatives provide employers with incentives to help clients re-enter the workforce and acquire work experience.
- Self-employment assistance provides members who want to start their own business with financial support during the first years of business operation



ELEANOR HOFF
ETSC AGENT

THESE MEASURES ARE CONDITIONAL TO ODANAKS' ETSC POLICY AND AVAILABLE FUNDS.

The target clientele are natives living in Quebec on and off reserve, not receiving education allowances and not on an employment measure with social assistance. The main role of the ETSC is to offer training and job development services that promote short or medium-term integration into Quebec's on- and off-reserve job market; to enable individual clients to acquire the professional competencies required for a specific job. The program also allows clients to upgrade their skills in order to obtain a job or to refocus their career, complete their high school studies in order to undertake post-secondary training or re-enter the labour force.

Over the past year, we have provided financial assistance to clients to access adult education, vocational training, and we have provided employers with incentives to help clients re-enter the workforce to gain sufficient work experience to access higher paying jobs. (Below is a table outlining these measures).





ACTIVITY REPORT 2020 - 2021

ETSC

Measure	Assisted	On-going	Finished	Abandoned	Summer Students (2019)
Information/Resources	0	0	0		
Vocational training	7	4	3	0	
Adult education	1	0	0	1	
Students (summer 2020)	8	0	8	0	8
Self-employment measures	1	1	0		
Job creation	18	10	8		

(Financial assistance awarded to 35 members)

PARTICIPANTS VOCATIONAL TRAINING

1. Chefs assistant (1)
2. Ordre des évaluateurs agréés du Québec (1)
3. Training (refresher) police (1)
4. Massage therapy practitioner (1)

Here is what has been done over the past year:

- Attended FNHRDCQ meetings via TEAMS and ZOOM
- Assisted members with renewal for unemployment insurance
- Prepared payments and monthly allowances according to our policy
- Follow-ups for students in vocational and high-school levels
- Attended several meetings via ZOOM with Service Canada and Service Québec (for details on how their programs could help our members)
- Had several meetings via ZOOM with Service Canada for unemployment insurance

During the past year we have been through trying times with the CORONA-VIRUS.

Our way of working has changed ... we are working from our homes; all services given by the band office were maintained in a different way but yet maintained.

Upon returning to our offices, our way of working will have changed also.

During the past year I have assisted members with unemployment insurance and I assisted some members that had problems with their unemployment insurance

Eleanor Hoff
ETSC Agent



ACTIVITY REPORT 2020 - 2021

ABENAKI POLICE FORCE (CPDA)



It is with a great sense of accomplishment that I present to you the annual activity report of the Abenaki Police Force. The data for 2020-2021 show us that the Abenaki people still have the privilege of living in two communities recognized for their safety, which, year after year, is a true source of pride and motivation for all the police force employees.

Over the years, the Abenaki Police Force has become an organization whose excellence is recognized in the police community. Our organization has established and maintained high quality relationships with its partners who share the same security objectives.

Finally, I would like to thank all our police force personnel; each is essential to the success of our mission to protect. Special thanks to our police officers who must deal with atypical schedules, unforeseen events, drama and many situations that force them to quickly rethink what was planned. I salute their strong ability to adapt, the quality of their interventions and their great dedication.

MISSION

The mission of the CPDA is to protect the lives and property of citizens, to maintain peace and public safety, to prevent and combat crime and to enforce the laws and regulations in effect.

In partnership with the institutions, economic and social organizations, community groups and citizens of Odanak and Wôlinak, the CPDA is committed to promoting the quality of life of Abenaki communities by reducing the crime rate, improving road safety, promoting a sense of security and developing a peaceful and safe environment, in respect of the rights and liberties guaranteed by the Canadian and Quebec Charters.

VISION

Our vision is to be a team at the service of its community, recognized for its professional interventions, its excellent practices and for the quality of its skills.

VALUES

The CPDA adheres to the values of the communities of Odanak and Wôlinak, i.e. responsibility, courage and respect. The following values also motivate us in the fulfilment of our mission and our vision:

- Service

Citizen safety is at the heart of our priorities. We are convinced that through the quality of our daily actions and our commitment, we are able to maintain our priority of providing them with a safe living environment.

- Ethics

Tout policier doit être exemplaire au chapitre du Every police officer must be exemplary in respect of the law. The officer must ensure application of the law while using judgment in the exercise of his discretionary powers. Integrity, respect and accountability characterize our conduct, and this is essential to maintaining public trust.

- Partnership

Our professional relationships with our partners are based on united objectives and interests and concerted initiatives.

- Commitment

Our personnel are motivated by a sense of belonging to the organization and the profession; they identify with the objectives of the service and share the resolve to devote themselves to the well-being of the community.

- Communication

Attuned to the needs of the population we serve, we communicate with our internal and external clients in a dynamic and proactive way.



ÉRIC CLOUTIER
CPDA DIRECTOR

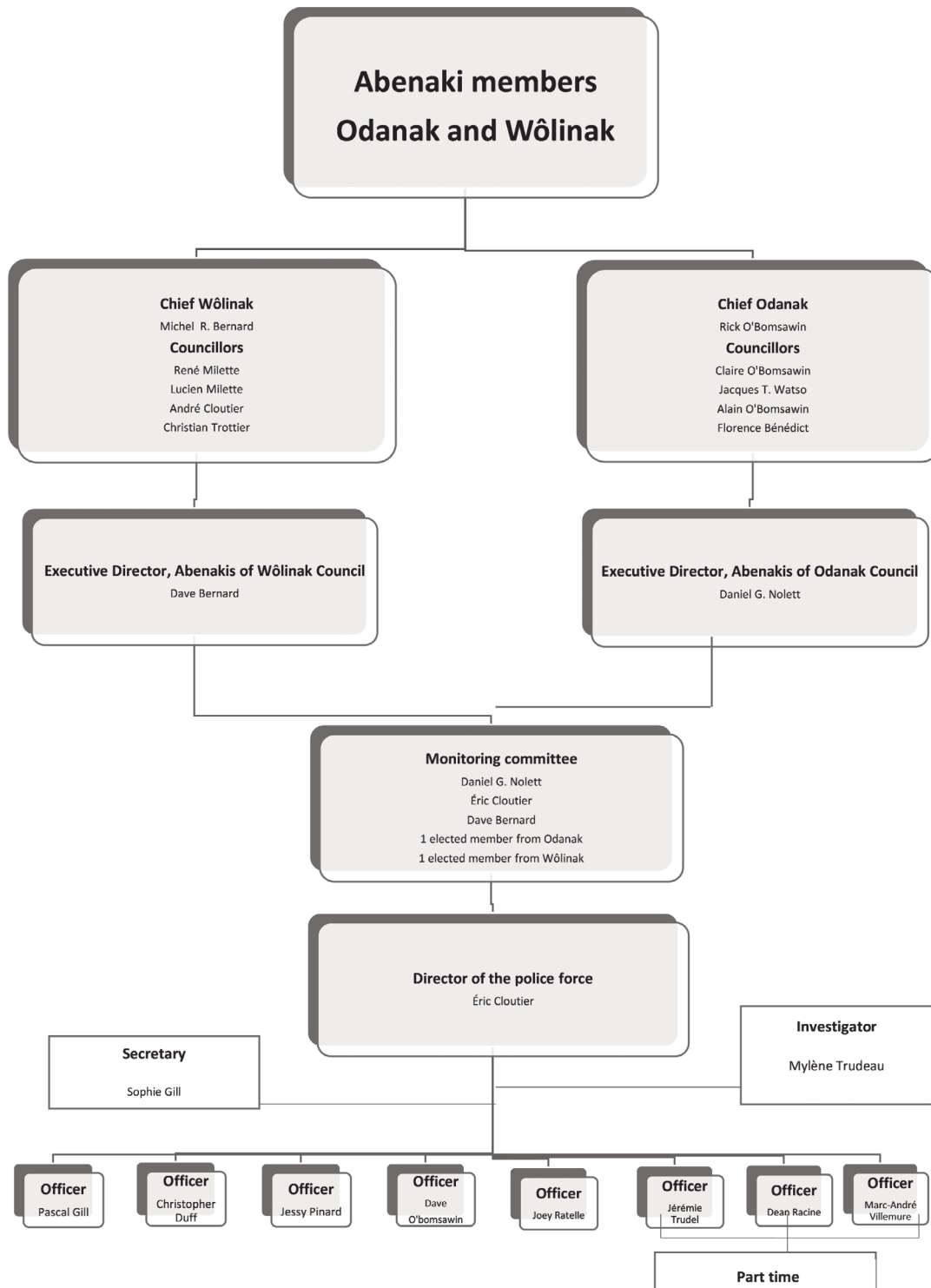




ACTIVITY REPORT 2020 - 2021

ABENAKI POLICE FORCE (CPDA)

ORGANIZATION CHART



ACTIVITY REPORT 2020 - 2021

ABENAKI POLICE FORCE (CPDA)



Road Safety

Improving quality of life, saving lives and promoting better sharing of the roads between motorists, pedestrians and cyclists. This sums up the focus of CPDA officers throughout the year.

With 312 traffic tickets issued this year, the CPDA showed its commitment towards road safety so that everyone feels safer on our roads.

Crime Statistics

In 2020-2021, in addition to the traffic tickets issued, the CPDA handled 299 cases concerning many different issues. Of these 299 cases, the CPDA handled 31 criminal offenses on our territory and 268 non-criminal cases. Here is a list of these offenses:

Criminal cases:

- 4 for common assault
- 4 for uttering threats
- 4 for misdeeds under \$5,000 on a vehicle
- 3 for hit-and-run
- 2 for social security fraud
- 2 for fraud
- 2 for theft of less than \$5,000
- 2 for misdeeds under \$5,000
- 1 for child pornography distribution
- 1 for possession of other drugs
- 1 for impaired driving
- 1 for extortion
- 1 for breaking and entering
- 1 for police chase
- 1 for growing cannabis
- 1 for criminal harassment

Non-criminal cases:

- 58 for public assistance
- 48 for other assistance, bailiff/ambulance/other police services
- 46 COVID-19 reports
- 25 for information received from the public
- 24 for order services
- 10 for noise complaints
- 9 for alarms
- 8 for material accidents
- 5 for animal related calls
- 5 for family disputes
- 5 for mental health disorders
- 4 for people in distress
- 3 for civil affairs
- 3 for executing a warrant
- 3 for confiscated goods
- 3 for stored/abandoned vehicles
- 2 for people questioned
- 2 for non-criminal fires
- 2 for goods found/lost
- 1 for death/suicide
- 1 for weapon destruction request
- 1 for vehicle impoundment





ACTIVITY REPORT 2020 - 2021

ABENAKI POLICE FORCE (CPDA)

Prevention

The most significant prevention focus for 2020-2021 is of course related to the pandemic. Whether by phone, social networks or in person, we kept the population informed of all the new and regularly changing guidelines. In addition, the police force carried out a prevention activity by videoconference related to social networks and child pornography for parents and children of both communities.

Conclusion

It is with passion and determination that the Abenaki Police Force is ready to face the various issues and challenges it will face in order to ensure the safety of the population throughout the coming year.

I am convinced that the commitment and professionalism of our personnel, the collaboration of our various partners and citizens, and the support of our elected officials will allow the Abenaki Police Force to fulfill its mission to maintain the security of the communities of Odanak and Wôlinak.

Éric Cloutier

CPDA Director



ACTIVITY REPORT 2020 - 2021

HOUSING



HOUSING

With the housing policy, status members of the Odanak community can benefit from existing programs to build, renovate and purchase a home. Housing funds are primarily provided by Indigenous Services Canada (ISC), the Native Commercial Credit Corporation (SOCCA), Caisses Desjardins, BMO, RBC and the Canada Mortgage and Housing Corporation (CMHC).

RRAP

Two (2) RRAP applications were granted in 2020-2021, for a total of \$47,242.95.

MINOR REPAIRS

Nine (9) requests for minor repairs were accepted, including two (2) roofs and seven (7) miscellaneous works, for a total of \$23,349.04 in grant money given to community members. Due to the pandemic, three repairs will be completed in 2021.

HOME CONSTRUCTION AND PURCHASE

Eight (8) ministerial guarantees were processed, including two (2) for the construction of new houses and six (6) for the acquisition of existing houses.



CLAUDE PANADIS
HOUSING AGENT

Claude Panadis
Housing Agent





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

The content of the 2020-2021 annual management report testifies to the vigour and competence of the Odanak Health Centre team. In spite of the many changes due to the Covid-19 pandemic that have marked and are marking the health network again, the human dimension in the care and services offered to the users remains a reality which is a credit to the employees of the Odanak Health Centre and the Abenakis of Odanak Council. We must not forget our dear collaborators, namely the FNQLHSSC, the FNCFS and the CIUSSS MCQ.

This year was marked by the definition of five organizational values: respect, collaboration, commitment, integrity and caring. The result of a major consultation process through the accreditation project, these values will guide our actions within our organization.



JEAN VOLLANT

DIRECTOR CSO

Word from the Director

BRAVO TO THE OHC TEAM

It has already been over a year that we have been navigating this pandemic. First of all, I would like to thank the health centre team for their dedication and resilience. Despite this pandemic, we have been able to adapt to this reality without neglecting our mission which aims to contribute to improving and maintaining the health and sense of well-being of the members of the community by promoting the empowerment of the individuals who make up the community.

Of course, during this time, many of us have been forced to work from home. With technology availability and advancements, we have been able to meet the needs of our clients.

People have also understood the importance of respecting the sanitary measures put forward by public health and I thank them very much. Because of you, dear members of the Abenaki community of Odanak, we have not had as many cases in Odanak.

Despite the many changes that have marked and are still marking the Odanak Health Centre, the human dimension in the care and services offered to users remains a reality. This is to the credit of the employees and partners of the CIUSSS de la Mauricie et du Centre-du-Québec, the First Nations of Quebec and Labrador Health and Social Services Commission, the Grand Conseil de la Nation Waban-Aki, the FNCFS and others.

Last year, a member of the Abenakis of Odanak Council passed away. We were deeply saddened by the death of Ms. Claire O'Bomsawin. To her family, we extend our deepest condolences - Ms. O'Bomsawin is already missed by the community of Odanak and we are very grateful for her dedication and the time she devoted to health care. We thank her family for sharing with us this remarkable woman.

In closing, Health Centre management has participated in several meetings via videoconference. From this, we have established partnerships with other organizations in the health sector.

Jean Volland

Director
Odanak Health Centre



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



2019-2024 STRATEGIC PLAN

HEALTH

The Abenakis of Odanak Council's Health Centre aims to contribute to the improvement and maintenance of the health and sense of well-being of the members of the community while promoting the empowerment of these individuals.

MISSION

The role of the Odanak Health Centre is to contribute to improving the health and well-being of members of the Odanak community through health programs that focus on prevention and health promotion, and by favouring a respectful holistic approach, beliefs and cultural values emanating from the Abenaki Nation.

VISION

Contribute to the empowerment of community members in the management of their health by providing health services focused on prevention and the promotion of healthy habits and contribute to the improvement of the collective well-being.

PHILOSOPHY OF CARE

The philosophy of care advocated by all health workers at the Odanak Health Centre is biopsychosocial in nature, i.e. an approach that takes into account the needs of the individual as a whole (physical, emotional, mental, spiritual and social) in respect of their Abenaki culture values and beliefs.

1st axis: Increase and maintain high quality care provided by the Odanak Health Centre.

2nd axis: Promote the practice of healthy habits and activities

3rd axis: Develop and implement a new nutrition program for elders in the community

4th axis: Provide mental health services

We also reiterate the importance of the contribution of our program managers, which is always enlightening and enables us to move forward, to continue the discussions and to take the necessary decisions so that the Odanak Health Centre can continue its momentum and evolve positively and constructively. We firmly believe that the Abenaki population will benefit, regardless of the territory of their place of residence, since access to services must be preserved, though certain parameters must necessarily continue to evolve in order to meet the standards of practice and the constantly evolving needs of Abenaki members.





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

Over the past three years, we have been laying the foundation for an organization full of promise. In this context, we will continue to meet current and future challenges, adapting to situations and pursuing our mission with determination, in the emergence of a new organizational culture that reflects our image, rigorous but deeply human.

The management report's findings and data for the Odanak Health Centre's 2020-2021 fiscal year:

- Accurately describe the institution's mission, mandates, responsibilities, activities, and strategic directions;
- Present the objectives, indicators, targets to be met and results;
- Present accurate and reliable data.

I hereby confirm that the data contained in this annual management report and the controls relating to this data are reliable and that they correspond to the situation as of March 31, 2021.

I would like to take this opportunity to thank all our employees and partners for their commitment to community members.

As you leaf through our annual report, you will note that the Odanak Health Centre has established many services and projects to meet the needs of its mandated clientele. The Odanak Health Centre is active in its community and continues to work with its partners to identify and respond to the needs of its clientele.

In closing, I would like to take advantage of this annual period to highlight the work of all those who, in one way or another, participate in the effective operation of the Odanak Health Centre.

Jean Vollant

OHC Director



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



OVERALL OBJECTIVES

1	Strengthen suicide prevention and non-violence among the population.
2	Promote the biopsychosocial development of all children and youth in the community
3	Provide appropriate health services in line with the specific needs of the Odanak population
4	Increase the well-being of Odanak's elders
5	Decrease the rate of substance abuse in the community
6	Reduce the food insecurity index in the Odanak population
7	Significantly increase the physical activity rate in the population of Odanak
8	Increase to a ratio of one in two people adopting the elements of healthy diet according to Canada's Food Guide
9	Provide more culturally appropriate interventions
10	Increase public awareness of the standards and criteria for a healthy home
11	Increase the number of OHC clients/users so that 50% of the population has a user record
12	Improve collaboration and internal/external communication in relation to the OHC's medical records department



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

I am pleased to provide you with a brief update on the progress of this file as it relates to the accreditation renewal process for the Odanak Health Centre. We have recently completed a two-step survey due to the health constraints related to Covid-19. The first session planned in virtual mode was held last April and the face-to-face session (site visit) was held at the end of May.

We are therefore nearing the end of this mandate. We expect to receive the survey report in the coming days. We will be pleased to inform you of the surveyors' main findings and the type of accreditation granted to our organization by Accreditation Canada.

For those unfamiliar with this process, I remind you that accreditation is in itself a process of evaluating quality and safety against recognized standards of excellence to identify what is being done well and what could be improved with respect to not only the management of the organization's resources, but also the delivery of health and wellness services to members of the community.

In light of the comments and recommendations made by the surveyors, we plan to develop a Continuous Quality Improvement Plan (CQIP) again in September and submit it to the appropriate authorities for approval.

In addition, during the fall period, we will be required to assess the impacts of the new approach proposed by Accreditation Canada as well as to become familiar with the new digital platform that will be used to monitor the accreditation evaluation process on an annual basis.

In closing, I would like to wish you a great summer, protect yourself with the vaccine that is offered to you and continue to respect the health measures in effect!

Michel Paul

Accreditation Coordinator



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



Videoconference of health and social services directors	Pandemic management committee meeting Weekly meeting Thursday	Shelter meeting
First Nations COVID-19 vaccination campaign FNQLHSSC First Nations vaccination webinar FNQLHSSC First Nations vaccination webinar Moderna vaccine against COVID-19 webinar (National Collaborating Centre for Infectious Diseases (NCCID) Odanak vaccination strategy meeting	Zoom community wellness study Weekly meeting	Quality and risk management committee
Community roundtable committee (CRC)	Pilot project - FNCFS custody	Creation of the 2021 food drive committee
CCR research committee meeting	Family hall committee	Espace Jeunesse meeting
Multi room committee Odanak/KISOS	Odanak CRC - spring 2021 + law tent March 17, 2021	Working meeting with the Human Resources and Finance departments
Home support services meeting	OHC single record committee	Quality and risk management committee
FNQLHSSC focus group on the HSIF Health Services Integration Fund	FNQLHSSC First Nations health system roundtable	FNQLHSSC regular board meeting
FNQLHSSC FNIHB 2021-2022 Management Operational Plan (MOP)	FNQLHSSC governance	FNQLHSSC Invitation to a webinar on mental wellness in the context of a pandemic Webinar on mental wellness in the context of a pandemic



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

FNQLHSSC/Odanak services trajectory/Social map of services	FNQLHSSC Regional meeting on services for persons in loss of autonomy	
Roundtable on adult mental health and addiction of the RLS of Bécancour-Nicolet-Yamaska (regional services network)	Indigenous health working group	Secure vault and expansion
Postvention suicide committee	Regional intersectoral table on healthy lifestyle habits (TIR SHV) of the Centre-du-Québec region <i>(Table intersectorielle régionale saines habitudes de vie (TIR SHV))</i>	2019-2024 Strategic plan follow-up 1 st axis: Increase and maintain high quality care provided by the Odanak Health Centre. 2 nd axis: Promote the practice of healthy habits and activities 3 rd axis: Develop and implement a new nutrition program for elders in the community 4 th axis: Provide mental health services
Board meeting of the Centre d'action bénévole du Lac St-Pierre	CENOD - Conference call preparation - HYBRID survey Accreditation Canada	Therapeutic and healing committee

FNCFS, FIXED CONTRIBUTION AGREEMENT, TRANSITIONAL

- Individual meetings with program managers

Budget follow-ups

Monthly activities follow-up

COMMUNITY SUPPORT

Indicate visits to the Odanak community, group meetings, videoconferences as support, etc.

- See section other activities.

REGIONAL FORUM OR SPECIFIC TRAINING

PARTICIPATION IN SEMINARS/CONFERENCES/TRAINING COURSES



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



Sector health liaison officier
by Andréanne Gouin and Paule Leiby
Medical archivists / Physician support / MT Program manager
Community health managers (CHM)

INTRODUCTION

This annual report outlines the activities of the medical records (366), medical transportation (340), health liaison officer/NIHB Program (330), physician support (320) and environmental health (347) programs for the period April 1, 2020 to March 31, 2021.

It should be noted that as of March 17, 2020, we began teleworking due to the Covid-19 pandemic.

OBJECTIVES

With reference to the 2016-2021 five-year plan, we must meet the following objectives:

OVERALL OBJECTIVE 3

Provide appropriate health services in line with the specific needs of the Odanak population

3k. Maintain a statistical record with the liaison officer to target key reasons for consultations / Increase in the number of people informed about Health Canada programs.

OVERALL OBJECTIVE 11

Increase the number of OHC clients/users so that 50% of the population has a user record.

- 11 a. Have a physician in the community to meet the needs of the population / That 50% of the population of Odanak visits the OHC by 2021.
- 11b. Increase the number of interventions presenting the OHC and its services, confidentiality and professionalism of its staff to the public.
- 11.1 Increase by 25% the number of medical transports for the community: advertising, meeting with Health Canada, etc.
- 11d. Increase advertising in the community to publicize the service and its components.
- 11E. Improve collaboration with Health Canada based on the reality of the Odanak community's transportation needs.





OVERALL OBJECTIVE 12

Improve collaboration and internal/external communication in relation to the OHC's medical records department

- 12A. Inform the population about the services offered and the arrival of the physician.
- 12b. Collect all the client records of each OHC health worker into a single record.
- 12c. Maintain patient records.
- 12d. Provide continuing education for OHC professionals in relation to the single record.
- 12e. Ongoing creation of procedures and policies related to the single record.

12.2 Raise public awareness and knowledge of the medical records department

- 12f. Publish articles, brochures and information on the website.

. LIAISON OFFICER / Non-Insured Health Benefits (NIHB)

Health Canada's Non-Insured Health Benefits (NIHB) program is available to First Nations people. This program covers a defined range of medically necessary products and services that clients do not qualify for in other plans and programs. In the event that a benefit is covered under another health plan, the NIHB program will coordinate the payment of eligible benefits. The Non-Insured Health Benefits (NIHB) program covers the following benefits:

- Vision care ;
- Dental benefits;
- Medical transportation;
- Drug benefits;
- Medical equipment and medical supplies;
- Mental health intervention services for short-term crisis;
- Health services approved outside Canada.

As health liaison officers, our mandate is to support health workers providing health care and social services to members of the Odanak community in their efforts to access health services.

In addition, our mandate is to inform and assist members of the Odanak community, residents or non-residents, to have access to the various health programs and services available through the NIHB program.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



1.1 STATISTICS REGISTRY

➤ APRIL 2020

	MEN	WOMEN	TOTAL
CALLS	21	56	77
IN PERSON	0	0	0
EMAIL	46	83	129
FAX	0	0	0
TOTAL	67	139	206

TYPE OF REQUESTS	
DENTAL CARE NIHB	1
VISION CARE NIHB	0
MT	55
DRUG EXCEPTIONS	26
MEDICAL SUPPLIES	6
MENTAL HEALTH NIHB	1
ENVIRONMENTAL HEALTH	2
JORDAN'S PRINCIPLE	0
GENERAL INFORMATION	4
ACCREDITATION CANADA	0
OTHER TYPES OF REQUESTS	45
MEDICAL ARCHIVES	53
PHYSICIAN	13
TOTAL REQUESTS	206

➤ MAY 2020

	MEN	WOMEN	TOTAL
CALLS	38	68	106
IN PERSON	0	0	0
EMAIL	40	221	261
FAX	0	0	0
TOTAL	78	289	367

TYPE OF REQUESTS	
DENTAL CARE NIHB	3
VISION CARE NIHB	0
MT	75
DRUG EXCEPTIONS	5
MEDICAL SUPPLIES	9
MENTAL HEALTH	1
ENVIRONMENTAL HEALTH	1
JORDAN'S PRINCIPLE	0
GENERAL INFORMATION NIHB	11
ACCREDITATION CANADA	2
OTHER TYPES OF REQUESTS	41
MEDICAL ARCHIVES	190
PHYSICIAN	29
TOTAL REQUESTS	367

➤ JUNE 2020

	MEN	WOMEN	TOTAL
CALLS	34	84	118
IN PERSON	0	0	0
EMAIL	18	224	242
FAX	0	0	0
TOTAL	52	308	360

TYPE OF REQUESTS	
DENTAL CARE NIHB	10
VISION CARE NIHB	3
MT	80
DRUG EXCEPTIONS	3
MEDICAL SUPPLIES	7
MENTAL HEALTH	0
ENVIRONMENTAL HEALTH	1
JORDAN'S PRINCIPLE	9
GENERAL INFORMATION NIHB	0
ACCREDITATION CANADA	30
OTHER TYPES OF REQUESTS	211
MEDICAL ARCHIVES	6
PHYSICIAN	10
TOTAL REQUESTS	360



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

➤ JULY 2020

	MEN	WOMEN	TOTAL
CALLS	43	74	117
IN PERSON	4	0	4
EMAIL	22	53	75
FAX	0	0	0
TOTAL	69	127	196

Type of requests	
DENTAL CARE NIHB	6
VISION CARE NIHB	4
MT	69
DRUG EXCEPTIONS	2
MEDICAL SUPPLIES	16
MENTAL HEALTH NIHB	2
ENVIRONMENTAL HEALTH	12
GENERAL INFORMATION	4
OTHER TYPES OF REQUESTS	19
MEDICAL ARCHIVES	56
PHYSICIAN	6
DENTAL CARE NIHB	6
TOTAL REQUESTS	196

➤ AUGUST 2020

	MEN	WOMEN	TOTAL
CALLS	32	76	108
IN PERSON	1	4	5
EMAIL	13	29	42
FAX	0	1	1
TOTAL	46	110	156

TYPE OF REQUESTS	
DENTAL CARE NIHB	9
VISION CARE NIHB	2
MT	43
DRUG EXCEPTIONS	3
MEDICAL SUPPLIES	18
MENTAL HEALTH NIHB	0
ENVIRONMENTAL HEALTH	1
GENERAL INFORMATION	5
ACCREDITATION CANADA	1
OTHER TYPES OF REQUESTS	25
MEDICAL ARCHIVES	36
PHYSICIAN	13
TOTAL REQUESTS	156

➤ SEPTEMBER 2020

	MEN	WOMEN	TOTAL
CALLS	71	91	162
IN PERSON	13	7	20
EMAIL	19	72	91
FAX	0	0	0
TOTAL	103	170	273

Type of requests	
DENTAL CARE NIHB	14
VISION CARE NIHB	9
MT	91
DRUG EXCEPTIONS	7
MEDICAL SUPPLIES	15
MENTAL HEALTH NIHB	4
ENVIRONMENTAL HEALTH	0
GENERAL INFORMATION	7
OTHER TYPES OF REQUESTS	44
MEDICAL ARCHIVES	61
PHYSICIAN	15
TOTAL REQUESTS	273



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



➤ OCTOBER 2020

	MEN	WOMEN	TOTAL
CALLS	77	136	213
IN PERSON	2	7	9
EMAIL	30	96	126
FAX	0	1	1
TOTAL	109	240	349

Type of requests	
DENTAL CARE NIHB	6
VISION CARE NIHB	13
MT	121
DRUG EXCEPTIONSS	10
MEDICAL SUPPLIES	26
MENTAL HEALTH NIHB	0
ENVIRONMENTAL HEALTH	1
JORDAN'S PRINCIPLE	0
GENERAL INFORMATION	4
OTHER TYPES OF REQUESTS	49
ACCREDITATION	1
MEDICAL ARCHIVES	91
PHYSICIAN	27
TOTAL REQUESTS	349

➤ NOVEMBER 2020

	MEN	WOMEN	TOTAL
CALLS	76	145	221
IN PERSON	7	16	23
EMAIL	30	113	143
FAX	0	0	0
TOTAL	113	274	387

TYPE OF REQUESTS	
DENTAL CARE NIHB	11
VISION CARE NIHB	6
MT	119
DRUG EXCEPTIONSS	5
MEDICAL SUPPLIES	27
MENTAL HEALTH NIHB	0
ENVIRONMENTAL HEALTH	0
JORDAN'S PRINCIPLE	0
GENERAL INFORMATION	9
ACCREDITATION CANADA	12
OTHER TYPES OF REQUESTS	72
MEDICAL ARCHIVES	102
PHYSICIAN	24
TOTAL REQUESTS	387

➤ DECEMBER 2020

	MEN	WOMEN	TOTAL
CALLS	66	109	175
IN PERSON	5	3	8
EMAIL	21	98	119
FAX	2	4	6
TOTAL	94	214	308

TYPE OF REQUESTS	
DENTAL CARE NIHB	18
VISION CARE NIHB	4
MT	61
DRUG EXCEPTIONSS	21
MEDICAL SUPPLIES	16
MENTAL HEALTH NIHB	0
ENVIRONMENTAL HEALTH	2
JORDAN'S PRINCIPLE	0
GENERAL INFORMATION NIHB	14
OTHER TYPES OF REQUESTS	54
MEDICAL ARCHIVES	85
ACCREDITATION CANADA	12
PHYSICIAN	21
TOTAL REQUESTS	308



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

➤ JANUARY 2021

	MEN	WOMEN	TOTAL
CALLS	75	106	181
IN PERSON	5	3	8
EMAIL	13	77	90
FAX	11	5	16
ZOOM	23	7	30
TOTAL	127	198	325

Type of requests	
MT	92
VISION CARE NIHB	14
DENTAL CARE NIHB	10
DRUG EXCEPTIONSS	16
MEDICAL SUPPLIES	19
MENTAL HEALTH NIHB	2
GENERAL INFORMATION	13
OTHER TYPES OF REQUESTS	64
ENVIRONMENTAL HEALTH	1
ACCREDITATION CANADA	11
MEDICAL ARCHIVES	75
PHYSICIAN	8
TOTAL REQUESTS	325

➤ FEBRUARY 2021

	MEN	WOMEN	TOTAL
CALLS	80	112	192
IN PERSON	1	2	3
EMAIL	21	95	116
FAX	2	4	6
ZOOM	19	30	49
TOTAL	123	243	366

TYPE OF REQUESTS	
MT	102
VISION CARE NIHB	13
DENTAL CARE NIHB	15
DRUG EXCEPTIONSS	9
MEDICAL SUPPLIES	26
MENTAL HEALTH NIHB	7
GENERAL INFORMATION	6
OTHER TYPES OF REQUESTS	68
ENVIRONMENTAL HEALTH	1
ACCREDITATION CANADA	19
MEDICAL ARCHIVES	85
PHYSICIAN	15
TOTAL REQUESTS	366

➤ MARCH 2021

	MEN	WOMEN	TOTAL
CALLS	85	134	219
IN PERSON	4	5	9
EMAIL	26	100	126
FAX	5	4	9
ZOOM	19	12	31
TOTAL¹	139	255	394

Type of requests	
MT	121
VISION CARE NIHB	13
DENTAL CARE NIHB	11
DRUG EXCEPTIONSS	13
MEDICAL SUPPLIES	26
MENTAL HEALTH NIHB	12
GENERAL INFORMATION	6
OTHER TYPES OF REQUESTS	70
ENVIRONMENTAL HEALTH	4
ACCREDITATION CANADA	9
MEDICAL ARCHIVES	90
PHYSICIAN	19
TOTAL REQUESTS	394



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



2. MEDICAL TRANSPORTATION (budget item 340)

Several tasks fall under the responsibility of the medical transportation coordinator, including budgetary reconciliation with the Abenakis of Odanak Council's accounting must be transmitted to Health Canada with respect to medical transportation for the community of Odanak. In this reconciliation, we also include expenses related to the visiting health care professional services program (PSI, Programme des professionnels de la santé itinérants).

Two (2) reports are sent to Health Canada annually:

Period 1: April 1 to September 30

Period 2: October 1 to March 31 + written annual report to be sent before July 29.

For over a year now, we have included the visiting health care professional services program (PSI, Programme des professionnels de la santé itinérants) in the MT budget. This program reimburses certain expenses (travel, meals and lodging) that independent professionals who travel to the community spend to provide their services. This program for the community of Odanak is offered to two of our professionals, such as psychologist Ms. Anik Sioui. They are reimbursed according to a schedule that includes rates already established by the Health Canada program. For this year, we did not issue this type of reimbursement since our community psychologist was teleworking due to the pandemic (according to government recommendations).

Currently, all transportation requests, whether by phone, in person or even by email and text, are centralized to the MT Coordinator. Most of the time, seven types of transports are authorized. Now, with the pandemic that has hit Quebec, we have expanded our types of transportation by adding the Centre d'Action bénévole du Lac St-Pierre (CAB). We prioritize transportation by private vehicle before transportation by our band's MT vehicle, if MT transportation is not available; transportation with a contracted driver if the client has no vehicle or cannot drive to their medical appointment; and specialized transit for certain clients with specific needs. Then, as a last resort, we use taxicab transportation - in addition to continuing to authorize ambulance transportation for Odanak resident clients who require emergency medical care.

The types of transportation we have added are directly related to the retirements of our permanent MT driver as well as our main contract driver. This decision was analyzed and implemented in response to government recommendations that people over the age of 65 limit their contact with other people. For this reason, our MT driver was temporarily reassigned to do disinfection tasks at the Odanak Health Centre.





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

Notice to the public

The first notice to the public regarding the new COVID-19 pandemic guidelines was sent in March 2020. We then issued several reminders.

- May 2020: Reminder of MT guidelines and notice to the public that the coordinator will be verifying the health status of MT clients prior to each transport;
- July 2020: New government guidelines for wearing masks during medical transportation;
- August 2020: MT coordinator vacation, but transportation continues with my colleague Andréanne Gouin;
- December 2020: Holiday break announced and clients must call before the holiday period to obtain their MT;
- January 2021: Back to confinement, but MT continues with commercial taxicabs and the Centre d'action bénévole (CAB) because the two main MT drivers are at risk due to their age;
- ✓ March 2021: Notice that travel for COVID-19 screenings and vaccinations can be provided through MT.

AVRIL 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	3
SPECIALIZED TRANSIT PROVIDED	1
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	0
PRIVATE VEHICLE	0
TRANSPORTATION BY TAXI	0
AMBULANCE (community members)	1
CANCELLED TRANSPORTATION	8
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	0

MAY 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	8
SPECIALIZED TRANSIT PROVIDED	1
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	1
PRIVATE VEHICLE	0
TRANSPORTATION BY TAXI	0
AMBULANCE (community members)	0
CANCELLED TRANSPORTATION	5
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	0

Notes: Note that the results are down due to the pandemic. The two main MT drivers had to be removed from service as they were at risk (over 70 years old) and all non-essential medical appointments had to be cancelled to avoid spreading the virus.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



JUNE 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	2
SPECIALIZED TRANSIT PROVIDED	1
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	7
PRIVATE VEHICLE	12
TRANSPORTATION BY TAXI	2
AMBULANCE (community members)	1
CANCELLED TRANSPORTATION	3
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	6

JULY 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	6
SPECIALIZED TRANSIT PROVIDED	2
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	7
PRIVATE VEHICLE	10
TRANSPORTATION BY TAXI	1
AMBULANCE (community members)	2
CANCELLED TRANSPORTATION	3
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	1

AUGUST 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	11
SPECIALIZED TRANSIT PROVIDED	1
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	10
PRIVATE VEHICLE	2
TRANSPORTATION BY TAXI	0
AMBULANCE (community members)	1
CANCELLED TRANSPORTATION	1
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	0

SEPTEMBER 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	16
SPECIALIZED TRANSIT PROVIDED	4
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	10
PRIVATE VEHICLE	3
TRANSPORTATION BY TAXI	2
AMBULANCE (community members)	2
CANCELLED TRANSPORTATION	2
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	1

OCTOBER 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	19
SPECIALIZED TRANSIT PROVIDED	3
COORDINATED TRANSPORTATION (COMBINED)	1
MT BY CONTRACT DRIVER	19
PRIVATE VEHICLE	3
TRANSPORTATION BY TAXI	3
AMBULANCE (community members)	0
CANCELLED TRANSPORTATION	4
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	1

NOVEMBER 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	21
SPECIALIZED TRANSIT PROVIDED	1
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	5
PRIVATE VEHICLE	5
TRANSPORTATION BY TAXI	6
AMBULANCE (community members)	1
CANCELLED TRANSPORTATION	4
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	6 ^A

Notes: ^A MT changes were due to:

1. Driver did not have winter tires yet
2. Two MT clients were taken by specialized transit
3. MT driver was not comfortable providing transportation
4. Contract driver was no longer available for MT
5. Taxi reservation was cancelled as the MT driver was available.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

DECEMBER 2020 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	16
SPECIALIZED TRANSIT PROVIDED	0
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	2
PRIVATE VEHICLE	4
TRANSPORTATION BY TAXI	0
AMBULANCE (community members)	1
CANCELLED TRANSPORTATION	2
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	1 ^A

Notes: ^A A change of driver (contract driver to MT driver) was made since the MT driver was available due to a cancellation by another client.

JANUARY 2021 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	7 ^A
SPECIALIZED TRANSIT PROVIDED	0
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	3
PRIVATE VEHICLE	3
TRANSPORTATION BY TAXI	1
AMBULANCE (community members)	22
CANCELLED TRANSPORTATION	2
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	1
TRANSPORTATION PROVIDED (MT vehicle)	8 ^B

Notes: ^A Note that following government recommendations, we relocated our MT driver who is in the 65+ age group to do OHC disinfection tasks. For this reason, the number of MTs carried out with the vehicle has decreased.

^B Following the above decision, we had to change the MT means to the Sorel taxicab service.

FEBRUARY 2021 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	0 ^A
SPECIALIZED TRANSIT PROVIDED	1
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	1
PRIVATE VEHICLE	12
MT WITH THE CAB (CENTRE D'ACTION BÉNÉVOLE)	6
TRANSPORTATION BY TAXI	13
AMBULANCE (community members)	1
CANCELLED TRANSPORTATION	1
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	3 ^{BC} ^D

Notes:

À: Note that following government recommendations, we relocated our MT driver who is in the 65+ age group to do OHC disinfection tasks. For this reason, the number of MTs carried out with the vehicle has decreased.

B: Following the above decision, we had to change the MT means to the Sorel taxicab service.

C: 2021-02-10: Change of an MT by taxicab by an MT with the CAB.

D: 2021-02-18: Change of a scheduled MT with the MT vehicle to an MT by private vehicle and on the 2021-02-19: Contract driver unable to perform assigned MT.

MARCH 2021 TRANSPORTATION REQUESTS	
TRANSPORTATION PROVIDED (MT vehicle)	0 ^A
SPECIALIZED TRANSIT PROVIDED	1
COORDINATED TRANSPORTATION (COMBINED)	0
MT BY CONTRACT DRIVER	0 ^B
PRIVATE VEHICLE	11
MT WITH THE CAB (CENTRE D'ACTION BÉNÉVOLE)	11
TRANSPORTATION BY TAXI	14
AMBULANCE (community members)	3
CANCELLED TRANSPORTATION	5
TRANSPORTATION CANCELLED OR CHANGED AT MY REQUEST (MT CONFLICT)	0

Notes :

À: Note that following government recommendations, we relocated our MT driver who is in the 65+ age group to do OHC disinfection tasks. For this reason, the number of MTs carried out with the vehicle has decreased.

B: Following the above decision, we had to change the MT means to the Sorel taxicab service.

ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



TOTAL STATISTICS FOR 2020-2021

Total transportation *requests for the year*: 367

Total transportation *carried out with our MT vehicle*: 109

Total transportation carried out *with contract driver*: 65

Total transportation *authorized using private vehicle*: 42

Total transportation authorized using MT specialized transit: 16

Total transportation authorized using ambulance for Odanak clients: 15

Total transportation authorized using the CAB: 18

Total transportation authorized using the Sorel-Tracy taxicab service: 63

3. ENVIRONMENTAL HEALTH

Inspections for the community's public establishments and private homes are carried out by Ms. Sarah Chergui, Indigenous Services Canada's environmental health officer, as well as Mr. Eric Gauthier Nolett, Abenakis of Odanak Council's public works supervisor. In addition, water testing in public places and various control points are also carried out by Mr. Gauthier Nolett.

To date, our mandate is to make the connection between departments, develop public health and environmental advisories, archive Ms. Chergui's reports and manage appointments for inspections in the community.

List of Indigenous Services Canada's public and environmental health officer's activities for 2020-2021 in our community:

2020-06-(25-26)

Follow-up on a complaint regarding the quality of drinking water

2021-01-(21-27)

Follow-up, support and interpretation of Tecta results showing the presence of total coliforms / Contact with multidisciplinary team

2021-02-(02-03)

Follow-up and report on the results of sampling for lead and copper in children's facilities (swimming pool and daycare centre)

2021-02-(11-18)

Follow-up on a 2021-02-02 H2O entry to be confirmed for the ODA-WAB-0222

2021-02-(24-25)

Follow-up on the detection of total coliforms in a drinking water sample
Drinking water quality summary report for the period 2020-04 to 12





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

2021-03-30

Information gathering and data verification for the production of the drinking water quality summary report for the period 2021-01 to 03

Notice to the public

March 2020

Notice sent to the restaurant le Gourmet d'Odanak regarding government guidelines concerning the pandemic (encourage deliveries, take-out orders, seating with physical distance between tables, wearing of masks, etc.)

July 2020

1. Notice sent to the population of the Odanak community regarding safety tips for protection against the extreme heat.
2. Notice sent to Odanak residents regarding boil water advisory as of July 11, 2020.

September 2020

Notice sent to the Odanak community residents to ensure the safety of the Odanak community in regards to the spread of the Covid-19 virus.

This notice instructed, in the event that a resident tested positive for Covid-19, to notify the Odanak Health Centre's nursing supervisor in order to avoid the spread of the virus and to implement measures to prevent community contamination. In order to respect the regulations and laws governing confidentiality, consent to disclose information was requested in order to insert this data in the medical file of a user and to allow the health professionals of the Odanak Health Centre to assist the user.

January 2021

Second notice sent to Odanak residents to ensure the safety of the community of Odanak with regards to the spread of the Covid-19 virus.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



4. MEDICAL ARCHIVES

With the start of teleworking in mid-March 2020 due to the pandemic, we have provided remote training to all OHC professionals so that they can enter their notes into Ofys. This allows them to access the client's Electronic Medical Record (EMR), which allows for a continuum of care and services for OHC clients and efficient performance of all OHC health workers and medical archivists.

As of the end of June 2020, following approval by OHC management and the AOC, we have forwarded a new procedure for recording notes in the EMR (OFYS software) to all OHC health workers and professionals.

Given the confinement and teleworking situation, the use of an electronic medical record is more appropriate in order to respond to users' requests and facilitate the continuity of care and services. Currently, all OHC health workers and professionals use the EMR Ofys to record their follow-up notes regarding a user.

The electronic record allows you to:

- Facilitate the management of user records.
- Decrease the risk of errors when writing notes during an appointment with a client.

It is important to consider that Accreditation Canada Standard 2.2 (Telehealth) states the following:

Requirements and shortcomings in information technology and systems are identified and communicated to organizational management, including electronic medical/health records (EMRs/EHRs), decision tools, client tracking systems, wait list management systems, client self-assessment tools, or access to specific registries and/or databases. Depending on the organization, systems requirements may be complex (e.g., advanced software to increase interoperability) or support basic operations (e.g., more recent computer systems).

The advantages of implementing OFYS software:

- Improved work efficiency of OHC staff;
- Effective management of user records;
- Improved management of appointments through OFYS software.

This comprehensive solution allows for the elimination of paper through scheduling, clinical records, prescriber and more.

- Customizable templates for writing assistance;
- Access management control according to the user's profile;
- Data management;
- Creation of customized statistical reports.

Teleconsultation

With teleworking in mind, we have developed a procedure for OHC professionals to conduct video consultations in a confidential and secure manner. This application is directly linked to OFYS.





Access limitation

This step consists of limiting access to the EMR so that only professionals who are active in the user's record can have access. Professionals with limited access to a record will only be able to view the client's contact information.

We must proceed with the access limitation of 2,000 records before digitization can begin.

Digitization of paper records

We are currently working on the OHC paper records digitization project in order to insert them into the EMR-OFYS software in order to have a complete electronic record for all our users. The request has been authorized by the OAC and OHC management.

Despite a complete shift from paper to electronic records, it must be understood that original documents with permanent retention will need to be kept in the paper records for historical purposes. To begin digitization, we will establish a start date. Documents prior to this date will not be digitized. A medical archives service space is then required and must comply with the various laws governing user medical records. A vault to protect the medical records kept in the medical archives department to ensure increased protection is required. This request comes from the provincial laws and regulations as well as through a standard from Accreditation Canada. The vault project is underway with the GCNWA technical services.

As a follow-up to the letters sent to the Abenakis of Odanak Council on June 11, 2019 and February 20, 2020, we have sent them again on September 21, 2020 to ensure a follow-up and to meet Accreditation Canada's requirements as well as the various laws and regulations governing the protection of confidential information contained in the biopsychosocial records of a health and social services establishment. At the time of the basic accreditation obtained in 2016, red flags were brought to our attention through a report produced by Accreditation Canada surveyors. In fact, following the in-depth self-assessment, the surveyors, who are peers from outside the organization, conducted an accreditation survey during which they assessed the organization's leadership, governance, clinical programs and services against the accreditation program requirements for quality and safety.

One of the red flags raised was:

5.3: The organization stores records securely.

In view of this standard, our organization initially meets the storage criterion favourably, considering that we have set up a medical archives service that allows us to keep user records in a secure manner.

However, the level of physical security of the records is not optimal and compliant since the archives department does not have a fire and water vault.

In addition, the Act respecting health services and social services (LSSSS), Section 19, supports the above standard:

“The record of a user is confidential and no person may have access to it except with the consent of the user or the person qualified to give consent on his behalf. Information contained in a user's record may, however, be communicated without the user's consent”.



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The Act respecting Access, Section 63.1, indicates the following:

“A public body must take the security measures necessary to ensure the protection of the personal information collected, used, released, kept or destroyed and that are reasonable given the sensitivity of the information, the purposes for which it is to be used, the quantity and distribution of the information and the medium on which it is stored”.

In order to meet Accreditation Canada's standard of protecting records from water and fire, the installation of a vault is the first option to consider.

As a follow-up to our reminder, discussions and action plans are underway to acquire.

Features of the EMR-OFYS

Clinical note

Drafting of follow-up, observation and intervention notes electronically. This feature allows health workers and professionals to reduce the time spent recording their notes. In addition, the analysis of their notes by medical archivists is simplified, fast and efficient (in real time).

Summary

The summary sheet of each user's record at the Health Centre is now electronic. As medical archivists, as the analysis of the records evolves, we add the relevant elements to the summary sheet of each user's record to ensure a complete and adequate follow-up that corresponds to the user's needs.

The summary has several advantages:

- It provides an at-a-glance summary of the patient's overall health status and allows physicians, health workers and other health care professionals to be more efficient;
- It is useful in the choice of medication;
- It allows for a quick check of the contraindications of a drug;
- It avoids the need to rewrite in the progress notes certain information already indicated;
- It reduces the risk of oversight in a longitudinal follow-up;
- It greatly simplifies the drafting of a summary record or a response to a request for information from the user, insurers or a third party;
- It can be easily appended, if necessary, when requesting a consultation or a transfer.

Laboratory results

With the EMR Ofys, we can directly access the Dossier Santé Québec (DSQ) platform, which allows health professionals and medical archivists at the Health Centre to access all laboratory results (samples), medical images, diagnostic tests and the list of medications used by a user.

Clinical follow-up

Tracking a user's measures and results is truly simplified. With Ofys, the creation of customizable graphs to observe trends and even display the patient's medication under the graph to observe its effect.

Electronic forms

Through EMR Ofys, we can now find the official forms for our region as well as those personalized and requested by Odanak Health Centre health workers and professionals.





RxVigilance

Odanak Health Centre nurses have access to the RXVigilance application via EMR Ofys.

This module provides access to all RxVigilance resources, in addition to an automatic and almost instantaneous analysis of our users' pharmacological profile.

Telemedicine

Odanak Health Centre health workers and professionals can now conduct a video conference to carry out a telemedicine consultation in complete security and confidentiality. We have developed a procedure for the use of telemedicine for all health workers and professionals in our organization.

Other features

- Display the list of recent consulted records.
- Synchronization of registration data with the RAMQ.
- Possibility of limiting access to a patient's record.
- Direct, one-way communication with patients via text messaging.
- Generate patient statistics and reports.
- Search for a new patient in the DSQ with only their medical card number to complete their demographic data.

Completion sheets

The analysis of the users' record is an opportunity to identify major problems (possible lawsuits) and report them, if necessary, to management. If necessary, to make a correction to the user's record, we send a completion sheet intended for the OHC professional who must modify and/or correct an item in the record.

Meeting date	Number of reports presented
September 23, 2020	Nil
November 3, 2020	3 reports
December 1, 2020	4 reports
March 12, 2021	6 reports

Considering the Covid-19 pandemic and the telework carried out since mid-March, the completion sheets are now sent electronically to the Health Centre's health workers and professionals.

Access requests

All access requests must be processed by the medical archivists. We have therefore developed an access to information procedure. When we receive access requests, we must, depending on the type of claimant and by law, remove third party information that may be seriously prejudicial.



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More specifically, Section 17 of the Act Respecting Health Services and Social Services establishes that, for any user of fourteen (14) years of age and over, the right of access to their record based on the following terms: “Every user 14 years of age or over has right of access to his record. However, the institution may deny him access to it temporarily if, on the advice of his attending physician or the physician designated by the executive director of the institution, communication of the record or any part thereof would likely be seriously prejudicial to the user’s health. In that case, the institution, on the recommendation of the physician, shall determine the time at which the record or the part thereof to which access has been denied can be communicated to the user, and notify him thereof.”

To ensure proper follow-up, we have developed an electronic statistics registry to account for all requests we receive. In this register we have included the response time in order to verify whether we respond within the deadlines prescribed by law.

REGISTRE DES INCIDENTS/ACCIDENTS CENTRE DE SANTÉ D'ODANAK						
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3-101220	2020-12-10	AM	Employé du CSO	2020-12-15	N/A	N/A
1-101220	2020-12-10	AM	Constat	2020-12-21	N/A	N/A
101220	2020-12-10	AM	Constat	2020-12-21	N/A	N/A
91220	2020-12-09	11:05	Employé du CSO	2020-12-21	N/A	N/A
161020	2020-10-16	16:00	Usager	2020-11-02	N/A	N/A
210120	2020-01-21	14:00	Employé du CSO	2020-03-16	N/A	N/A
261119	2019-11-26	08:00	Employé du CSO	2019-12-16	N/A	N/A
211119	2019-11-21	08:00	Usager	2019-12-16	N/A	N/A
281019	2019-10-28	08:00	Usager	2019-12-16	N/A	N/A
171019	2019-10-17	13:30	Usager	2019-12-16	N/A	N/A
21019	2019-10-02	09:30	Usager	2019-12-16	N/A	N/A
111019	2019-10-11	12:00	Usager	2019-10-17	N/A	N/A
81019	2019-10-08	07:55	Usager	2019-10-17	N/A	N/A
90919	2019-09-09	08:10	Usager	2019-10-17	N/A	N/A
30719	2019-07-03	10:50	Usager	2019-10-17	N/A	N/A
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210519	2019-05-21	10:10	Employé du CSO	2019-06-18	N/A	N/A
10319	2019-03-01	20:00	Employé du CSO	2019-06-18	N/A	N/A

5. PHYSICIAN

Considering the departure of Dr. Leroux-Lapointe from our organization, we are continuing to register members who do not have a family physician on the waiting list of the Guichet d'accès de la clientèle orpheline (GACO) in Nicolet.

In order to help community members consult a physician quickly, we offer our support in planning and making appointments in a medical clinic located in the vicinity of the community (Nicolet, Trois-Rivières, Sorel).

This service allows for quick (next day) medical consultations with a physician. This service is available to all patients with or without a family physician.

In addition, we offer support in making appointments for Covid-19 screening tests via the Clic-Santé Québec tool.

And finally, we offer the possibility of making an appointment to obtain the Covid-19 vaccine to all members of the community (residents or not).

Considering the extent of the appointments requested by the clientele, in the next 2021 quarterly report, we will insert monthly statistics.





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ODANAK HEALTH CENTRE

6. 2020-2021 STATISTICS FOR RECORD RELEASES

April 2020

Health workers	File requests
Medical archivist	568
Coordinator home support	7
Nurses	N/A
Addictions counsellor	N/A
Kinesiologist	N/A
Physician	N/A
Nutritionist (M-F D)	N/A
Jordan's principle	N/A
Psychologist	51
FNCFS	N/A
NIONA/GCNWA	N/A
NIHB	26
Social worker (L.B)	N/A
Social worker (D.L)	N/A
TOTAL:	652

June 2020

Health workers	File requests
Medical archivist	292
Coordinator home support	16
Nurses	84
Addictions counsellor	8
Kinesiologist	7
Physician	0
Nutritionist (M-F D)	4
Jordan's principle	31
Psychologist	47
FNCFS	0
NIHB	36
Social worker (L.B)	71
Social worker (D.L)	6
TOTAL:	602

August 2020

Health workers	File requests
Medical archivist	207
Coordinator home support	18
Nurses	81
Addictions counsellor	5
Kinesiologist	5
Physician	1
Nutritionist (M-F D)	10
Jordan's principle	24
Psychologist	20
FNCFS	1
NIHB	48
Social worker (L.B)	9
Social worker (D.L)	28
TOTAL:	457

May 2020

Health workers	File requests
Medical archivist	342
Coordinator home support	43
Nurses	89
Addictions counsellor	37
Kinesiologist	5
Physician	17
Nutritionist (M-F D)	13
Jordan's principle	14
Psychologist	49
FNCFS	8
NIHB	19
Social worker (L.B)	4
Social worker (D.L)	104
TOTAL:	744

July 2020

Health workers	File requests
Medical archivist	413
Coordinator home support	31
Nurses	111
Addictions counsellor	10
Kinesiologist	10
Physician	4
Nutritionist (M-F D)	17
Jordan's principle	20
Psychologist	39
FNCFS	0
NIHB	35
Social worker (L.B)	53
Social worker (D.L)	5
TOTAL:	748

September 2020

Health workers	File requests
Medical archivist	283
Coordinator home support	30
Nurses	70
Addictions counsellor	11
Kinesiologist	13
Physician	0
Nutritionist (M-F D)	8
Jordan's principle	14
Psychologist	61
FNCFS	0
NIHB (including MT)	66
Social worker (L.B)	49
Social worker (D.L)	10
TOTAL:	615

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October 2020

Health workers	File requests
Medical archivist	492
Coordinator home support	11
Nurses	118
Addictions counsellor	10
Kinesiologist	23
Physician	0
Nutritionist (M-F D)	16
Jordan's principle	29
Psychologist	62
FNCFS	0
NIHB (including MT)	80
Social worker (L.B)	71
Social worker (D.L)	6
TOTAL :	918

December 2020

Health workers	File requests
Medical archivist	253
Coordinator home support	12
Nurses	58
Addictions counsellor	14
Kinesiologist	16
Physician	0
Nutritionist (M-F D)	18
Jordan's principle	27
Psychologist	41
FNCFS	0
NIHB (including MT)	58
Social worker (L.B)	50
Social worker (D.L)	9
TOTAL:	556

February 2021

Health workers	File requests
Medical archivist	248
Coordinator home support	14
Nurses	111
Addictions counsellor	19
Kinesiologist	58
Physician	2
Nutritionist (M-F D)	0
Jordan's principle	7
Psychologist	43
FNCFS	69
NIONA/GCNWA	0
NIHB	78
Social worker (L.B)	4
Social worker (D.L)	81
TOTAL:	734

November 2020

Health workers	File requests
Medical archivist	232
Coordinator home support	16
Nurses	94
Addictions counsellor	14
Kinesiologist	17
Physician	1
Nutritionist (M-F D)	0
Jordan's principle	17
Psychologist	12
FNCFS	51
NIHB	17
Social worker (L.B)	64
Social worker (D.L)	44
TOTAL:	589

January 2021

Health workers	File requests
Medical archivist	205
Coordinator home support	4
Nurses	52
Addictions counsellor	0
Kinesiologist	19
Physician	2
Nutritionist (M-F D)	0
Jordan's principle	8
Psychologist	29
FNCFS	60
NIONA/GCNWA	0
NIHB	89
Social worker (L.B)	1
Social worker (D.L)	37
TOTAL:	506

March 2021

Health workers	File requests
Medical archivist	522
Coordinator home support	8
Nurses	61
Addictions counsellor	16
Kinesiologist (C.B.R)	37
Kinesiologist (J.P)	2
Physician	0
Nutritionist (M-F D)	19
Jordan's principle	52
Psychologist	49
FNCFS	2
NIHB (including MT)	83
Social worker (L.B)	11
Social worker (D.L)	74
TOTAL:	936



7. COMMITTEES

7.1 Single record management committee

Since 2013, a single record management committee has been established. In order to ensure adequate follow-up and continuity of care and services, we continue to sit on the Odanak Health Centre's single record management committee.

In 2020-2021, the committee was made up of:

7. COMMITTEES

7.1 Single record management committee

Since 2013, a single record management committee has been established. In order to ensure adequate follow-up and continuity of care and services, we continue to sit on the Odanak Health Centre's single record management committee.

In 2020-2021, the committee was made up of:

- ✓ Paule Leïby, medical archivist/MT coordinator
- ✓ Andréanne Gouin, medical archivist / liaison officer
- ✓ Isabelle Dupuis, nurse clinician
- ✓ Daphnée Couture, nursing care manager
- ✓ Nancy Carignan, clinical coordinator, FNCFS
- ✓ Jean Vollant, health services director
- ✓ Christina Béland Racine, Kinesiologist
- ✓ André Gill, addictions counsellor
- ✓ Danielle Lamirande, social worker

The committee meets once a month to follow up on the questions, comments and modifications to be made for the management of the single record file (policies and procedures).

Dates of meetings held:

- October 8, 2020 (report available on the “P” network)
- December 3, 2020 (report available on the “P” network)
- February 16, 2021 (report available on the “P” network)

During the first and second quarters of 2020-2021 (April through September), no meetings were held for the following reasons:

- Holidays for certain committee members
- Covid-19 pandemic
- Professionals not available



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ODANAK HEALTH CENTRE



However, it should be noted that we respond daily to requests from health workers and users regarding record management. Measures to improve the medical archives department are ongoing.

A biennial update of all single record management policies has been completed and approved by the AOC.

Considering the magnitude of the demand for modification, creation and addition of in-house forms created by the OHC archives department, we will insert monthly statistics documenting this task in the next quarterly report.

7.2 Quality and risk management committee

The mandate of this committee is to research, develop and promote ways to ensure the safety and support of employees and users visiting the Odanak Health Centre. It also ensures the implementation of an incident and accident monitoring system and recommends to management measures to prevent the frequency of these incidents/accidents and the application of control measures, as appropriate.

The committee is made up of:

- ✓ Jean Volland, health services director
- ✓ Paule Leiby, medical archivist/MT coordinator
- ✓ Andréanne Gouin, , medical archivist / liaison officer
- ✓ Marcelle Hannis, nurse
- ✓ André Gill, addictions counsellor
- ✓ Johanne Delorme, medical secretary / receptionist

In order to ensure adequate and appropriate follow-up, a register of incidents and accidents has been developed and is available to all employees of the Odanak Health Centre. It should be noted that the detailed reports and incidents are kept at the medical archives department in order to ensure greater and effective confidentiality.

Meeting date	Number of reports presented
September 23, 2020	Nil
November 3, 2020	3 reports
December 1, 2020	4 reports
March 12, 2021	6 reports

It should be noted that the minutes of the meetings as well as the documents produced and implemented in this committee are all available on the “P” network.

During the first and second quarter of 2020-2021, no meetings were held for the following reasons:

- Holidays for certain committee members
- Covid-19 pandemic
- Professionals not available





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ODANAK HEALTH CENTRE

An update to the procedure for reporting, processing and disclosing an event (incident-accident) was approved by the AOC and the OHC management on April 13. This update now allows for an analysis of the reports, with a view to transparency. In fact, the procedure now allows for all reports received to be analyzed by all committee members for recommendations. The recommendations are then given to management and/or the person responsible for the sector for review of the event, verification of the committee's recommendations and inclusion of additional recommendations if necessary by the person responsible for the sector.

REGISTRE DES INCIDENTS/ACCIDENTS CENTRE DE SANTÉ D'ODANAK						
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1-101220	2020-12-10	AM	Constat	2020-12-21	N/A	N/A
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210519	2019-05-21	10:10	Employé du CSO	2019-06-18	N/A	N/A
10319	2019-03-01	20:00	Employé du CSO	2019-06-18	N/A	N/A

7.3 Medical transportation (MT) team committee

In order to ensure efficiency and to meet with all members of the MT team in order to provide program updates, a meeting committee has been set up.

The committee is made up of:

- ✓ Paule Leiby, MT coordinator
- ✓ Jean Vollant, Director
- ✓ Andréanne Gouin, medical archivist / liaison officer
- ✓ Michel Hannis, driver
- ✓ Claire Laramée
- ✓ Driver on call (position to be filled)

7.4 Occupational health and safety committee

In order to meet the various requirements, an occupational health and safety (OHS) committee must be formed in every workplace. This committee must include staff members.

Moreover, according to article 135 of the Canadian OHS Code, the Abenakis of Odanak Council must have a local committee since the organization has at least 20 employees. It must also be composed of a minimum of two people. Employee representatives as well as management representatives must be part of this committee on an equal basis.



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ODANAK HEALTH CENTRE



The purposes of the committee are as follows:

- ✓ Promote OHS in the organization;
- ✓ Enable everyone to take concrete action to prevent injuries in the workplace;
- ✓ Participate in maintaining a safe work environment by encouraging employees to identify, eliminate and control risks.

The committee's objectives:

- ✓ Raising awareness;
- ✓ Initiate a change in attitude;
- ✓ Become the driving force of prevention in the organization;
- ✓ Become proactive.

At the Abenakis of Odanak Council, this committee is made up of:

- ✓ Catherine Bussi res C t , finance director
- ✓ Jonathan Charbonneau, human resources director

7.5 Public support committee

This committee was created by Odanak Health Centre management to ensure that all sectors of the Odanak Health Centre support the members of the Odanak community in the face of the Covid-19 pandemic, considering the implementation of various confinement measures and the teleworking of certain employees. The committee has been meeting regularly since the beginning of the pandemic.

This committee is made of:

- ✓ Jean Vollant, health services director
- ✓ Paule Le by, medical archivist / liaison officer
- ✓ Andr anne Gouin, medical archivist / health liaison officer (NIHB)
- ✓ Nadia Gil, Home support coordinator
- ✓ Daphn e Couture, nursing care manager
- ✓ Danielle Lamirande, social worker
- ✓ Johanne Delorme, executive assistant

Dates of meetings held:

- July 3, 2020
- July 10, 2020
- September 29, 2020
- October 23, 2020
- November 10, 2020
- January 19, 2021
- March 30, 2021





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ODANAK HEALTH CENTRE

SECTOR: Nursing care

Prepared by: Daphnée Couture

Clinical nurse/ nursing care manager

This quarterly report presents the management of nursing care and other programs for the period of April 1, 2020 to March 31, 2021. The financial reports for the programs cited in this report will be produced by the Abenakis of Odanak Council's Finances and HR departments.

This report is intended to be a quantitative report of the different programs the nursing team works on. You will find more qualitative data in the activity reports as well as in the quarterly reports.

Annual nursing care statistics (April 1, 2020 to March 31, 2021)

Number of consultations	2018-2019	2019-2020	2020-2021 / comments
Odanak health centre	893	872	509 Mid-March to mid-June 2020: The number of consultations decreased significantly with the closure of the OHC due to the pandemic. Clients were referred to the Pierreville clinic via a service agreement and/or screened via teleconsultation by an OHC nurse. Mid-June to September: Reopening of routine care on a gradual basis with two (2) mornings per week. September 2020: Resume routine care on OHC schedule (32 hrs/wk).
Home care	870	699	494 Mid-March to mid-June 2020: home visits were only reserved for clients with special health care needs to decrease the risk of transmission of the Covid-19 virus.
Telephone	n/a	n/a	197 Telephone follow-ups were prioritized in order to keep in touch with the clientele.
Influenza vaccination (seasonal flu)	91	90	120



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ODANAK HEALTH CENTRE



- **NURSING CARE**

Overall objective 3 “Provide appropriate health services in line with the specific needs of the Odanak population”

- Activity 3E: Optimization of front-line services (routine care).
See annual statistics table.

- **IMMUNIZATION**

Overall objective 3 “Provide appropriate health services in line with the specific needs of the Odanak population”

Activity 3B: Bi-annual immunization activities to demystify and prevent preventable diseases.

- November 2020 influenza vaccination campaign.
See annual statistics table.
- COVID-19 vaccination campaign (First dose March 2021)

	Moderna vaccine	% vaccination
Number of Odanak residents <u>18 years and older who received their 1st dose with the OHC</u>	247	71%
Total number of doses administered	324	

- **FAMILY VIOLENCE**

Overall objective 1: “Strengthen the prevention of suicide and non-violence among the general population”

- Activity 1C: Prevention of family violence and awareness of healthy social relationships.
Creation of a service trajectory for the fight against elder abuse: Mobilization of community stakeholders (nurse, police officer, social worker, FNCFS caregiver, home support coordinator, health director) for meetings in order to find courses of action and intervention when a situation of elder abuse occurs towards an elder and their family.

- **COHI (Children's Oral Health Initiative)**

Dental hygienist maternity leave from March 2020 to February 2021.

Number of participants who attended COHI activities: 10 individuals
(1 child in daycare, 4 elementary school children, 5 parents)





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ODANAK HEALTH CENTRE

- *MIH (Maternal and Infant Health)*

Overall objective 2: “Promote the biopsychosocial development of all children and youth in the community”

- Activity 2B: Continuing health activities (3X/year) at the day care centre, OHC and with the FNCFS (lice screening).
- Activity 2D: Individual and group pregnancy monitoring activities
- Activity 2E: Activities to monitor the optimal development of children (immunization, growth curve, psychomotor development)
- Activity 3A: Activities to promote safe sexual behaviour (HIV/STBBI)

Annual MIH statistics (April 1, 2020 to March 31, 2021)

Births	2
Meeting for infant vaccination	7
Infant follow-ups	15

- *Jordan's Principal*

Overall program objective: “Implement service coordination to provide resources for First Nations children's families to help them access federal, provincial and territorial health and social services programs to meet the needs of these children”.

Activities

- Establish relationships with community resources and collaborate with existing programs and community services.
- Improve awareness of existing programs and support available to First Nations living on and off reserve.
- Proactively work with communities to identify children with unmet needs to facilitate early intervention and quick access to support and services.
- Facilitate access to professionals for assessment purposes, or offer professional assessment services where and when needed.

For 2020-2021, 40 new applications for funding were made, 9 applications for continuation of services already in place, 4 applications were denied as there was no real inequity, 1 application denied as the child was not eligible for Jordan's Principle, 1 group application for Kiuna, and a total of 29 children were monitored.

- *ADI (Aboriginal Diabetes Initiative)*

Overall objective: “Provide appropriate health services in line with the specific needs of the Odanak population”

The goal of the ADI is to reduce type 2 diabetes among Aboriginal people by supporting health promotion and primary prevention activities and services delivered by trained community diabetes workers and health service providers. The Aboriginal Diabetes Initiative delivers a range of primary prevention, screening and treatment programs.

Through these activities, the ADI supports prevention, health promotion, screening and care management initiatives that are community-based and culturally appropriate.



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ODANAK HEALTH CENTRE



Development of a systematic monitoring protocol and follow-up (at the Health Centre and at home) for clients with chronic diseases (diabetes and cardiovascular diseases to begin with).

ADI program statistics (January 1, 2021 to March 31, 2021)

Due to the maternity leave of the nurse assigned to the program)

Consultations	
Number of new cases screened	0
Number of at-risk individuals screened	4
Follow-up cases (diabetes)	18
Number of participants in activities	Ø activities due to health measures

- Accreditation Canada

According to the fields of expertise of each nurse, they were called upon to work on the following committees in preparation for the Accreditation Canada survey which took place in the spring of 2021 and for which the Health Centre was “accredited with honours”.

- Leadership
- Health and wellness
- Person-centered care
- Infection Prevention and Control (IPC)
- Medication management

From these committees, reflections have emerged, standards and policies have been updated and implemented. Training was also given to employees by the IPC nurse; all with the goal of offering safer health services and improving the quality of care we offer to the community.

2020-2021 was a year of resilience, innovation in the way we do things, and strengthening the relationships we had with our external partners. Much to our relief, the year ended on a high note with the arrival of the Covid-19 vaccines. In short, the word that resonated more often than not was “adjustment”, but I am confident that our new ways of doing things are here to stay. Many of these are best practices in care, so they will certainly live on, pandemic or not.

On that note, stay healthy everyone!

Daphnée Couture,

Nurse, nursing care manager





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

SECTOR: Social Work
Prepared by: Danielle Lamirande

INTRODUCTION

This quarterly report outlines activities under the Social Work Program for the period April 1 to June 30, 2019. The financial reports of the programs mentioned in this report will be produced by the Abenakis of Odanak Council's Finances and HR departments.

OVERALL OBJECTIVE

The social worker's objective is the well-being of the community. The role of social workers is to support and restore the social functioning of the individual in order to promote their optimal development in interaction with their environment. Therefore, the social worker proceeds with a warm and open welcome, evaluates the situation and determines an intervention plan and assumes its implementation. The social worker also has a role as a facilitator in the client's wellness process.

Social workers not only have a three-year university degree as well as training from the Ordre des Travailleurs sociaux et des Thérapeutes conjugaux et familiaux du Québec, but also have a great capacity for analysis, understanding and open-mindedness. We distinguish ourselves by our specific approach, which consists not only in analyzing the problematic situation, but also in evaluating the social functioning of the person and the involvement or not of their environment in the search for and attainment of their well-being. Thus, the proposed interventions take into account the different aspects of the person's life and the means at their disposal to face their difficulties.

MENTAL HEALTH COMMITTEE

Provide mental health services

1. Allow individuals from the Odanak community with a mental health diagnosis to be followed according to their needs.

Individual follow-ups (April 2020 to June 2020):

Telephone follow-ups:

Elderly file: 6 files (70 years and older) (104 calls)
(loss of autonomy, bereaved and/or isolated)

Mental health file: 2 files (40 years and older) (58 calls)
(BPD, schizophrenia)

Psychosocial follow-up file: 9 files (20 years and older) (132 calls)
(Various social problems, harassment, bullying, depression, domestic violence, identity issues, emotional dependence)

Courtesy calls: 50 years and older (702 calls)

Telephone follow-ups of vulnerable and/or isolated persons during confinement.

Elder files: 6 files (70 years and older) (88 calls) (28 home visits)
(loss of autonomy, bereaved and/or isolated)



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



Mental health files: 2 files (40 years and older) (24 visits) (BPD, schizophrenia)

Psychosocial follow-up files: 9 files (20 years and older) (97 calls) (7 office visits) (24 home visits) (Emotional dependence, identity issues, loss of self-esteem, self-confidence and assertiveness, depression, conflictual relationships, harassment, bullying, burnout)

Public support calls: 50 years and older (237 calls)

Individual follow-ups (October 2020 to December 2020):

Elder files: 6 dossiers (70 years and older) (72 home visits) (loss of autonomy, bereaved and/or isolated):

Mental health files: 2 files (40 years and older) (26 visits) (BPD, schizophrenia)

Psychosocial follow-up files: 10 files (20 years and older) (93 visits) (Emotional dependency, loss of self-esteem, self-confidence and assertiveness, depression, burnout, harassment, bullying, identity issues)

Individual follow-ups (January 2021 to March 2021):

Elder files: 10 files (60 years and older) (91 visits) (loss of autonomy, bereaved and/or isolated)

Mental health files: 2 files (40 years and older) (15 visits) (BPD, schizophrenia, various traumas, disorganization)

Psychosocial follow-up files: 14 files (20 years and older) (104 visits) (emotional dependence, depression, burnout, violence and anger management, homelessness and substance abuse)

4. In order to prevent suicide, raise public awareness of the warning signs and resources available in distress situations.

Organize meetings once every three months with health workers from different sectors and people from the community for family caregivers in order to prepare intervention and training tools.

- OHC-HR (24 meetings)
- OHC and Director (10 meetings)
- Psychosocial team and Director (43 meetings)
- Psychosocial team with health workers (45 meetings)
- Meetings with the CIUSSS MCQ and the OHC (6 meetings)
- Healing committee (3 meetings)
- Carrés rouges (2 meetings)
- December 1, 2020 special meeting (Psychosocial team)
- Strategic plan meeting (November 4, 2020)
- Psychosocial team for the elderly (December 2, 2020)
- Psychosocial team and archivists meeting (December 16, 2020)
- Suicide prevention policy (3 meetings)
- Indigenous community wellness (3 meetings)





Participation in training courses:

- Pandemic protective equipment training (June 2, 2020)
- Psychosocial intervention - Civil security (June 3, 2020)
- Home intervention protocol (May 8, 2020)
- OFYS software
- Covid-19 and the health care environment
- Readings: Elder distress, Public health tools, home care recommendations, AFNQL deconfinement guide and update
- Training for healing committee (May 5, 2020)
- Harassment training
- Hand washing training

Telework configuration:

Software, emails, Ofys, organization of our offices to ensure confidentiality of records

Mental health protocol:

Reading of the CIUSSS mental health guide in order to understand their mental health service offer (Guichet accès Santé mentale), 1st, 2nd, 3rd and 4th line interventions.

Mental health protocol meetings with Linda, Nadia and André

Covid-19 questionnaire (Updated August 18, 2020)

7. Health workers will have the tools required to provide quality mental health care:

- Organize multidisciplinary team discussions
- Transfer of a file to Linda (1 file)
- Meeting with the Director, Mr. Vollant, and the Human Resources Officer, Mr. Charbonneau (May 4, 2020)
- Mental health meetings with health workers (André, Linda and Nadia)
- Case discussions with André, Linda and Nadia
- Case discussions with the home support coordinator, health workers, nurses, kinesiologist and others
- Mental health protocol meetings

STATISTICS

<u>Clientele as of March 31, 2021</u>	<u>Files</u>	<u>Age</u>	<u>Gender</u>
Elderly in loss of autonomy, bereaved and/or isolated	9 files	60 years and older	6 W-3M
Mental health	2 files	40 years and older	1 W-1M
Psychosocial follow-up	13 files	20 years and older	11 W-2M

Files currently handled:

Elderly (60 years and older, in loss of autonomy, isolated and/or bereaved): 9 files

Mental health: 40 years and older: 2 files

Psychosocial follow-up: 20 years and older: 13 files



ACTIVITY REPORT 2020 - 2021

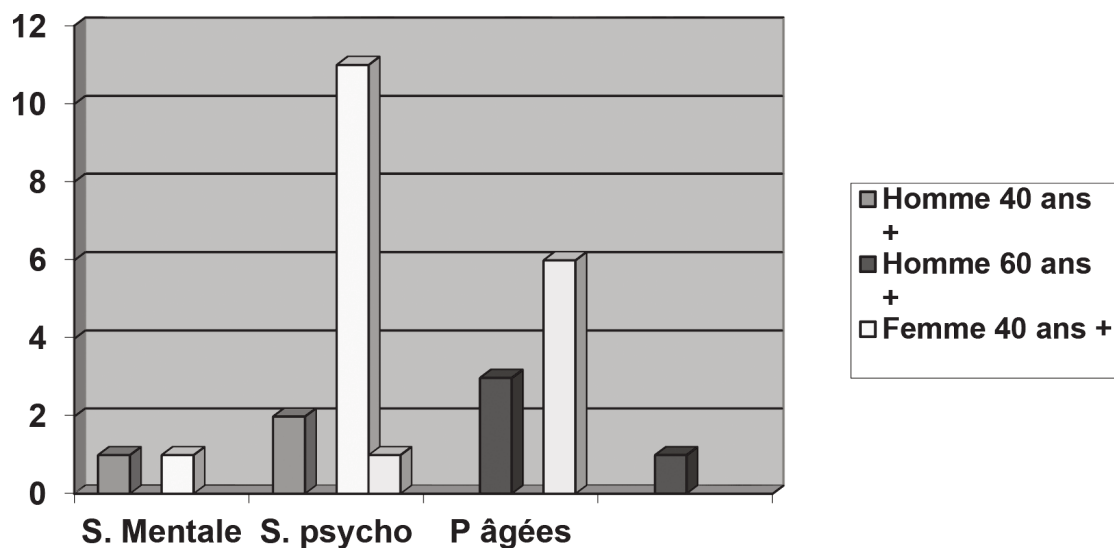
ODANAK HEALTH CENTRE



Team meetings from April 1, 2020 to March 31, 2021

Number

OHC team meeting:	10
Mental health meeting:	13
Case discussions:	120
Mental health training:	1
Archivists:	6
CIUSSS MCQ meeting:	6
Director and HR meeting:	1
Psychosocial meeting:	43
OHC-HR meeting:	24
Psychosocial meeting with health workers:	45



Danielle Lamirande

Social Work



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

SECTOR: Social work

Prepared by: Linda Blanchard

INTRODUCTION

This quarterly report outlines activities under the Social Work Program for the period April 1, 2020 to March 31, 2021.

OVERALL OBJECTIVE

SOCIAL WORKER, community well-being. The role of social workers is to support and restore the social functioning of the individual in order to promote their optimal development in interaction with their environment. To this end, they carry out an assessment, determine an intervention plan and ensure its implementation.

Social workers have a three-year university degree and are monitored by the Ordre des travailleurs sociaux et des thérapeutes conjugaux et familiaux du Québec. We distinguish ourselves by our specific approach, which consists in evaluating the social functioning of the person. Thus, the proposed interventions take into account the different aspects of the person's life and the means at his or her disposal to face his or her difficulties.

Provide mental health services

1. Allow the individual from the Odanak community with a diagnosis of a mental health issue to be followed up according to his or her needs.

Individual follow-up

Follow-up in person, telephone and Zoom, mental health 18-64 years of age (117 meetings)

Severe and persistent mental health cases

Anxiety disorders, borderline personality disorder

Require long-term follow-up for organizing their daily lives

Follow-up in person, telephone and Zoom, mental health 65 years and older (79 meetings)

Severe and persistent mental health cases. Anxiety disorders, borderline personality disorder

Follow-up in person, telephone and Zoom, psychosocial 18-64 years of age (35 meetings)

Psychosocial issues. Need support to overcome a difficult period in their lives

Follow-up in person, telephone and Zoom, psychosocial 65 years and older (12 meetings)

Psychosocial issues. Need support to overcome a difficult period in their lives

Accompaniment by a physician for a prescription renewal in Trois-Rivières. Mental health 65 years and older. (May 14, 2020)

Crisis intervention, mental health 65 years and older. Very isolated, needs regular support. Loss of interest in life. (5 meetings)

Intervention with the family of a mental health patient 18-64 years of age. Completely disorganized as a result of the pandemic. Parents don't know what to do. Need support. (5 hours)

Courtesy call 18-64 years old. (25 calls). Telephone follow-up of vulnerable persons during confinement



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ODANAK HEALTH CENTRE



Courtesy call 65 years and older. (52 calls). Telephone follow-up of vulnerable persons during confinement.

Psychosocial intervention 18-64 years of age. Follow-up of a person struggling with anxiety, client of the psychologist during her vacation. (1 meeting)

Psychosocial follow-up 18-64 years of age. Person experiencing health problems and needs assistance in finding a physician. (1 meeting)

Psychosocial follow-up 65 years and older. Person experiencing relationship issues. Needs to become more assertive. (2 meetings)

Psychosocial mental health follow-up 18-64 years of age. At the request of his sister, we met with him because he was suicidal and exhibited destructive behaviour. He does not want follow-up. Does not seem suicidal. (1 meeting)

Client request for a report to the Executive Director. Mental Health 18-64 years of age.

Physician accompaniment for pain and high blood pressure. Mental health 65 years and older. (October 14, 2020)

Follow-up with nurses on physician's recommendations for blood pressure. Mental health 65 years and older.

Follow-up with a pharmacist for medication renewals. Mental health 65 years and older.

Psychosocial intervention for family physician referral 18-64 years of age.

Assistance in filling out a form for old age pension. 18-64 years of age psychosocial.

Psychosocial emergency homelessness. Follow-up with the Health Centre Director. November 24 to 27, 2020. Mental health 18-64 years of age.

Mental health accompaniment 65 years and older. Nicolet podiatry clinic January 13, 2021.

Mental health accompaniment 65 years and older. Ophthalmologist in Sherbrooke on January 14, 2021.

Purchase ankle brace for mental health 65 years and older. Also change of ankle brace, see with Andréanne for new prescription.

Family therapy following parental separation.

Couple therapy, assisting individuals through a crisis.

Request for an autonomy evaluation with Nadia. Request from the family following a loss of mobility.

4. In order to prevent suicide, raise public awareness of the warning signs and resources available in distress situations.

Organize meetings once every three months with health workers from different sectors and people from the community for family caregivers in order to prepare intervention and training tools.

Odanak Health Centre and HR meetings (24 meetings)

Odanak Health Centre meetings with Director (10 meetings)





Psychosocial team meetings with Director (43 meetings)
Psychosocial team meetings with health workers (45 meetings)
CIUSSS meetings (6 meetings)
Healing committee meetings (3 meetings)
Carrés rouges meetings (2 meetings)
Special meeting on December 1, 2020 (psychosocial team)
Strategic plan meeting on November 4, 2020
Psychosocial committee for elderly on December 2, 2020
Meeting with the psychosocial team and archivists on December 16, 2020
Suicide policy meetings (3 meetings)
Community wellness meeting (3 meetings)

PARTICIPATION IN TRAINING COURSES

Protective equipment training (June 2, 2020)
Psychosocial intervention for civil security (June 3, 2020)
Home intervention protocol (May 8, 2020)
Ofys
Covid19 and the health care environment
Readings: Elder distress, public health tools, home care recommendation, AFNQL deconfinement guide and update.
Healing committee training (May 5, 2020)
Harassment training (2.5 hours) certification February 3, 2021.
Nurses' hand washing training

COMMUNITY SUPPORT

Creating capsules on anxiety and breathing (OHC Facebook page)
Virtual support group (OHC Facebook page).

Telework configuration

Software, email, ofys, organize office to ensure records confidentiality.
Mental health protocol
Reading of the CIUSSS mental health guide in order to understand their mental health service offer (Guichet accès Santé mentale), 1st, 2nd, 3rd and 4th line interventions.
Organize meetings to determine the relevance of offering services in the Odanak community (André, Danielle and Nadia).
Request statistics from archivists regarding individuals with a mental health diagnosis for the 18-64 and 65+ age groups.
Organize meetings to work on forms and diagnostic tools.
Draft the mental health protocol, the mental health policy and the task definition of the health workers of the Guichet accès Santé mentale.
Draft the annual report.
Covid-19 questionnaire (updated August 18, 2020)
Draft document to prepare for mental health protocol meetings.
Prepare workshop on stress and anxiety.
Draft suicide policy.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



7. Health workers will have the tools required to provide quality mental health care. Conduct multidisciplinary team discussions.

Meetings with André to resolve mental health file issues.
Transfer file to Danielle (1 file)
Meeting with Mr. Vollant and Jonathan Charbonneau (May 4, 2020)
Mental health meetings with André, Danielle
Collaboration with Andréanne for access to dental care information from a mental health file.
Case discussion with André, Danielle and Nadia.
Meetings with Danielle, case discussion.
Collaboration with Andréanne for access to family physician information and mental health statistics.
Request for mental health statistics from archivists.
Collaboration with archivist for podiatrist.
Collaboration with nurse for high blood pressure.
Collaboration with Nadia for loss of autonomy assessment.
Collaboration with archivist for ankle brace.
Collaboration with nurse for new prescription ankle brace and equipment.

STATISTICS

Appendix 1

Clientele March 31, 2021	Files	Clientele	Hours	Gender
Loss of autonomy	1	65 +	18	W
Psychosocial follow-up	1	65 +	15	W
Psychosocial follow-up	7	18-64	55	W
Mental health	6	18-64	170	W+M
Mental health	4	65 +	152	W
Suicide crisis	1	65 +	10	M

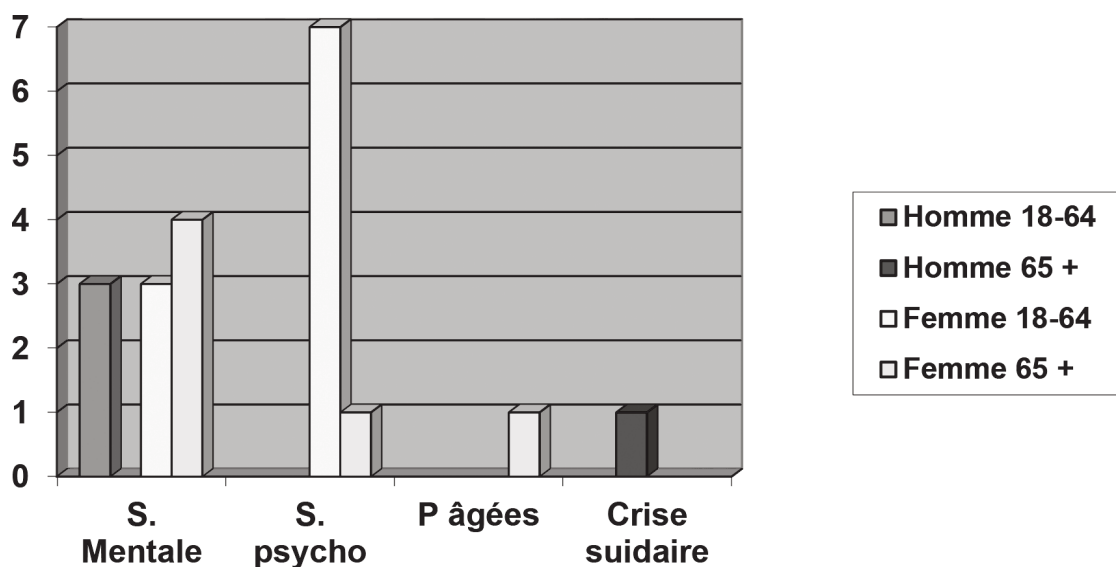
Files currently handled:

Person aged 65 and older with loss of autonomy: 1
Person 65 years and older in psychosocial follow-up (spouse's illness): 4
Person 18-64 years of age in psychosocial follow-up (separation, support for a trial, depression, personal issues): 4
Person aged 65 and older in mental health (anxiety disorders and borderline personality disorder): 3
Person 18-64 years of age mental health (borderline personality disorder and anxiety disorder): 6
Person 65 years and older psychosocial follow-up (relationship issues): 1
Person 18-64 years of age in psychosocial follow-up (separation, support for a trial, depression, personal issues)
Person 18-64 years of age mental health (borderline personality disorder and anxiety disorder): 6





	Number	Hours
Team meeting		
Nurses	5	4
OHC team meeting	10	27
Mental health	13	16
Case discussion	12	40
Mental health training	1	3
Archivist	6	6



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



Sector : Psychologist
By Anik Sioui, M.Ps.

The past year, marked by the pandemic, has been a period of adaptation and adjustment. It has brought vast challenges to individuals, families and the community. The mental and physical health of many of us has been shaken and we have had to be creative and resilient.

In April 2020, the Odanak Health Centre succeeded in having the special agreement between Health Canada, the community and me renewed for the fourth year and in September 2020, due to the increase in distress and demand for psychotherapy observed since the beginning of the pandemic, we received approval from Health Canada to add one day of psychotherapy per week. We have therefore gone from two days to three days per week dedicated to the Odanak community. We are proud to offer a culturally based psychotherapy service to the population of Odanak, including individual and family psychotherapy for adolescents aged 14 and over, adults and elders, as well as referral to other resources when necessary. Unfortunately, Health Canada's colonial criteria require us to offer psychotherapy exclusively to Odanak members with Indian status.

Psychotherapy is a treatment that aims at easing suffering or difficulties of a psychological nature. It can be addressed to anyone who wishes to make significant changes in their life in order to feel better. This can be done by bringing about changes in behaviour, emotions or habits, by helping the person to find answers to their questions, to make difficult choices, to understand and/or better live a difficult situation.

The most common issues over the past year have been: depression, anxiety disorders, self-esteem issues, bereavement, simple or complex trauma, love/relationship issues, family issues, work issues, eating disorders, existential crisis and emotional dependency. People from 15 to over 90 years of age have consulted me.

Here are my monthly follow-up statistics:

April	51	October	58
May	49	November	47
June	46	December	41
July	39	January	60
August	20	February	61
September	61	March	49

I had to adapt my practice and incorporate telepsychology through software such as Zoom or Skype and for some people, over the phone. The Health Centre also made a tablet available to people who did not have the technology to access telepsychology. This required considerable adjustment for all of us and I would like to thank all my clients for your patience and trust. Together we made it happen! Each of you has touched me with your unique colour and have taught me something important. Your humanity, strength and resilience have inspired me and I am deeply touched by your trust in me. I would also like to thank my colleagues at the Health Centre for your openness, professionalism and availability. You all have the well-being of the community at heart and it is a pleasure to work with you!

It appears we have made it through the most difficult part of the pandemic and that brings hope and dreams. Summer and the easing of health measures also lighten our minds and hearts. If things continue to evolve in this way, I will be able to return to Odanak in person early next fall. I look forward to seeing you in person and walking through your beautiful community again! Let's continue to be mindful of others, to offer a smile, a shoulder or an ear to our neighbour. These small gestures are precious and sometimes make all the difference. Wliwni, Tiawenhk, Mik8etc!

Anik Sioui
Psychologist



NNADAP PROGRAM

André Gill, addictions counsellor

Introduction

Odanak Health Centre (NNADAP program)

In most non-treaty communities, the federal government funds the *National Native Alcohol and Drug Abuse Program* (NNADAP), which is designed to support communities in their fight against alcohol, drug and solvent abuse.

NNADAP agents working in Quebec communities contribute in particular to the implementation of prevention activities, such as awareness campaigns, as well as intervention activities, such as discussion groups, individual meetings and school programs where there is a school in their community.

For example:

<ul style="list-style-type: none">• Support people through their rehabilitation from addiction (referral, appropriate individualized action plan, follow-up, etc.)	<ul style="list-style-type: none">• Lead activities on addictions• Promote the program, etc.
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Under this program, Health Canada funds six drug and alcohol abuse treatment centres open to male and female clients.

However, as is the case for the Quebec population as a whole, First Nations and Inuit members benefit from all health and social services offered in the Quebec network.

Strategic plan

Axis 4: Provide mental health services

1. Enable individuals from the Odanak community with a diagnosis of a mental health issue to be treated according to their needs.
2. Promote and support individuals/groups through any means, resources, attitudes or behaviours that can provide healthy alternatives to self-destructive behaviour for those affected by addictions.
3. Support individuals/groups, through any means/resource, attitude or behaviour that may offer people affected by addictions healthy alternatives to their self-destructive behaviour.
4. In order to prevent suicide, make the population aware of the warning signs and resources available in distress situations.
5. Establish and implement a mental health case assignment procedure.
6. Motivate clients to undertake a 28-day challenge to develop healthy lifestyle habits.
7. Health workers will have the tools to provide quality mental health care.
8. Establish a procedure for receiving, assessing and guiding Abenaki mental health clients.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



2020-2021 Annual report

Since September 2017, following a pilot project, the NNADAP program has focused on training in alternative approaches to intervention such as *therapeutic hypnosis* and *neurolinguistic programming*, commonly referred to as NLP. During the 2020-2021 fiscal year, I continued my training to obtain the NLP Master Practitioner degree. In December 2020, despite Covid-19, I was able to complete my training and receive my hypnotherapist degree.

What is therapeutic hypnosis?

Therapeutic hypnosis is a discipline that allows access to the unconscious resource pool of each individual. Thus, thanks to the many tools available to the practitioner, they become a companion in the process of change and learning sought by the person consulting them. You will discover more in this fact sheet about Ericksonian hypnosis, when it was created, when it is recommended, what are the benefits, how a typical session is conducted and who practices it.

Ericksonian hypnosis is one of the most influential and widespread branches of therapeutic hypnosis.

More specifically, it is highly respectful of the individual, as the language used by the practitioner is permissive. The practitioner is a good listener and adapts his or her style of speech and approach to the person he or she is receiving. They use metaphors, anecdotes and indirect suggestions to overcome resistance to change and let the person access his or her own resources to implement the desired changes.

Reference:

https://www.passeportsante.net/fr/Therapies/Guide/Fiche.aspx?doc=hypnose-ericksonienne_th

Hypnotic state

Hypnosis is an altered and natural state of consciousness. For example, almost everyone knows the expression “having your head in the clouds”. It is a good example of what it means to be in an altered state of consciousness. Some of you have had the experience of traveling and thinking, “Are we there already? I feel like time just flew by”. Or just not seeing time pass by when you're reading a book. These are all examples of altered states of consciousness, fairly close to self-hypnosis.

To be in a state of hypnosis, or to do hypnosis with a practitioner, is to intentionally reproduce this desired state of consciousness with an objective that varies according to the framework in question, i.e. relaxation, care, personal evolution, etc.

What is NLP?

Neurolinguistic programming, or NLP, is a method that allows us to change the way we act and behave. It is an original approach to human functioning. NLP could be defined as the art of personal and interpersonal excellence. It is essentially based on the observation of human behaviour. Its originality consists in being oriented on the “HOW” rather than on the “WHY”. NLP is a generative model of communication, learning and change.

This method is based on the connection between the neurological processes of our brain (neuro), our language (linguistics) and our behaviours such as our fears and beliefs (programming).





Programming

Throughout our existence, we program ourselves by putting in place repertoires of data composed of our way of thinking, feeling and behaving. We use these repertoires in different situations in our lives. As such, an analogy can be made with computer hardware: we all have a brain and a nervous system (Hardware); what changes are the programs (Software) we have to use this hardware. This is how each individual functions mentally.

Neuro

The ability to program ourselves is based on our neurological activity. It is because we have a brain and a nervous system that we are able to think, perceive our environment, select our behaviours and feel things. The procedures of NLP work directly affect our neurological organization.

Linguistics

Language structures and reflects the way we think. Indeed, a person's speech is rich in information about how they construct their life experiences. Grinder and Bandler, the founders of NLP, studied the relationship between language and thought and translated this knowledge into the practical field of communication. They then extended these notions to the study of non-verbal language, which is none other than NLP.

Reference: <https://icipnl.com/cest-quoi-la-pnl/>

Abenaki representative on the Wapan Centre Board of Directors

Since June 2016, I have assumed the position of Chair of the Wapan Centre Board of Directors. Our major purpose is to improve the well-being of our communities with respect to addictions. The Wapan Centre receives funds for 12 beds, but the ultimate goal over the next few years is to reach its maximum potential of 24 beds.

Since 2015, Wapan's main therapeutic approach is based on the 12 steps of Alcoholics Anonymous (Minnesota model) with the Native cultural approach. Since this change, the rate of satisfaction with the therapies has been on the rise. The clientele greatly appreciates the fact that they can explore some of their Native roots and put into practice what they have learned.

In the near future, it would be interesting to adapt a small part of the grounds of the Odanak Health Centre to offer certain cultural ceremonies under the tepee or shaputuan.

Maintaining the continuity of cultural activities for those who wish to continue their journey could be a way to keep our roots alive. Moreover, it could be an opportunity to broaden the scope of possible collaborations with other health workers.

Wapan clinical-cultural project

We are in the final phase of the project. A very important step, including the hiring of specialized detoxification staff, will be implemented in the fall of 2021.

In collaboration with a consultant, Mr. Pierre Picard of the firm Gripma, and a consulting physician, , in charge of a community care intervention team that he founded in January 2014. By making community care his flagship, this unconventional physician wants to reach out to society's most vulnerable people.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



Risk management committee representative (Wapan)

I sit on this committee as a Board representative. The risk management committee usually meets the day before Board meetings.

The person in charge reports all incidents and accidents that occurred during the quarter. We monitor each event and ensure the files are complete. There are a lot of discussions to identify permanent solutions to the issues. Subsequently, a report is presented to the Board of Directors to inform and to provide a follow-up and to ensure effective execution.

Regional addictions working group (RAWG)

The Regional Addictions Working Group (RAWG) brings together workers from various First Nations communities in Quebec, a Health Canada representative, as well as mental health and addictions counsellors and the Community Wellness Program representative from the FNQLHSSC.

The issue of addictions is very hard on First Nations communities in Quebec, and the situation has not improved much. We have been exploring various alternatives related to addictions. In addition, during our two annual meetings, we have met for one-day meetings to address these issues with workers and the treatment centre directors to identify the problems concerning certain requests, to facilitate admission requests, to modify or reframe admission criteria, etc. In the last meetings, the topics explored were addictions, of course, but also environmental factors, poverty, housing, etc.

- Addictions and social issues with negative consequences for the individual and family;
- Comorbidity, mental health and addiction issues;
- Increase in the type of addiction;
- More substances available;
- Increased gambling and cyber addiction.

Again this year, I attended only one working group meeting, the purpose of which was to provide assistance to NNADAP workers in Quebec. Worker support is the group's priority.

Continuing education in 2020-2021

Continuous training is a necessity nowadays. In order to respond adequately to the various problems of constantly growing addiction and comorbidity*, we need to find the tools that correspond to the growing needs to better assist our clientele.

Despite the pandemic, I continued with my training plans. In December 2020, I received my Therapeutic Hypnosis Practitioner Diploma, including the Neuro-Linguistic Programming Master Practitioner Diploma in August 2020. My trainings have a specific goal, which is to cover a larger field of intervention in helping relationships. The possibilities are numerous, encouraging and motivating.

* Comorbidity: ASSOCIATION OF TWO DISEASES, MENTAL OR PHYSICAL.

CULTURAL PROJECT OF AXIS 5 FROM THE AOC STRATEGIC PLAN

The pandemic has delayed several projects, including this one.





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

The cultural project was launched when the strategic plan of the Abenakis of Odanak Council was published and the “culture” section of Axis 5 will be carried out by the Health Centre. The project has evolved throughout the year thanks to discussions with our director, Mr. Jean Vollant. Increasingly including culture in our approach at the Health Centre is one of our priorities. Also at the request of the OHC Director and in collaboration with Ms. Raymonde Nolett, we have drafted and finalized the project on paper earlier this year (2021). The idea is to include Abenaki cultural capsules, lasting 15 minutes, at the beginning of future activities organized by the Health Centre. This project will result in two booklets (guides) created by resource persons from the community. A booklet will be created for the activity facilitator and another for the participants. For example, there will be capsules on the language, the pow-wow, the production of crafts and the economy.

AS A SECOND STEP, THIS CULTURAL GUIDE PROJECT COULD BE USED AS A BASIC TEACHING MANUAL FOR (FORMER) NEW EMPLOYEES, IN ORDER TO PROVIDE AS INFORMATION BASE ON ABENAKI CULTURE.

HELPING RELATIONSHIP (SUBSTANCE ABUSE, NLP AND HYPNOSIS) FOR ODANAK’S CLIENTELE 2019-2020

		COMMENTS
HELPING RELATIONSHIP INTERVENTIONS	NUMBER: 151	NLP IS CONDUCTED IN PERSON AND OFTEN BEFORE THERAPEUTIC HYPNOSIS. IT CAN ALSO BE ADDED TO A HYPNOSIS SESSION.
OTHER MEETINGS	NUMBER: 11	MEETINGS CANCELLED

CONTINUOUS TRAINING 2020-2021

		COMMENTS
OTHER PRACTICAL HYPNOSIS TRAINING	40 HOURS	2020
HYPNOSIS TRAINING	1,000 HOURS (OVER 3 YEARS - CUMULATIVE)	TRAINING COMPLETED, GRADUATED DECEMBER 4, 2020
LEVEL III MASTER PRACTITIONER TRAINING IN NEURO LINGUISTIC PROGRAMMING	300 HOURS 80 HOURS INTERNSHIP (NON-COMPULSORY)	TRAINING COMPLETED, GRADUATED AUGUST 30, 2020
HAND WASHING TRAINING	-----	TRAINING PROVIDED BY A NURSE
OFYS TRAINING	-----	TRAINING PROVIDED BY THE ARCHIVISTS. TRAINING GIVEN FOR TELEWORK CONFIDENTIALITY.
HARASSMENT TRAINING	3 HOURS	ATTESTATION
READINGS	110 HOURS	READING IN HELPING RELATIONSHIPS, NLP AND HYPNOSIS



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



OHC MEETINGS

		COMMENTS
ACCREDITATION MEETINGS	NUMBER: 1 NUMBER: 1	ACCREDITATION VISIT WITH OHC TEAM
OHC TEAM MEETING	NUMBER: 10	OHC TEAM MEETING WITH JEAN VOLLANT, HEALTH SERVICES DIRECTOR
TEAM MEETING WITH HR	NUMBER: 23	ATTENDED
SINGLE RECORD COMMITTEE MEETING	NUMBER: 3	OHC SINGLE RECORD COMMITTEE
QUALITY COMMITTEE MEETINGS	NUMBER: 4	OHC RISK AND QUALITY MANAGEMENT COMMITTEE
"CARRÉS ROUGES" MEETINGS	NUMBER: 4	ATTENDED TWO MEETINGS AND PREPARED THE DOCUMENT FOR THE PUBLIC
EXCHANGES WITH COLLEAGUES	NUMBER: 20	DISCUSSIONS ON VARIOUS WORK RELATED TOPICS
PSYCHOSOCIAL MEETINGS	NUMBER: 43	PSYCHOSOCIAL TEAM AND DIRECTOR
MEETING WITH MANAGEMENT	NUMBER: 10	MEETING WITH THE DIRECTOR (ZOOM AND PHONE)
MEETING WITH THE CIUSSS	NUMBER: 2	ATTENDED TWO MEETINGS
SUICIDE POLICY MEETINGS	NUMBER: 3	PSYCHOSOCIAL TEAM AND ARCHIVISTS
MEETINGS	NUMBER: 3	COMMUNITY WELLNESS (WITH C. BACON)
MENTAL HEALTH PROTOCOL MEETINGS	NUMBER: 10	DRAFTING OF THE MENTAL HEALTH PROTOCOL WITH THE PSYCHOSOCIAL TEAM
OTHER MEETINGS	NUMBER: 6	CASES DISCUSSIONS WITH THE MENTAL HEALTH TEAM
REPORTS ANNUAL REPORT	NUMBER: 4 NUMBER: 1	QUARTERLY AND ANNUAL REPORTS



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

WAPAN MEETINGS AND OTHER FOLLOW-UPS

		COMMENTS
WAPAN REHABILITATION CENTRE BOARD OF DIRECTORS MEETINGS	NUMBER: 1 NUMBER: 6 AGA: 1	- IN-PERSON BOARD MEETING - ZOOM - ANNUAL GENERAL ASSEMBLY
PRESIDENT'S TELEPHONE CALLS	NUMBER: 1	IN THE SPRING OF 2020, I MADE 22 CALLS TO WAPAN EMPLOYEES CONCERNING THE PANDEMIC
CONFERENCE CALLS	NUMBER: 2	WAPAN REHABILITATION CENTRE BOARD OF DIRECTORS CONFERENCE CALLS
INTERVIEWS	NUMBER: 5	I PARTICIPATED IN 3 JOB INTERVIEWS FOR THE POSITIONS OF CULTURAL ATTENDANT AND ADDICTIONS COUNSELLOR FOR THE WAPAN CENTRE
2020-2025 STRATEGIC PLAN MEETINGS	NUMBER: 3	FOLLOW-UP OF THE WAPAN REHABILITATION CENTRE'S 2020-2025 STRATEGIC WITH THE BOARD MEMBERS
WAPAN FOLLOW-UPS	NUMBER: 64	TITLES OF CHAIRMAN OF THE BOARD – DISCUSSIONS WITH WAPAN'S MANAGEMENT AND/OR BOARD OF DIRECTORS
ACCREDITATION CANADA MEETINGS	NUMBER: 3 NUMBER: 1	ATTENDED 4 ZOOM MEETINGS ONE MEETING WITH ACCREDITATION CANADA
NUMBER OF CONSULTATIONS WITH FRANCOPHONE CLIENTS FROM QUEBEC AT WAPAN	NUMBER: 326	THE NUMBER OF CONSULTATIONS INCLUDING ONLINE ZOOM SUPPORT, AA MEETINGS AND IN-PERSON THERAPY ADMISSIONS (62) IS 326 OVER THE 2020-2021 PERIOD
WAPAN REHABILITATION CENTRE CLINICAL-CULTURAL PROJECT	NUMBER: 4	IS HELD DURING WAPAN BOARD OF DIRECTOR MEETINGS

I am continuing my reflections and working on creating personal development tools related to NLP, basic self-hypnosis, basic mindfulness meditation and advanced NLP. I focus my work on motivation for change. Three important words: MOTIVATION, DEDICATION AND COMMITMENT.

André Gill,

Addictions Counsellor



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



SECTOR: Nutritionist Services
Prepared by: Marie-France David

Introduction

This document reports on the activities of the dietician-nutritionist for the period April 1, 2020 to March 31, 2021. The dietician position was at that time 40 hours per two weeks.

Upon my employer's request, I have been teleworking from the beginning of the ongoing pandemic, since mid-March 2020. I returned to work on-site the week of September 8, 2020, but a new outbreak forced my employer to ask me to return to telework in my home town (Quebec City) starting the week of September 24. In-person work did not resume until April 2021 (a period not covered in this report).

Based on the agreement with the employer, the dietician's mandates are as follows:

- Clinical dietician consultation and interdisciplinary intervention services (OLO program, palliative care, home care, etc.);
- Food security interventions in the community (Meals-on-wheels, game distribution to the most vulnerable);
- Participate, as needed, in interventions related to nutrition and the role of the nutritionist (e.g., Wellness study, palliative care committee, etc.).

Activities requiring clinical expertise are assigned to the dietician, while promotion and prevention activities are now part of the dietary technician's duties and mandates.

It should be noted that all of the dietician's duties were particularly suited to teleworking, as one-on-one consultations could be done very well by phone or video. Many clients (those living outside the community, those who work, and/or those with busy family lives and young children) found it easier to consult with the dietician via video than to visit the health centre. In addition, certain clients who preferred more discretion in their intervention (e.g., obesity with compulsive eating) greatly appreciated consulting the dietician anonymously by video or telephone. In addition, interventions that required the improvement of certain measures (e.g.: meals-on-wheels) were done more efficiently by telework, as it offered the concentration necessary for this type of project and team meetings could be easily conducted via video.





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

I - Statistics for individual nutrition counselling

Number of clients	Number of clients handled for regular follow-up	Number of individual consultations
Number of internal referrals (nurses, physician, kinesiologist, other professionals)	8	Video or phone consultations: 235
Number of clients already known who have resumed regular dietary follow-ups or self-referred	7	In-person consultations at the health centre: 1 (week of September 8, 2020)
Number of clients referred by an external physician	3	In-person consultations at home: 2 (week of September 8, 2020)
Number of clients already known in regular follow-ups	18	
Total	34 clients in regular follow-up in 2020-2021 Motives for stopping follow-ups: <ul style="list-style-type: none">- Discontinuation (2)- Resolved cases	Total number of consultations: 238

2019-2020 (238 consultations vs. 123), as new clients requiring regular follow-up were added to the regular clientele seen in dietetics. In addition, the number of telephone consultations was intensive given the increased monitoring and support we wanted to offer to the public given the increased risk of malnutrition, compulsive eating and food insecurity in a pandemic situation and due to isolation.

II – Other activities:

a) Community game distribution/hunting

Hunting was unsuccessful for the second year in a row. Small quantities of deer were brought to the health centre twice during the year, in mid-December 2020 and the last week of March 2021.

The procedure for screening people who are more vulnerable to food insecurity was applied. The distribution list was established according to the following steps:

- Contact all the health workers at the health centre to identify if any of their clients were in a food insecurity situation;
- Updated lists of social assistance and old age pension recipients, requested from Ms. Ann Landry at the Band Council. Ms. Landry and Ms. Eleanor Hoff were also contacted to determine if any of their clients were in a food insecurity situation. Two individuals were recommended following this process;
- Screening of individuals in a food insecurity situation using the updated list of community residents, in collaboration with Ms. Andréanne Gouin.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



Given the pandemic measures, both distributions took place directly in the homes of the people served.

The first distribution took place the second week of January 2021 to a few vulnerable families and meals-on-wheels clients who were 65 years of age and older (most of whom are vulnerable to food insecurity). 65 people were served.

The second distribution was made to other people with vulnerability and eligibility criteria (e.g., social assistance recipients, low-income single parents, etc.), who had not received venison during the first distribution. All deer were distributed. Distribution statistics will be discussed in the next report as this distribution took place at the beginning of the 2021-2022 fiscal year.

Butcher costs for these two deliveries of deer were respectively \$315 (3 small deer) and \$210 (2 small deer).

With management's approval, twenty pounds of ground deer remaining from the previous year (2019-2020) were given during the summer of 2020 to Mr. Jacques T. Watso. The remaining deer was in insufficient quantity to allow for distribution to the vulnerable population and was therefore used to prepare deer dishes for the Fall Pow Wow. The Pow Wow did not take place due to the pandemic, but the pies (which had been frozen) were used for the meals-on-wheels holiday menu.

b) Meals-on-wheels enhancement project

Due to the pandemic, management made the decision to suspend meals-on-wheels services in Odanak as of mid-March. A collaborative effort was initiated with the Centre d'action bénévole du Bas-Saint-François (CAB). The meals-on-wheels cook collaborated with the CAB to provide assistance. A loan of equipment was also made (refrigerator) to the Centre. The dietician, the dietary technician and the kinesiologist contacted the people who benefited from the Odanak meals-on-wheel service and other vulnerable people in the community in order to offer them the CAB meals-on-wheels services that were taking over. Meal orders were taken weekly and meals were delivered to willing Odanak residents until the week of September 24, 2020.

The week of September 24, 2020, Odanak meals-on-wheels resumed service. All regular clients of Odanak meals-on-wheel were then contacted for registration and the service was also offered to all those who had registered for CAB meals-on-wheels. In addition, an advertisement was published on the Facebook page and sent by mail. Approximately 50 people registered and this represents the maximum number of people that can be served by the Odanak meals-on-wheels (maximum production volume given the human resources and culinary equipment in place).

During the months of April to August, I worked with the cook in charge and the dietary technician to develop the necessary tools to improve the meals-on-wheels formula, now under the health centre's direction:

- Development of improved recipes and a new 6-week cyclical menu (fall menu);
- Collaboration with the dietary technician and the Health Canada inspection officer to develop a maintenance schedule for the community hall equipment and kitchen;





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

- Purchase of necessary cooking equipment (including several industrial grade items), in collaboration with the head cook;
- Establish an action plan for the repairs and installations required for the community hall kitchen and ensure its implementation with the public works team and the Band Council;
- Development of Covid-19 prevention and health and safety training, with the production of a summary booklet distributed to meals-on-wheels members. I provided the training to team members prior to the resumption of meals-on-wheels during the week of September 24.

In September, other meals-on-wheels activities resumed:

- Weekly meetings (in addition to working meetings with one or more team members) to adjust the menu and recipes and to resolve any problems with the operation of meals-on-wheels as a team;
- Evaluation of the satisfaction of the new meals-on-wheels formula with the clients served and with the team members (December 2020);
- Adjustment of the meals-on-wheels formula (work methods, menu, recipes, etc.) following the comments received in the evaluation. It should be noted that the majority of clients were very satisfied with the new formula. In addition, we no longer received comments regarding problems with diabetes management and difficulty digesting meals served by meals-on-wheels, as in the past. People have reported that they no longer have difficulty digesting and diabetic clients are happy to receive desserts that they can eat most of the time;
- In collaboration with the head cook, developed another 6-week cyclical menu (winter menu) with corresponding recipes. The menu was implemented in the winter of 2021;
- As planned, a cook's helper was hired to facilitate the cook's work and several efforts were made as a team to locate consistent delivery people throughout the year.

c) Meetings of the clinical consultation team and the OHC team

I attended the OHC team meetings (by Zoom) and the meetings facilitated by Jonathan Charbonneau every week I worked at the Health Centre (every other week), except when I was unable to take time off because of scheduled client follow-ups. In such cases, I would follow up with a work colleague.

d) OLO (Eggs-Milk-Oranges) program for low-income pregnant women

Working discussions took place with Isabelle Dupuis, nurse involved in the OLO program, in order to improve the OLO program. I contacted the Wendake Health Centre nutritionist, who also works on this program, and we exchanged on our ways of operating as well as on the improvements to be introduced.

OLO foods were slightly modified as a result of these discussions. Changes were made for fiscal year 2021-2022.

e) Nutrition article

A nutrition article addressing the content of healthy eating after the holidays has been written and submitted for publication in the community newspaper in January 2021.



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ODANAK HEALTH CENTRE



Due to health measures, the trainings taken were given online.
Here are the trainings I attended during the year:

Training by the Ordre professionnel des diététistes du Québec:

- a) Celiac disease;
- b) Gastrectomy, esophagectomy;
- c) Protein-energy malnutrition;
- d) FODMAP (for gastrointestinal problems);

Other online training:

- e) Binge eating disorder (several online courses).

Of course, in terms of training, the OFYS software, the OFYS telemedicine application, as well as the Zoom application (video consultations) had to be learned this year with the support of the archivists.

IV - Difficulties:

The pandemic situation caused a great deal of stress and required many adjustments during the year. The problems of using remote computer equipment and OFYS software, as well as having to request medical record information from the archivists instead of consulting the records on-site slowed down the work. In addition, contacting clients, scheduling appointments via video and telephone required a great deal of time and energy.

It was sometimes difficult to find enough time to complete all the tasks (oddly enough, being at home increased the use of the nutritionist's services), but the increase in the number of hours per week for fiscal year 2021-2022 has addressed this problem.

Conclusion

The disadvantages listed were resolved during the year. Once the new process was in place, video and telephone consultations proved to be convenient for many clients.

In addition, even though most of us are teleworking, the enhanced meals-on-wheels formula has been put in place. The fact that we are at home facilitated contact between team members and problems could be solved more easily and quickly this way.

The difficult pandemic situation allowed us to implement a new way of working that has proven to be very productive in many ways. 2021-2022 will allow us to consolidate what has been implemented.

Marie-France David

Nutritionist





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



SECTOR: Programs 339-364-369-389

Kinesiology consultation, Étincelle (6-12 year-olds) and Skweda (13-17 year-olds)

Prepared by:

Jessica Papineau (Kinesiologist), Marie-Pier Desnoyers (Dietary technician) and
Christina Béland-Racine (Kinesiologist)

INTRODUCTION

This quarterly report outlines the activities that occurred in the kinesiology consultation programs, Étincelle and Skweda, budget 339-364, 369 and 389 for the period April 1, 2020 through March 31, 2021.

PROGRAM OBJECTIVES

1. Increase the number of participants in physical activities offered by the Health Centre.
2. Provide follow-up (visits and training programs) for community members who are unable to travel but require physical activity to improve their health.
 - 2.1 Increase the number of home visits
 - 2.2 Implement the P.I.E.D. program
3. Develop physical activity clubs to increase weekly activity in the community
4. Promote the *GYM URBAIN*
 - 4.1 Use of the urban gym (Gym Urbain) in the different groups so that the community is familiar with how it works in order to use it for their own purposes.
5. Encourage the practice of healthy habits and activities.
6. Encourage the Odanak community to consume more fruits and vegetables, as well as increase their knowledge about nutrition.
7. Encourage people to prepare their own meals more often.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



COMMITTEE | WORKING GROUP | ROUNDTABLE | ETC. MANAGED
BY THE ORGANIZATION | COUNCIL | CORPORATION | TRIBAL COUNCIL

- AD HOC INFORMATION OR CONSULTATION MEETINGS VIA ZOOM – ONGOING FUNDING APPLICATIONS
- Funding program via Zoom – youth outreach
- ELDERS CHALLENGE VIA ZOOM
- “STANLEY VOLLANT” WALK VIA ZOOM
- VIACTIVE TELEPHONE MEETING
- GRAND PORTAGE VIA ZOOM
- NEW HORIZONS VIA ZOOM (INFRASTRUCTURE FUNDING FOR THE KCHIAIK HALL)
- FNCFS VIRTUAL BASKETS FOR 5-12 YEAR-OLDS VIA ZOOM
- POSITION SUPERVISOR/LIFEGUARD VIA ZOOM

ORGANIZATION COMMITTEE FOR VARIOUS PROJECTS

- COMMUNITY FOCUS COMMITTEE
- kinesiology committee, together step by step (ensemble, pas à pas)
- MEALS-ON-WHEELS COMMITTEE
- FIELD HEALING COMMITTEE
- KIZOS HALL COMMITTEE
- YOUTH SPACE (ESPACE JEUNESSE) COMMITTEE
- RISK AND QUALITY MANAGEMENT COMMITTEE
- WINTER SOLSTICE ORGANIZING COMMITTEE
- SCHOOL BREAK ORGANIZING COMMITTEE

TEAM MEETINGS (VIRTUAL ON IN-PERSON)

- HUMAN RESOURCES DIRECTOR AND OHC TEAM
- meals-on-wheels team
- OHC TEAM
- KINESIOLOGIST / NUTRITIONIST TEAM (364-369-339-389)
- STRATEGIC PLAN
- WELLNESS STUDY

REGIONAL FORUM OR SPECIFIC TRAINING

Marie-Pier:

- A healthy, harassment-free work environment
- Diabetes and ketogenic diet
- Type 1 diabetes, celiac disease
- Emerging diets and ethics
- Weight: obesity and grossophobia





Jessica:

- A healthy, harassment-free work environment
- Chronic pain webinar
- Hand washing training
- Workplace first aid training
- FNQLHSSC webinar « Être un bon leader du sport et des loisirs en période d'incertitude »
- Physical literacy: an innovative concept for children's preventive health
- Become a motivational leader for your clients
- Conservative approach to abdominal diastasis - Level 1

Christina:

- Virtual training on teleconsultation (May)
- Training 25h physical activity in the workplace (June-July)
- Training on nutrition for athletes and sports, popular trends and supplements
- Training on specific exercises for the lower limbs
- Training on specific exercises for the back
- Spinal stenosis training
- Hand washing training
- Workplace harassment training
- Workplace first aid training
- Training on sport leadership in times of pandemic
- Training « Existe-t-il une meilleure façon de périodiser l'entraînement ? »
- Shoulder optimization training for prehab and performance

PUBLICATIONS AND DEVELOPMENT OF TOOLS

- All advertisements related to our activities were posted on Marie-Pier's, Jessica's, and Christina's OHC Facebook pages (for the most part, as well as by mail for activities involving elders).
- WIXX platform document
- Snakes/ladders and exercises
- Sharing and explaining applications and training videos
- Sharing of informative texts on physical activity (physical activity has no age, physical activity for mental health, the benefits of walking, explanatory sheet from the virtual platform "Alimentarium")
- Nutrition tips during the pandemic: menu development, food waste, etc. (Facebook)
- Publication of 5 tips for a successful bike ride as well as the green map of bike trails in Quebec
- Engage the community in the North American Indigenous Virtual Games, walk/run, soccer, fitness, quickstick (lacrosse) challenge, baseball/softball challenge
- Dissemination of a 15-minute home workout program accessible to all
- 12 capsules shared on running techniques
- Sharing on Facebook and directly to families (in a joint basket with FNCFS) from the *Alimentarium* platform
- Publication of active breaks: being active in a sitting position.
- Publication of Santé mentale au Québec "L'essentiel c'est de bouger"
- Publication of sample activities to be completed in 10 minutes
- Publication "Mise sur ce que ton corps peut faire, pas ce qu'il a l'air"
- Publication on pre- and post-natal training resources (Bougeotte and Placotine blog)



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



- Publication of a parent-child exercise circuit
- Fillactive release training publication
- Publication for elders via mailing “On ne vous laisse pas tomber”
- Publication “Des athlètes canadiens de haut niveau font la promotion de la littératie physique pour les enfants”
- Publication of chair yoga exercises
- Publications related to the 2021 snowman contest
- Publications related to the 2021 Carnival
- Publication of PA online resources for 0-5 year-olds:
<https://www.youtube.com/watch?v=Eyo5sUGpMNQ>
- Publications related to the 2021 school break
- Publications of articles related to healthy eating
- Publication of simple and nutritious recipes

THEME DAYS (EXAMPLE: NATIONAL CHILD DAY, BREAST CANCER, HIV/AIDS, FAMILY WEEK, ETC.)

OTHER ACTIVITIES

- Saint-François meals-on-wheels
- Request for funding for company-based physical activity in 2020 (denied)
- Request for funding for sports for social development, health improvement (granted)
- Request for funding “Sport for Social Development in Indigenous Communities” (Skatepark project) (denied).
- Participation in the new infrastructure - Aln8nbawai hall
- Participation in the development of the multi-sensory hall 0-12 year-olds
- Participation in the development of the Youth Space (Espace Jeunesse) 13-17 year-olds (interior and exterior, skatepark)
- Participation in the development of the BETO hall
- Participation in the development of the Kisos hall
- Participation in the development of the Youth Space (Espace Jeunesse) 13-17 year-olds (interior and exterior, skatepark)
- Preparation of questions for the Wellness study
- Related tasks (meals-on-wheels):
 - 1) Invoicing documents
 - 2) Sheets for deliverers (invoice)
 - 3) Drawing of gift certificates
 - 4) Posting of the billing notice on Facebook
 - 5) Research and purchase of recipes (low sodium Berthelet broth)
 - 6) Sheets for deliverers (invoice)
 - 7) Notice on Facebook for hiring deliverers

DIFFICULTIES

- Monitoring participation rates for certain activities due to virtual activities due to the pandemic.
- Virtual fitness assessment: very difficult to see full movement, unable to do full assessment.
- Development of physical activities during times of pandemic and summer vacation.
- Organization of activities during the pandemic.





SUMMARY:

With the current pandemic, in-person group activities have become impossible until August 2020. Thereafter, a few supervised activities in a "family bubble" (mushroom picking, treasure hunts, boxing, winter solstice, snowman contest, carnival, sub-zero walk) were able to be held and this seemed to be very much appreciated by the population. Some activities such as Zumba and yoga classes could be done virtually, via Zoom. This was less appreciated by the population since what was missing was the presence of others. However, they appreciated being able to exercise in spite of the circumstances.

Given the circumstances, it was therefore impossible for us to use the Urban Gym and the community garden in 2020.

Following the survey sent to Espace Jeunesse last year, yoga emerged as an activity that 12-17 year-olds wanted to try and it proved to be a winner during a class on the banks of the Saint-François River in September 2020 (class allowed with a distance of 2 metres). Activity to be repeated.

The number of individual consultations at home and at the OHC continues to increase and by having two kinesiologists on site, it reduces the wait time for new consultations and allows more people to benefit from the services.

The current pandemic has caused many changes in planning and we have had to reinvent ourselves with the means at our disposal, from our home.

Several capsules, challenges and contests were published on the individual Facebook pages of Marie-Pier Desnoyers, Jessica Papineau and Christina Béland-Racine as well as on the health centre's Facebook page, thus encouraging people to adopt healthy lifestyle habits (diet and physical activity). The population participates mainly when there are challenges and participation prizes involved.



ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE



INTRODUCTION

This annual report outlines the activities of the FNHS Program for the period April 1, 2020 to March 30, 2021.

OVERALL OBJECTIVE

Promote the child's overall development

PROGRAM OBJECTIVES

Develop children's sense of belonging to their culture

COMMITTEE | WORKING GROUP | ROUNDTABLE, ETC. MANAGED BY THE ORGANIZATION | COUNCIL | CORPORATION | TRIBAL COUNCIL

Not applicable since I am not part of any committee in the FNHS program

FNCFS, FIXED CONTRIBUTION AGREEMENT, TRANSITIONAL : None

COMMUNITY SUPPORT

REGIONAL FORUM OR SPECIFIC TRAININGS : None this year

PARTICIPATION IN SEMINARS/CONFERENCES/TRAINING COURSES : None

PUBLICATIONS AND DEVELOPMENT OF TOOLS

No publications by mail; I am in person with the children.

THEME DAYS (EXAMPLE: NATIONAL CHILD DAY, BREAST CANCER, HIV-AIDS, FAMILY WEEK, ETC.)

- Winter Carnival in collaboration with the OAC, FNCFS and the Municipality of Pierreville (snowshoeing on the Tolba trail, sliding, bonfire during the whole weekend, etc.)
- Maple sugar period
- Toddler week (walking in the community, song and dance day, etc.)

PUBLICATIONS (EXAMPLES: NEWSLETTERS, PAMPHLETS, BROCHURES, ETC.)

Monthly calendar of activities

OTHER ACTIVITIES

- Daily recreational, creative and cultural activities, outing to the Musée des Abénakis, traditional basket-making activity
- Tree planting in collaboration with the Odanak Environment and Land Office
- Visit to the Ecocentre





ACTIVITY REPORT 2020 - 2021

ODANAK HEALTH CENTRE

DIFFICULTIES : None

STATISTIQUES : ·

20 children enrolled: 10 boys, 10 girls

· Participation: approximately 90 %

CONCLUSION/CHALLENGES/2021-2022 OHC MANAGEMENT PROJECTS

CONCLUSION

In 2020-2021, the Odanak Integrated Health Centre has continued the momentum it started two years ago. Many development projects have been completed and others are in the process of being completed. This annual management report highlights the colossal work accomplished by all the actors of the organization whose objective remains the same, namely to ensure quality, accessible and safe care and services to the Abenaki population of Odanak.

During the past year, many projects have been initiated, mainly in the area of mental health and support for the autonomy of the elderly, in collaboration with the Grand Conseil de la Nation Waban-Aki. Budgets from the FNCFS department and the \$20,000 funding program from the Fonds d'urgence Boufférécup have, as a result, made it possible to begin the meals-on-wheels service.

CHALLENGES FOR 2021-2022

- 1- Maintain Accreditation Canada results;
- 2- Recruit a physician for Odanak;
- 3- Continuity of services offered to the population regarding psychosocial services including mental health, suicide prevention, domestic violence, etc.;
- 4- Prepare the future management of the Odanak Health Centre;
- 5- Review the work organization of the Odanak Health Centre;
- 6- Maintain the spirit of partnership with external organizations such as the CIUSSSMCQ, the FNQLHSSC, the FNCFS, the Wôlinak Health Centre, etc.;
- 7- Cooperation agreement between the Odanak Health Centre and the Pierreville FMG;
- 8- Partnership with the shelter for women fleeing domestic violence;
- 9- Follow-up of the 2019-2024 strategic plan;
- 10- Update of the emergency measures plan;
- 11- Update of the 2021-2025 Community Health Plan;
- 12- Update of the 2019-2024 strategic plan;
- 13- Succession plan: FNHS program educator, addictions counsellor, etc.

2021-2022 PROJECTS

- 1- OHC archives expansion project
- 2- Alnôbaiwi Hall renovation project
- 3- Water play park project in Odanak
- 4- History of the Odanak Health Centre
- 5- Implement cultural and holistic activities for the Odanak clientele
- 6- Acquisition of the former BETO office / Kinesiology consultation room and training facility project
- 7- Resume collective kitchens

Raymonde Nolett



Summary financial statements of the

Odanak Band Council

March 31, 2021

Odanak Band Council

March 31, 2021

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Independent auditor's report on the summary financial statements

To the members of
Odanak Band Council

The accompanying summary financial statements, which comprise the summary statement of financial position as at March 31, 2021 and the summary statements of revenues and expenses, surplus under I.S.C. rules, revenues and expenses, surplus (deficit) under I.S.C. rules and fund balances - by department and segment information and the summary statement of change in net financial assets for the year then ended, and a summary of significant accounting policies and other explanatory information, are derived from the audited financial statements of Odanak Band Council for the year ended March 31, 2021. We expressed a qualified audit opinion on these financial statements in our report dated July 22, 2021. These financial statements, and the summary financial statements, do not reflect the effects of events that occurred subsequent to the date of our report on these financial statements.

The summary financial statements do not contain all the disclosures required by Canadian public sector accounting standards. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of Odanak Band Council.

Opinion

In our opinion, the summary financial statements derived from the audited financial statements of Odanak Band Council for the year ended March 31, 2021 are a fair summary of these financial statements, based on criteria described in Note 1. However, the summary financial statements contain an anomaly equivalent to the audited financial statements of Odanak Band Council for the year ended on March 31, 2021.

The anomaly contained in the audited financial statements is described in our qualified opinion formulated in our report dated of July 22, 2021. Our qualified opinion is based on the fact that the Odanak Band Council did not consolidate Development Corporation Odanak Inc. The investment has been accounted for by the modified equity method. According to the Canadian accounting standards for the public sector, this society should have been considered as a government unit and to be on the financial statements because it does not answer all the characteristics of a government business enterprise. Had Development Corporation Odanak Inc. been consolidated, many elements in the financial statements would have been affected. The effects of the non-consolidation have not been determined. The predecessor's audit opinion on the audited financial statements for the year ended March 31, 2020 was modified because of the effect of this departure from Canadian accounting standards for the public sector.

Our qualified opinion indicates that, except for the effect of the matter described, the financial statements present fairly, in all material respects, the financial position of the Odanak Band Council as at March 31, 2021 and the results of its activities, the variation of its net financial assets and its cash flows for the year then ended in accordance to the Canadian accounting standards for the public sector.

Observation

Without modifying our opinion, we draw attention on the fact that Odanak Band Council includes in its financial statements certain financial information that are not required upon the Canadian public sector accounting standards. These informations, established in conformity with Indigenous Services Canada, are the summary statement of surplus under I.S.C. rules.

Other matter – Predecessor Practitioner's Report

The summary financial statements for the year ended March 31, 2020 were audited by another practitioner who expressed an opinion on those summary financial statements on November 4, 2020.

Management's responsibility for the summary financial statements

Management is responsible for the preparation of a summary of the audited financial statements based on criteria described in Note 1.

Auditor's responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to report on summary financial statements".

¹

MNP LLP

July 22, 2021

¹ CPA auditor, CA, public accountancy permit No. 122666

Odanak Band Council

Summary statement of revenues and expenses

Year ended March 31, 2021

	2021	2020
	\$	\$
Revenues	14,050,320	11,007,104
Expenses	10,547,629	8,980,526
Surplus	3,502,691	2,026,578

The accompanying notes are an integral part of the summary financial statements.

Odanak Band Council

Summary statement of surplus under I.S.C. rules

Year ended March 31, 2021

	2021	2020
	\$	\$
Surplus	3,502,691	2,026,578
Reconciliation of I.S.C.		
Fixed assets		
Additions of fixed assets	(3,145,913)	(1,708,380)
Depreciation of fixed assets	918,197	909,195
(Gain) lost on disposal	(53,647)	149,627
Disposal of fixed assets	66,500	2,300
	(2,214,863)	(647,258)
Financing		
Repayment of long-term receivables	70,122	66,215
Product of long-term receivables	(126,824)	-
Repayment of long-term debt	(658,065)	(606,706)
Product of long-term debt	555,427	246,782
	(159,340)	(293,709)
Allocation		
Various reserves	(135,415)	(90,332)
	(2,509,618)	(1,031,299)
Surplus under I.S.C. rules	993,073	995,279

The accompanying notes are an integral part of the summary financial statements.

Odanak Band Council

Summary statements of revenues and expenses, surplus (deficit) under I.S.C. rules and fund balances - by department and segment information

Year ended March 31, 2021

Program, nature of funding and service number	Description	Revenues \$	Expenses \$	Surplus (deficit) \$	Reconciliation under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules - I.S.C. services \$	Surplus (deficit) under I.S.C. rules - services other than I.S.C. \$	Unrestricted accumulated surplus March 31, 2020 \$	Allocation 2020-2021 \$	Unspent amount as at March 31, 2021 \$	Unrestricted accumulated surplus March 31, 2021 - Services other than I.S.C. \$	Total unrestricted accumulated surplus March 31, 2021 \$
<u>I.S.C. SERVICES</u>													
COMMUNITY ACTIVITIES													
<u>Fixed contribution</u>													
Q3OC-001	438 Program - Waste Management Infrastructures: Education, Training and Capacity Building	9,625	9,625	-	-	-	-	-	-	-	-	-	-
ADMINISTRATION													
<u>Block contribution</u>													
Q31F-003	900 and 937 Program - Indian Government Support 920, 950 and 960 Special Projects 931 Project - Modernization of the Computer Network	1,347,714 10,571 -	1,160,252 64,192 -	187,462 (53,621) -	- - (77,914)	187,462 (53,621) (77,914)	(611,951) (64,192) (77,914)	799,413 10,571 -	(163,888) (846,203) (41,849)	- - -	(611,951) (64,192) (77,914)	635,525 (835,632) (41,849)	23,574 (899,824) (119,763)
<u>Fixed contribution</u>													
Q31V-004	913 Program - RPC/RRQ and Private Pension Plans - Employer Contributions First Nations	17,264	17,264	-	-	-	-	-	-	-	-	-	-
Q31U-003	915 Program - Band Employee Benefits - Administrative and Employer Contributions to Benefit Plans not Covered by the Law	601	601	-	-	-	-	-	-	-	-	-	-
(Q32K-001)	922 and 925 Program - Professional and Institutional Development: Human Resources Management - Updating of the Employees Manual and Implementing an Occupational Health and Safety Prevention Program	-	-	-	-	-	-	-	(1,084)	-	-	(1,084)	(1,084)
Q32J-001	932 Program - Professional and Institutional Development: Human Resources Management - Improvement of Financial Processes for FMB Accreditation	-	-	-	-	-	-	-	-	-	-	-	-
<u>Flexible contribution</u>													
(NG1J-001)	921 Program - Capacity Building in Governance in Planning and Risk Management - Development of an Operational Planning	-	-	-	-	-	-	-	-	-	-	-	-
		1,376,150	1,242,309	133,841	(77,914)	55,927	(754,057)	809,984	(1,053,024)	-	(754,057)	(243,040)	(997,097)
ECONOMIC DEVELOPMENT													
<u>Fixed contribution</u>													
(NT91-001)	760 Program - Community Readiness and Opportunities Planning (CROP) - Major Projects-Industrial Park Infrastructures	-	6,636	(6,636)	(24,483)	(31,119)	(31,119)	-	(32,683)	-	(31,119)	(32,683)	(63,802)
SOCIAL DEVELOPMENT													
<u>Block contribution</u>													
Q29T-002	715 Program - Income Assistance 160 Project - Day Camp	949,312 -	291,025 -	658,287 -	(4,360) -	653,927 -	653,927 -	- -	3,935,270 (48,454)	- -	653,927 -	3,935,270 (48,454)	4,589,197 (48,454)
<u>Fixed contribution</u>													
Q24A-001	908 Program - Cultural and Educational Centers	23,209	23,209	-	-	-	-	-	(44,304)	-	-	(44,304)	(44,304)
Q2AF-001													
Q2AF-002	996 Program - Income Assistance - Service Delivery (COVID-19)	13,043	13,043	-	-	-	-	-	-	-	-	-	-
<u>Flexible contribution</u>													
Q2D0-002	349 Program - Prevention Programs - Family Violence	3,791	3,791	-	-	-	-	-	(5,376)	-	-	(5,376)	(5,376)
Q29W-001													
Q29W-002	997 Program - Income Assistance - Basic Needs (COVID-19)	14,560	14,560	-	-	-	-	-	-	-	-	-	-
		1,003,915	345,628	658,287	(4,360)	653,927	653,927	-	3,837,136	-	653,927	3,837,136	4,491,063

Odanak Band Council

Summary statements of revenues and expenses, surplus (deficit) under I.S.C. rules and fund balances - by department and segment information

Year ended March 31, 2021

Program, nature of funding and service number	Description	Revenues \$	Expenses \$	Surplus (deficit) \$	Reconciliation under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules - I.S.C. services \$	Surplus (deficit) under I.S.C. rules - services other than I.S.C. \$	Unrestricted accumulated surplus March 31, 2020 \$	Allocation 2020-2021 \$	Unspent amount as at March 31, 2021 \$	Unrestricted accumulated surplus March 31, 2021 - Services other than I.S.C. \$	Total unrestricted accumulated surplus March 31, 2021 \$
EDUCATION													
<u>Block contribution</u>													
Q24C-002	600 and 620												
Q24E-001	600 and 620												
Q290-002	670 and 675												
		640,101	241,882	398,219	(12,500)	385,719	385,719	-	607,381	-	385,719	607,381	993,100
		1,873,038	1,455,487	417,551	-	417,551	417,551	-	3,826,064	-	417,551	3,826,064	4,243,615
<u>Fixed contribution</u>													
Q29A-001	679												
		226,529	226,529	-	-	-	-	-	-	-	-	-	-
		2,739,668	1,923,898	815,770	(12,500)	803,270	803,270	-	4,433,445	-	803,270	4,433,445	5,236,715
LAND, INCOME AND TRUST													
<u>Fixed contribution</u>													
Q3KU-002	420												
Q3KU-003	420												
(NT7Q-001)	432												
		47,349	44,339	3,010	(3,010)	-	-	-	(141,422)	-	-	(141,422)	(141,422)
		-	-	-	-	-	-	-	-	-	-	-	-
		47,349	44,339	3,010	(3,010)	-	-	-	(141,422)	-	-	(141,422)	(141,422)
COMMUNITY INFRASTRUCTURE													
<u>Block contribution</u>													
Q34R-002	155, 511, 700 and 710												
Q34S-003	700												
Q387-003	804												
Q3AP-003	700												
Q3AQ-003	700												
		799,956	737,977	61,979	(276,064)	(214,085)	(265,990)	51,905	(1,247,466)	-	(265,990)	(1,195,561)	(1,461,551)
		-	-	-	(81,056)	(81,056)	(81,056)	-	-	-	(81,056)	-	(81,056)
		-	-	-	-	-	-	-	(24,403)	-	-	(24,403)	(24,403)
		-	-	-	(9,075)	(9,075)	(9,075)	-	-	-	(9,075)	-	(9,075)
		-	-	-	(15,711)	(15,711)	-	(15,711)	-	-	-	(15,711)	(15,711)
		-	-	-	(23,966)	(23,966)	(23,966)	-	(33,331)	-	(23,966)	(33,331)	(57,297)
		-	1,148	(1,148)	(49,418)	(50,566)	(50,566)	-	-	-	(50,566)	-	(50,566)
		-	1,534	(1,534)	(54,137)	(55,671)	(55,671)	-	-	-	(55,671)	-	(55,671)
		-	-	-	(1,340)	(1,340)	(1,340)	-	(2,357)	-	(1,340)	(2,357)	(3,697)
<u>Fixed contribution</u>													
(NTVF-001)	458												
(QZIA-002)													
(QZIA-003)	468												
		4,381	-	4,381	(4,381)	-	-	-	(1,606)	-	-	(1,606)	(1,606)
Q3OG-001	448												
(Q3B2-001)	706												
		164,160	159,239	4,921	(4,921)	-	-	-	-	-	-	-	-
		-	-	-	-	-	-	-	(23,942)	-	-	(23,942)	(23,942)
(NTM6-001)	708												
Q3B3-001	714												
Q35B-002	720												
Q35B-002	720												
Q3BH-002	720												
		54,126	54,126	-	-	-	-	-	-	-	-	-	-
Q3B2-001	726												
Q3R5-001	995												
		1,662,277	2,360	1,659,917	(1,078,452)	581,465	415,929	165,536	(581,465)	-	415,929	(415,929)	-
		29,456	29,456	-	-	-	-	-	-	-	-	-	-

Odanak Band Council

Summary statements of revenues and expenses, surplus (deficit) under I.S.C. rules and fund balances - by department and segment information

Year ended March 31, 2021

Program, nature of funding and service number	Description	Revenues \$	Expenses \$	Surplus (deficit) \$	Reconciliation under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules - I.S.C. services \$	Surplus (deficit) under I.S.C. rules - services other than I.S.C. \$	Unrestricted accumulated surplus March 31, 2020 \$	Allocation 2020-2021 \$	Unspent amount as at March 31, 2021 \$	Unrestricted accumulated surplus March 31, 2021 - Services other than I.S.C. \$	Total unrestricted accumulated surplus March 31, 2021 \$	
Flexible contribution														
(Q3FO-002)	923	Program - Community's Emergency Plan	-	-	-	-	-	-	(1,351)	-	-	(1,351)	(1,351)	
Q3FP-001		Program - Intervention - Indigenous Community Support Fund (COVID-19)												
Q3SJ-001	998	Program - Intervention During Power Outage from the 1st till the 4th of November 2019	169,083	169,083	-	-	-	-	(4,835)	-	-	(4,835)	(4,835)	
Q3FP-002	999		6,216	-	6,216	-	6,216	-	(6,216)	-	-	-	-	
			2,896,971	1,154,923	1,742,048	(1,633,521)	108,527	(99,419)	207,946	(2,092,496)	-	(99,419)	(1,884,550)	(1,983,969)
INDIAN REGISTRATION														
Block contribution														
Q036-003	685	Program - Core Funding of Lands and Trust Services - Indian Registration	24,441	11,871	12,570	-	12,570	12,570	-	(85,303)	-	12,570	(85,303)	(72,733)
NEGOCIATIONS														
Fixed contribution														
QZ9Q-002	903	Program - Specific Claims Establishment: Specific Claims Tribunal (Surrender 38 lots St-François (1858-1884))	76,287	274,406	(198,119)	-	(198,119)	(198,119)	-	(124,968)	-	(198,119)	(124,968)	(323,087)
QZ9Q-001	904	Program - Specific Claims Establishment: Specific Claims Tribunal - (Seigneurial System (1662-1863))	79,108	501,911	(422,803)	-	(422,803)	(422,803)	-	(227,723)	-	(422,803)	(227,723)	(650,526)
			155,395	776,317	(620,922)	-	(620,922)	(620,922)	-	(352,691)	-	(620,922)	(352,691)	(973,613)
Balance of funds as at March 31, 2020			-	-	-	-	-	-	(1,391,254)	-	111,153	(1,502,407)	(1,391,254)	
Total fund balance as at March 31, 2020 (In 10-year agreement)			8,253,514	5,515,546	2,737,968	(1,755,788)	982,180	(35,750)	1,017,930	3,121,708	-	75,403	4,028,485	4,103,888
SERVICES - OTHER THAN I.S.C.														
COMMUNITY ACTIVITIES														
	801	Abenakis Police Services	948,803	893,533	55,270	(55,270)	-	-	-	(185,966)	-	-	(185,966)	(185,966)
	991	Abenakis Police Services - COVID-19	134,607	134,607	-	-	-	-	-	-	-	-	-	-
	430	Project - Endangered Species	13,138	13,138	-	-	-	-	-	(49,117)	-	-	(49,117)	(49,117)
	416, 433, 434, 436, 437 and 462	Project - Consultation Under the Aboriginal Initiatives Fund and Other Projects	74,426	50,122	24,304	(25,256)	(952)	-	(952)	45,454	-	-	44,502	44,502
	428	Project - Development at 2nd Marsh (Perch)	-	-	-	-	-	-	-	-	-	-	-	-
	460	Project - Striped Bass	51,499	43,307	8,192	(8,192)	-	-	-	-	-	-	-	-
			1,222,473	1,134,707	87,766	(88,718)	(952)	-	(952)	(189,629)	-	-	(190,581)	(190,581)
ADMINISTRATION														
	810 and 905	Contributions and Miscellaneous Projects	8,878	44,785	(35,907)	-	(35,907)	-	(35,907)	(778,474)	-	-	(814,381)	(814,381)
ECONOMIC DEVELOPMENT														
	120	Economic Development	61,655	61,655	-	-	-	-	-	(6,279)	-	-	(6,279)	(6,279)
	992	Indigenous Community Business Fund (ICBF) - Steam 1 (Operational Funding) (COVID-19)	97,923	97,923	-	-	-	-	-	-	-	-	-	-
	124 and 727	Various Economic Development Projects	27,701	27,701	-	-	-	-	-	-	-	-	-	-
	435	Project - Development of Tolba Hicking Trail	57,335	2,007	55,328	(55,328)	-	-	-	-	-	-	-	-
	772, 780, 781, 782, 783, 784 and 786	Rented Buildings	439,443	175,240	264,203	(89,157)	175,046	-	175,046	186,531	-	-	361,577	361,577
			684,057	364,526	319,531	(144,485)	175,046	-	175,046	180,252	-	-	355,298	355,298
SOCIAL DEVELOPMENT														
Q302-002	330	Program - Health Infrastructure Operations and Management												
Q30P-002	330	Program - Health Planning and Management	686,125	356,063	330,062	(3,500)	326,562	-	326,562	989,052	-	179,041	1,136,573	1,315,614
HEALTH	320	Project - Access to Health Care	2,983	2,983	-	-	-	-	-	-	-	-	-	-
HEALTH	321	Project - Meals-On-Wheels	41,619	38,949	2,670	(2,670)	-	-	-	-	-	-	-	-
HEALTH	327	GCNWA - Collective Kitchen Project	18,836	18,836	-	-	-	-	-	-	-	-	-	-
	328	FNQLHSSC - Fight Against Poverty	24,908	24,908	-	-	-	-	-	-	-	-	-	-
		Program - Sexually Transmitted and Blood Borne Infections (STBBI) Program Including HIV/AIDS and Hepatitis C	328	328	-	-	-	-	-	-	-	-	-	-
Q23Z-001	331	Program - Fetal Alcohol Spectrum Disorder Program (FASD)	108	108	-	-	-	-	-	-	-	-	-	-
Q22H-002	332													

Odanak Band Council

Summary statements of revenues and expenses, surplus (deficit) under I.S.C. rules and fund balances - by department and segment information

Year ended March 31, 2021

Program, nature of funding and service number	Description	Revenues \$	Expenses \$	Surplus (deficit) \$	Reconciliation under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules - I.S.C. services \$	Surplus (deficit) under I.S.C. rules - services other than I.S.C. \$	Unrestricted accumulated surplus March 31, 2020 \$	Allocation 2020-2021 \$	Unspent amount as at March 31, 2021 \$	Unrestricted accumulated surplus March 31, 2021 - Services other than I.S.C. \$	Total unrestricted accumulated surplus March 31, 2021 \$
Q221-002	333	26,418	26,418	-	-	-	-	-	-	-	-	-	-
Q22U-002	334 and 386	157,374	157,374	-	-	-	-	-	-	-	-	-	-
Q021-002	335												
Q021-003													
Q021-005	335	74,034	74,034	-	-	-	-	-	-	-	-	-	-
HEALTH	336 et 394	18,434	18,434	-	-	-	-	-	-	-	-	-	-
HEALTH	337	14,081	14,081	-	-	-	-	-	-	-	-	-	-
HEALTH	339	40,192	40,192	-	-	-	-	-	-	-	-	-	-
Q010-004	340	88,006	88,006	-	-	-	-	-	-	-	-	-	-
Q21G-004	341 and 379												
Q21G-008	341 and 379	121,769	121,769	-	-	-	-	-	-	-	-	-	-
Q21G-006	345												
Q21G-007	345												
Q226-001	345	74,092	74,092	-	-	-	-	-	-	-	-	-	-
Q22G-002	346	37,949	37,949	-	-	-	-	-	-	-	-	-	-
Q23C-002	347												
Q23D-002	347	25,053	25,053	-	-	-	-	-	-	-	-	-	-
Q221-002	348	17,334	17,334	-	-	-	-	-	-	-	-	-	-
Q22K-002	350												
Q22K-003	350												
Q210-001	350	31,617	31,617	-	-	-	-	-	-	-	-	-	-
Q02U-002	351	5,696	5,696	-	-	-	-	-	-	-	-	-	-
Q21G-009	352												
Q2FY-001	355	33,152	33,152	-	-	-	-	-	-	-	-	-	-
Q2FQ-001	385												
Q2FR-001	385												
Q2FT-001	385												
Q2FV-001	385												
Q2FX-001	385												
Q2G1-001	385												
Q2G2-001	385												
Q2G7-001	385												
Q2G8-001	385												
Q2G9-001	385												
Q2GA-001	385	400,858	400,858	-	-	-	-	-	-	-	-	-	-
Q30Q-002	357	40,924	40,924	-	-	-	-	-	-	-	-	-	-
Q22V-001	358	379	379	-	-	-	-	-	-	-	-	-	-
Q227-002	359	17,294	17,294	-	-	-	-	-	-	-	-	-	-
Q02H-002	361	5,891	5,891	-	-	-	-	-	-	-	-	-	-
Q21G-005	364 and 369	92,188	92,188	-	-	-	-	-	-	-	-	-	-
HEALTH	366	59,296	59,296	-	-	-	-	-	-	-	-	-	-
HEALTH	372	-	-	-	-	-	-	-	-	-	-	-	-
	375	27,223	27,223	-	-	-	-	-	-	-	-	-	-
Q231-001	378	6,818	6,818	-	-	-	-	-	-	-	-	-	-
	380	284	-	284	(284)	-	-	-	-	-	-	-	-
Q01T-001	384	-	-	-	-	-	-	-	-	-	-	-	-
HEALTH	387	520	-	520	(520)	-	-	-	-	-	-	-	-
Q30I-001	388	5,227	5,227	-	-	-	-	-	-	-	-	-	-
	389	11,895	11,895	-	-	-	-	-	-	-	-	-	-
HEALTH	390	2,863	-	2,863	(2,863)	-	-	-	-	-	-	-	-
Q3RA-001	392												
Q3RF-001	392	12,784	12,784	-	-	-	-	-	-	-	-	-	-
Q221-003	395	-	-	-	-	-	-	-	-	-	-	-	-
	601	2,443	2,443	-	-	-	-	-	(2,541)	-	-	(2,541)	(2,541)
	607	16,531	16,531	-	-	-	-	-	-	-	-	-	-
	610	32,919	32,919	-	-	-	-	-	-	-	-	-	-
	612	-	-	-	-	-	-	-	-	-	-	-	-

Odanak Band Council

Summary statements of revenues and expenses, surplus (deficit) under I.S.C. rules and fund balances - by department and segment information

Year ended March 31, 2021

Program, nature of funding and service number	Description	Revenues \$	Expenses \$	Surplus (deficit) \$	Reconciliation under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules \$	Surplus (deficit) under I.S.C. rules - I.S.C. services \$	Surplus (deficit) under I.S.C. rules - services other than I.S.C. \$	Unrestricted accumulated surplus March 31, 2020 \$	Allocation 2020-2021 \$	Unspent amount as at March 31, 2021 \$	Unrestricted accumulated surplus March 31, 2021 - Services other than I.S.C. \$	Total unrestricted accumulated surplus March 31, 2021 \$
867	CMHC - Initial Funding - Shelters Initiative for Indigenous Women and Children	40,000	-	40,000	(40,000)	-	-	-	-	-	-	-	-
926	MCCQ - Cultural Projects	13,034	13,034	-	-	-	-	-	-	-	-	-	-
929	Canadian Heritage (Aboriginal Languages Initiative) - Let's Speak Abenakis	20,444	20,444	-	-	-	-	-	-	-	-	-	-
930	MCCQ - Cultural Development Officer	5,205	5,205	-	-	-	-	-	-	-	-	-	-
		2,355,128	1,978,729	376,399	(49,837)	326,562	-	326,562	986,511	-	179,041	1,134,032	1,313,073
EMPLOYMENT													
680	First Nation of Quebec Human Ressources Development Commission	453,129	453,129	-	-	-	-	-	(94,888)	-	-	(94,888)	(94,888)
602	FNEC - Youth Employment - Student Summer Employment	3,621	3,621	-	-	-	-	-	(3,271)	-	-	(3,271)	(3,271)
		456,750	456,750	-	-	-	-	-	(98,159)	-	-	(98,159)	(98,159)
LAND MANAGEMENT													
425	Land Management Program of First Nations	-	-	-	-	-	-	-	-	-	-	-	-
COMMUNITY INFRASTRUCTURE													
769, 770, 860, 865 and 916	Operation and Maintenance	95,755	981,906	(886,151)	918,197	32,046	-	32,046	960,769	-	-	992,815	992,815
727	Church Roof Repair	40,362	-	40,362	(40,362)	-	-	-	-	-	-	-	-
729	Building Expansion at 102 Sibosis St	719,460	-	719,460	(1,240,929)	(521,469)	-	(521,469)	(20,412)	-	-	(541,881)	(541,881)
		855,577	981,906	(126,329)	(363,094)	(489,423)	-	(489,423)	940,357	-	-	450,934	450,934
SOCIAL HOUSING													
870	Housing Committee (CMHC)	213,943	70,680	143,263	(107,696)	35,567	-	35,567	205,618	-	-	241,185	241,185
819	Twinhouse Construction on Managuan	-	-	-	-	-	-	-	(813)	-	-	(813)	(813)
		213,943	70,680	143,263	(107,696)	35,567	-	35,567	204,805	-	-	240,372	240,372
TOTAL		14,050,320	10,547,629	3,502,691	(2,509,618)	993,073	(35,750)	1,028,823	4,367,371	-	254,444	5,106,000	5,360,444
Balance of funds as at March 31, 2020 (as per previous year with I.S.C. and inactive funds)		-	-	-	-	-	-	-	1,844,587	-	531,638	1,312,949	1,844,587
Share of the Development Corporation Odanak Inc.		-	-	-	-	-	-	-	(938,091)	-	-	(938,091)	(938,091)
Total		14,050,320	10,547,629	3,502,691	(2,509,618)	993,073	(35,750)	1,028,823	5,273,867	-	786,082	5,480,858	6,266,940
CUMULATIVE SUMMARY BY DEPARTMENT													
COMMUNITY ACTIVITIES		1,232,098	1,144,332	87,766	(88,718)	(952)	-	(952)	(189,629)	-	-	(190,581)	(190,581)
ADMINISTRATION		1,385,028	1,287,094	97,934	(77,914)	20,020	(754,057)	774,077	(1,831,498)	-	(754,057)	(1,057,421)	(1,811,478)
ECONOMIC DEVELOPMENT		684,057	371,162	312,895	(168,968)	143,927	(31,119)	175,046	147,569	-	(31,119)	322,615	291,496
SOCIAL DEVELOPMENT		3,359,043	2,324,357	1,034,686	(54,197)	980,489	653,927	326,562	4,823,647	-	832,968	4,971,168	5,804,136
EDUCATION		2,739,668	1,923,898	815,770	(12,500)	803,270	803,270	-	4,433,445	-	803,270	4,433,445	5,236,715
EMPLOYMENT		456,750	456,750	-	-	-	-	-	(98,159)	-	-	(98,159)	(98,159)
LAND, INCOME AND TRUST		47,349	44,339	3,010	(3,010)	-	-	-	(141,422)	-	-	(141,422)	(141,422)
COMMUNITY INFRASTRUCTURE		3,752,548	2,136,829	1,615,719	(1,996,615)	(380,896)	(99,419)	(281,477)	(1,152,139)	-	(99,419)	(1,433,616)	(1,533,035)
INDIAN REGISTRATION		24,441	11,871	12,570	-	12,570	12,570	-	(85,303)	-	12,570	(85,303)	(72,733)
SOCIAL HOUSING		213,943	70,680	143,263	(107,696)	35,567	-	35,567	204,805	-	-	240,372	240,372
NEGOTIATIONS		155,395	776,317	(620,922)	-	(620,922)	(620,922)	-	(352,691)	-	(620,922)	(352,691)	(973,613)
BALANCE OF FUNDS AS AT MARCH 31, 2020		-	-	-	-	-	-	-	453,333	-	642,791	(189,458)	453,333
SHARE OF THE DEVELOPMENT CORPORATION ODANAK INC.		-	-	-	-	-	-	-	(938,091)	-	-	(938,091)	(938,091)
Total		14,050,320	10,547,629	3,502,691	(2,509,618)	993,073	(35,750)	1,028,823	5,273,867	-	786,082	5,480,858	6,266,940

The accompanying notes are an integral part of the summary financial statements.

Odanak Band Council

Summary statement of change in net financial assets

Year ended March 31, 2021

	2021	2020
	\$	\$
Surplus of the year	3,502,691	2,026,578
Net change in amounts unspent fixed contributions	(149,508)	35,799
Variation of capital fund	36,981	56,653
Variation of the operating reserve CMHC	35,568	(5,979)
Fixed assets variation		
Additions	(3,145,913)	(1,708,380)
Depreciation	918,197	909,195
(Gain) lost on disposal	(53,647)	149,627
Disposal	66,500	2,300
	(2,214,863)	(647,258)
Variation of non-financial assets	(7,947)	24,770
Variation of financial assets	1,202,922	1,490,563
Net financial assets at beginning	6,541,635	5,051,072
Net financial assets at the end	7,744,557	6,541,635

The accompanying notes are an integral part of the summary financial statements.

Odanak Band Council

Summary statement of financial position


As at March 31, 2021


	2021 \$	2020 \$
Financial assets		
Cash	3,120,933	5,862,969
Assets subject to restrictions		
Replacement reserve	298,621	262,735
Operating reserve	249,911	214,343
Trust fund - Liquid assets in the Ottawa Trust Fund	2,979,881	2,942,900
Short-term investments	5,274,921	221,123
Accounts receivable	2,302,058	1,897,699
Long-term investments	(10,034)	663
Long-term receivables	658,403	591,004
	14,874,694	11,993,436
Liabilities		
Accounts payable and accrued liabilities	1,591,825	1,163,540
Accrued contributions	34,997	21,584
Deferred income	1,728,923	539,155
Long-term debt	2,988,310	3,090,948
Net amounts unspent contributions for fixed	786,082	636,574
	7,130,137	5,451,801
Net financial assets	7,744,557	6,541,635
Non-financial assets		
Prepaid expenses	107,915	99,968
Fixed assets	19,459,672	17,244,809
	19,567,587	17,344,777
Accumulated surplus	27,312,144	23,886,412


The accompanying notes are an integral part of the summary financial statements.

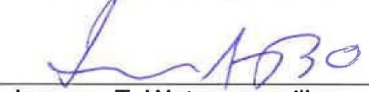
Contingencies and commitments (Notes 3 and 4)

On behalf of the board


Richard O'Bomsawin, chief


Florence Benedict, concillor


Alain O'Bomsawin, concillor


Jacques T. Watso, concillor

Odanak Band Council

Notes to the summary financial statements

March 31, 2021

1. Summary financial statements

The summary financial statements present historical financial information derived from the complete financial statements and are less detailed than them.

They include complete financial statements, with the exception of cash flow statements, and some information from the notes to the complete financial statements. They do not include complementary information of revenues and expenses, budget data and some complementary notes included in the complete financial statements.

To obtain a copy of the complete financial statements, a request must be made to the Odanak Band Council managements.

2. Various reserves

	2021 \$	2020 \$
Income security	150,000	150,000
Health center	87,000	87,000
Band Council	53,080	53,080
Ecocentre	10,080	9,551
Economic development funds	150,898	150,898
Ministerial guarantee - Housing	283,000	230,000
Replacement reserve - Real estate	73,500	70,000
Public works	210,000	180,000
School bus	35,000	22,500
	1,052,558	953,029

3. Contingencies

Potentially refundable loans

Loans extended by the Canada Mortgage and Housing Corporation for a total amount of \$225,851 concerning the R.R.A.P. program are payable by annual payments varying between \$2,825 and \$10,030, gratuitously and fall due between June 2021 and January 2024. As of March 31, 2021, the loans balance is \$81,985 (136,037 in 2020). The loans are conditional upon the maintenance of the homeowner's title to the houses. In default of which, the loans become due.

Guarantees

The Council endorsed loans contracted by community members for the acquisition of personal residences for a maximum amount of \$4,381,010. As of March 31, 2021, these loans endorsed total \$3,536,098 (\$2,785,141 in 2020). Furthermore, the amount the Council might have to pay in the event of default by the Community members cannot be determined with precision. Any payment by the Council would be charged as expense in the year they occurred.

Odanak Band Council

Notes to the summary financial statements

March 31, 2021

3. Contingencies (continued)

Guarantees (continued)

In addition, the Council jointly and solidarily guarantees loans contracted by the Société Historique d'Odanak (Musée) for maximum amount of \$1,425,604. As of March 31, 2021, these loans total \$643,254 (\$782,811 in 2020). The amount the Council might have to pay in the event of default by the Société Historique d'Odanak (Musée) cannot be determined with precision. Any payment by the Council would be charged as expense in the year they occurred.

Eventual liability

The Council entered into contribution agreements with various federal government departments. The funding provided under these agreements is subject to a refund if the Organization does not comply with their conditions.

4. Commitments

The Organization contracted agreements that fall due through December 2026. Future payments amount to \$1,485,396. Payments required over the next years are as follows:

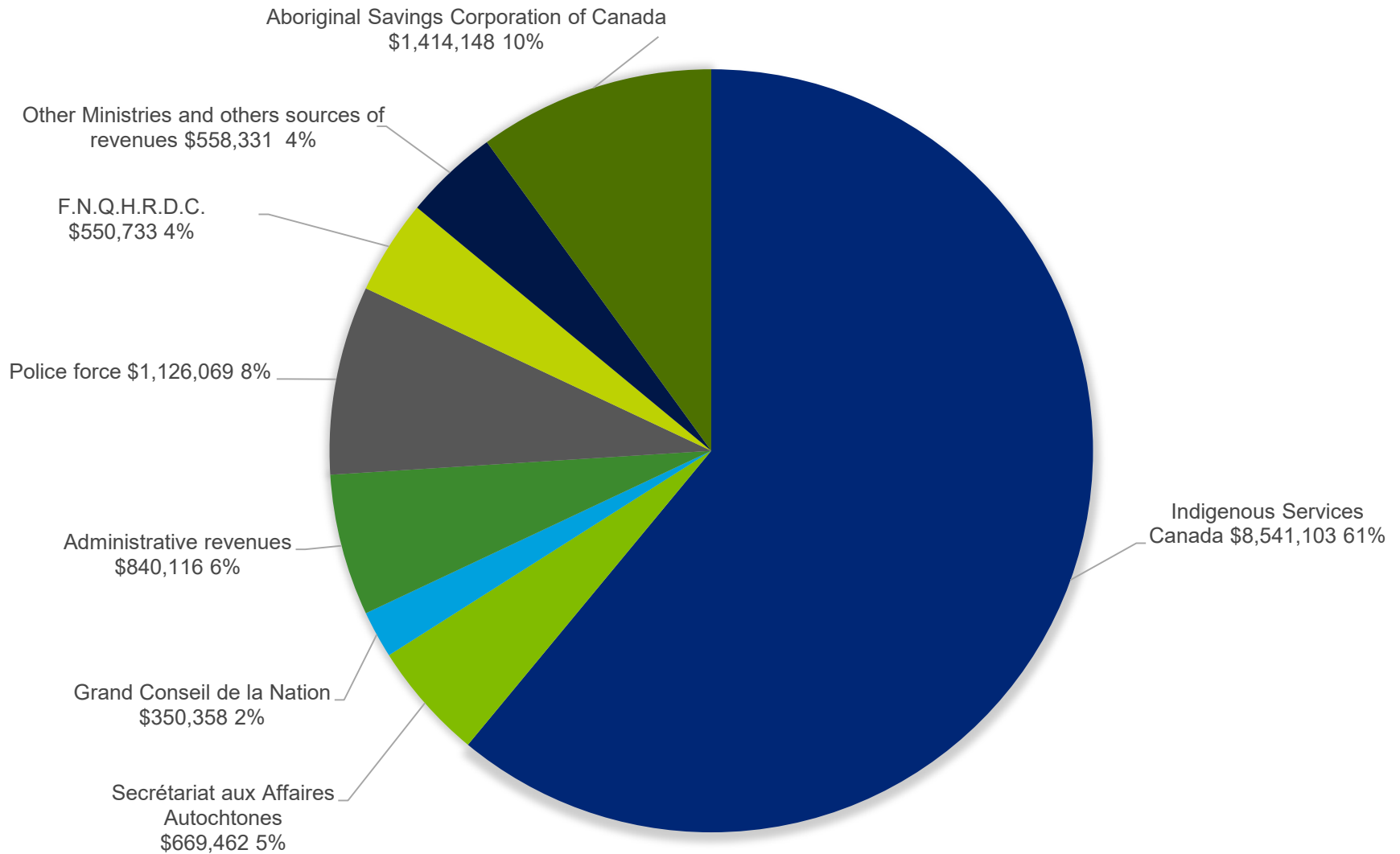
	Various agreements	Equipment rental	Total
	\$	\$	\$
2022	612,601	12,658	625,259
2023	275,981	8,867	284,848
2024	244,723	6,587	251,310
2025	172,556	1,902	174,458
2026	126,079	263	126,342
2027	23,179	-	23,179
	<u>1,455,119</u>	<u>30,277</u>	<u>1,485,396</u>

The heading "various agreements" includes agreements signed for the works for the drinkable water system, the control of blackflies, waste collection, fire protection management, management of buoys, equipment and building maintenance, health center access, Internet, telephone and cable services, use of software, support in various files, contribution to a charity and construction projects.

In addition, Odanak Band Council is committed by resolution to pay the annual operating deficit of the Centre de la petite enfance "Aw8ssisak" of Odanak.

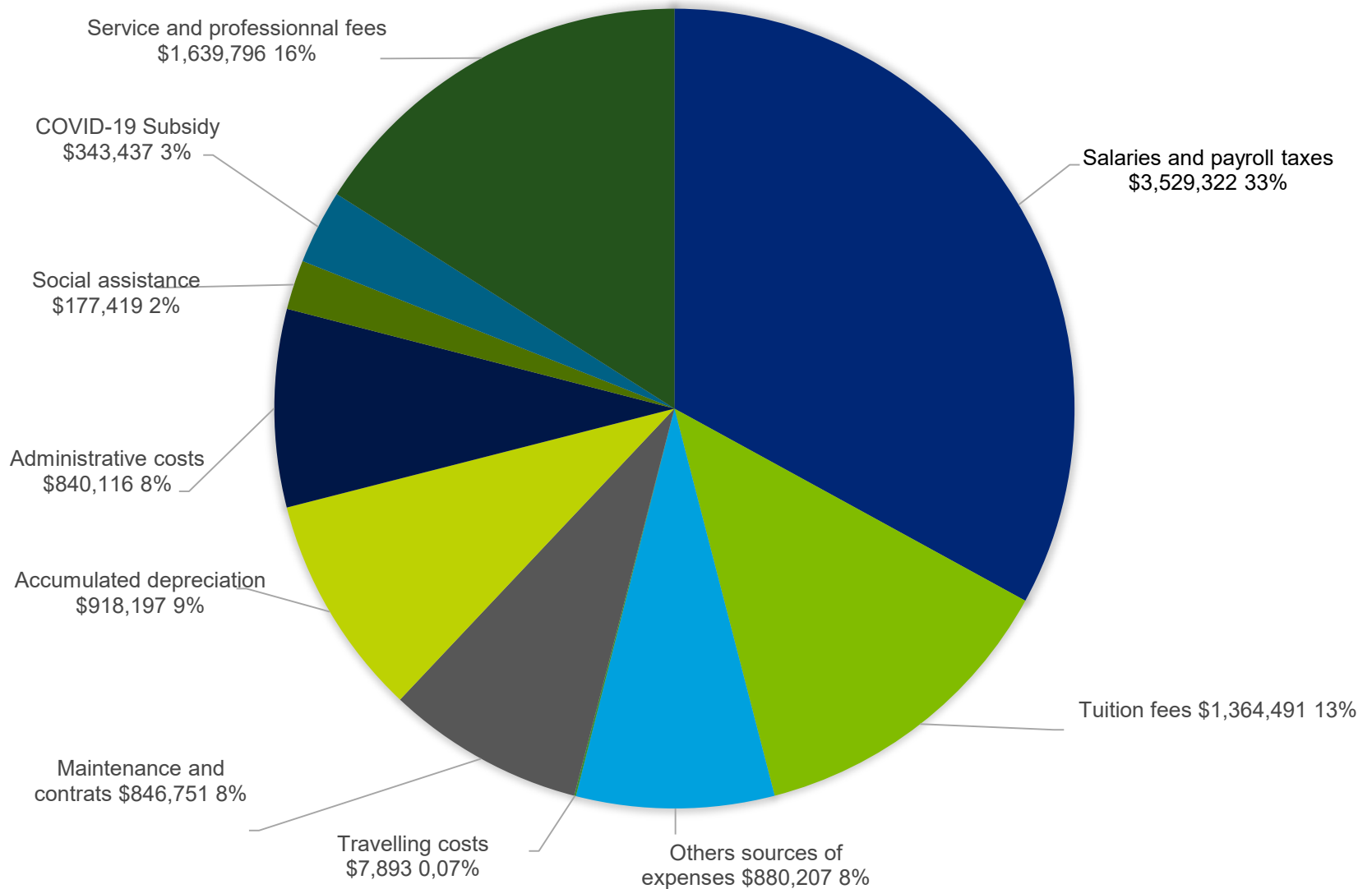
Revenues by source as at March 31, 2021

Total revenues : \$14,050,320



Expenses by kind as at March 31, 2021

Total expenses : \$10,547,629



Expenses by sector as at March 31, 2021

Total expenses : \$10,547,629

