

ST'UXWTEWSEM C

COMMUNITY NEWSLETTER

August 2020



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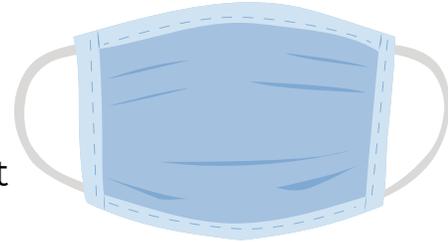
Call for Artists - "Bringing the Salmon Home" - 15



Health

Health Center Contact Information:
Phone (250) 457-6233 or Email
healthreception@bonaparte.band

Doors are still locked to the Health Center. **By appointment only.** We are now taking temperatures and asking that you use masks and sanitize when entering the building. We appreciate your cooperation in ensuring a safe environment for everyone.



Elders' Benefits Program

All forms completed and handed into Kala. If you need any help with mailing any reimbursements out, I am always available to help at 250-457-6233.

➡➡➡ Kala Morgan

Water is still available to those that live on IR #2 and IR #3. Curbside pickup available at the Health Centre Monday to Thursday 8am-4pm and Friday 8am-2pm. Call 457-6233 to arrange pick up. 2 bottles per week. 8 per month.



Dr. Lawrie will be at the Health Center again on Wednesday, September 16, 2020; please call to book an appointment. If you are unable to make it to the office, Dr. Lawrie accepts phone call appointments as well on that day.

Dr. Lawrie

Community Health

Fun facts!

- Laughing is good for the heart and can increase blood flow by 20 percent.
- Your skin works hard. Not only is it the largest organ in the body, but it defends against disease and infection, regulates your temperature and aids in vitamin production.
- Always look on the bright side: being an optimist can help you live longer.
- Exercise will give you more energy, even when you are tired.
- Sitting and sleeping are great in moderation, but too much can increase your chances of an early death.
- A lack of exercise now causes as many deaths as smoking.
- Humans are the only mammals that delay sleep.
- The average person falls asleep in seven minutes.
- If it takes you less than five minutes to fall asleep, it is likely that you're sleep deprived.

- Insomnia is the most common sleep disorder.
- Women sleep more than men.
- Parents of newborn babies lose 6 months' worth of sleep in the first 2 years of their child's life.
- Shift workers who work nights lose more sleep than those who work during the day.
- Nearly a quarter of all bones in our bodies are in our feet.
- There are 26 bones in each foot, as well as 33 joints, 19 muscles, 10 tendons and 107 ligaments
- Your two feet have 250,000 sweat glands that are capable of producing half a pint of sweat in a single day! The average person walks 110,000 miles in their lifetime.



August Health Promotion Days

Gastroparesis Awareness Month

Digestive disorder

Gastroparesis: Is also often referred to as delayed gastric emptying. The term “gastric” refers to the stomach. Usually, the stomach voids its contents in a disciplined fashion into the small intestine.

Gastroparesis is also often referred to as delayed gastric emptying. The term “gastric” refers to the stomach. Usually, the stomach voids its contents in a disciplined fashion into the small intestine. In gastroparesis, the muscle contractions that allow the food to move along the digestive tract do not function normally and the stomach does not empty quickly enough. Gastroparesis is defined by long-term symptoms combined with postponed stomach emptying in the absence of any observable obstruction or blockage. The delayed stomach emptying is confirmed by a test.

What causes gastroparesis?

The cause of gastroparesis is often unclear. However, it has been observed that in many cases, gastroparesis is caused by damage to the vagus nerve (an important link from the gut to the brain.)

The vagus nerve is responsible for managing the intricate mechanisms in your digestive tract, including communicating to the muscles in your stomach when to contract and move food into the small intestine. An impaired vague nerve cannot signal normally to your stomach muscles. This causes food to remain in your stomach for a longer period, rather than pushing into your small intestine to continue the digestion process.

Factors that cause vagus nerve damage can be attributed to diseases, such as diabetes, or by surgery to the stomach or small intestine.

Who is at risk of gastroparesis?

- People with diabetes
- People who have had abdominal or esophageal surgery
- People who have suffered an infection, or a virus
- Certain medications can slow the rate of stomach emptying, such as narcotic pain medications
- People with scleroderma (a connective tissue disease)
- People with nervous system diseases, such as Parkinson’s disease or multiple sclerosis
- People with hypothyroidism (low thyroid)
- Women are more likely to develop gastroparesis than men



Signs and Symptoms

It is important to understand that many people with gastroparesis don't show any observable signs or symptoms. However, if you are showing signs of the following symptoms, consult your physician:

- Vomiting
- Nausea
- A feeling of fullness after eating just a few bites
- Vomiting undigested food eaten a few hours earlier
- Acid reflux
- Abdominal bloating
- Abdominal pain
- Changes in blood sugar levels
- Lack of appetite

Complications of gastroparesis

- **Severe dehydration:** Frequent vomiting can contribute to dehydration
- **Malnutrition:** Lack of appetite leads to low caloric intake, and results in an inability to absorb enough nutrients.
- **Undigested food** that hardens and remains in your stomach: Foods that remain undigested in the stomach can solidify into a hardened mass called a bezoar. These solid masses cause nausea and vomiting and can be life threatening due to the prevention of digestion.
- **Unpredictable blood sugar changes:** Gastroparesis does not directly cause diabetes; however, it can lead to irregular changes in blood sugar levels. This can aggravate an existing case of diabetes and make it more difficult to manage.
- **Decreased quality of life:** Gastroparesis flare ups can cause discomfort and affect an individual's ability to perform normal day to day activities.

International Youth Day - August 12

International Youth Day History International Youth Day seeks to raise awareness to the cultural and legal issues faced by youth throughout the world. The United Nations defines youth as people between the ages of 15 and 24 years, although locally, youth can be interpreted in a more flexible manner. In 1995, the General Assembly of the United Nations (UN) adopted the World Program of Action for Youth with the intention of establishing guidelines and policies for action and support that would lead to a brighter future for tomorrow's youth. The World Program of Action for Youth, which consists of 15 priority areas, including education, employment, hunger and poverty, health, environment and drug abuse, paved the way for the UN's declaration of International Youth Day in 1999. Since its inception on August 12, 2000, International Youth Day has served to increase the quality and quantity of opportunities available to the youth to actively participate in society. In 2009, the UN Economic and Social Council further expanded each of the 15 youth priority areas by developing goals and targets for monitoring youth progress, an expansion that now serves as the basis for International Youth Day's annual theme. Each year, the theme is selected based upon immediate and relevant issues that youth are facing today.



World Humanitarian Day - August 19

World Humanitarian Day (WHD) is held every year on 19 August to pay tribute to aid workers who risk their lives in humanitarian service, and to rally support for people affected by crises around the world.

This year World Humanitarian Day comes as the world continues to fight the COVID-19 pandemic over recent months. Aid workers are overcoming unprecedented access hurdles to assist people in humanitarian crises in 54 countries, as well as in a further nine countries which have been catapulted into humanitarian need by the COVID-19 pandemic. This day was designated in memory of the 19 August 2003 bomb attack on the Canal Hotel in Baghdad, Iraq, killing 22 people, including the chief humanitarian in Iraq, Sergio Vieira de Mello. In 2009, the United Nations General Assembly formalized the day as World Humanitarian Day.

This year, COVID-19 has been the biggest challenge to humanitarian operations around the world. The lack of access and restrictions placed by Governments around the world has resulted in communities, civil society and local NGOs being the frontline of the response. Therefore, the campaign presents the inspiring personal stories of humanitarians who are treating and preventing COVID-19, providing food to vulnerable people in need, providing safe spaces for women and girls in lockdown; delivering babies; fighting locusts and running refugee camps, all amid the COVID-19 pandemic.

International Overdose Awareness Day - August 31

International Overdose Awareness Day is a global event held on 31 August each year and aims to raise awareness of overdose and reduce the stigma of a drug-related death. It also acknowledges the grief felt by families and friends remembering those who have died or had a permanent injury as a result of drug overdose.

International Overdose Awareness Day spreads the message that the tragedy of overdose death is preventable.

People are encouraged to wear silver badges to show their support for overdose awareness.

Overdose Death can be Prevented

Naloxone is an injectable medication that reverses the effects of an overdose from opioid drugs and saves lives. The BC Take Home Naloxone Kit can be used by anyone in BC.

The FNHA is working alongside its partners to increase the number of First Nations communities that have the lifesaving Take Home Naloxone Kits on site and has trained personnel and community members in how to use the kits.

Take Home Naloxone Kits:

- Are available at 332 harm reduction sites across BC. Find a harm reduction site at: <https://towardtheheart.com/site-locator>
- Available at all BC pharmacies - kits received from pharmacies vary in appearance but contain all supplies needed to prevent overdose death
- Do not require a prescription



Naloxone is a drug covered by First Nations Health Benefits. Add it to your first aid kit. Let's start talking about keeping ourselves, our family, and our friends safe.

*****Note: Naloxone kits can be ordered and picked up at Bonaparte Health Center*** Please contact 250.457.6233 ext 228 Home Care Community Nurse (Sher Perry)**

Prescription is not required Naloxone is an injectable medication that can reverse the effects of an overdose from opioid drugs such as fentanyl, morphine, and heroin.

First Nations Health Benefits:

- Accepts claims for naloxone when recommended by a pharmacist
- Accepts prescriptions for naloxone from physicians or nurse practitioners

Naloxone is available for First Nations clients from:

- Provincial and First Nations harm reduction service locations
- Pharmacies and is covered by First Nations Health Benefits as noted above Coverage for Naloxone Injectable and nasal spray forms of naloxone are covered by First Nations Health Benefits and claims are processed by Pacific Blue Cross.

The following items are covered:

- Drug DIN/pDIN Naloxone 0.4mg/mL one mL injection 02148706; 02393034; or 02453258
- Narcan® Nasal Spray 02458187
- Naloxone Kits – Two ampules/vials 09991460
- Naloxone Kits – Three ampules/vials 09991488
- Nasal Naloxone Kits – 2 sprays 09991475

Where pharmacies are providing ancillary supplies to support safe naloxone administration and overdose management, providers can bill the cost of naloxone and ancillary supplies together as a “naloxone kit” under the appropriate Pseudo-DIN. The ancillary items should not be billed separately from the naloxone.

KUU-US Crisis Line Society 1-800-KUU-US17 (1-800-588-8717)

First Nations and Aboriginal specific crisis line available 24/7, regardless of where individuals reside in BC. KUU-US services are for First Nations, by First Nations and all crisis response personnel are certified and trained in Indigenous cultural safety and therefore bring an understanding of First Nations history and trauma from the residential school to their roles. Last year, KUU-US helped over 10,000 individuals with mental health issues and crises related to residential school, child welfare, addiction, health concerns, divorce/separation, suicide ideation/survivorship, grief/loss, crime, abuse, peer pressure and financial distress. Toll-free: 1-800-588-8717 - Youth Line: 250-723-2040 - Adult Line: 250-723-4050.



Tasks to boost memory and attention for age



Here are some games that target memory and attention – essential skills for older people which can easily diminish with lack of use:

1. Name two objects for every letter in your first name. Work up to five objects, trying to use different items each time.
2. Say the months of the year in alphabetical order.
3. Name six or more things you can wear on your feet beginning with “s”
4. Look around wherever you are and, within two minutes, try to find five red things that will fit in your pockets, and five blue objects that are too big to fit.

A message from Bonaparte's Home Care Aid



Weyt-kp xwexwéytep (hello everyone),

My name is Carolyn Billy, your Home Care Aide from St'uxwtewsemc (Bonaparte). I am the daughter of Richard and Lorraine Billy. With over 17 years in the Health Care field, I am eager to assist those in need at a community much closer to home. Throughout those years, I was employed in a residential/long-term care setting, with ongoing educational updates provided on-line or on the worksite. This new journey from mid March to date, has given me the opportunity to meet and assist staff in different departments to support our community from the Pandemic. Some of my tasks consisted of setting-up the Bonaparte Community Hall for a care site, preparing/delivering hampers of food and supplies, ensuring health signage at your homes were visible and updated, recording incoming/outgoing health inventory, and contacting elders on a weekly basis through telephone visits. Aside from weekly tasks, “Bonnie Henry’s” live updates have kept me informed of our countries COVID-19 trends. As the saying goes, “We will get through this!”. Our routines have changed, with patience, prayers, and studious health measures, we will be able to keep Covid-19 away! Please continue to limit your trips, make a shopping list, keep your hands clean, wear a face mask, and be aware how many people are in your circle! The Corona Virus has affected the population in many ways, I am confident there will be a cure. Please do not hesitate to contact myself or the health team.

Kukwstsétsemc (thank you)



A message from the Community Health Nurse

Hello,

I just wanted to let everyone know that I am back in the office now, my hours are Monday-Thursday 8-4 . I will be starting foot care next week, I am only doing one client per day due to the cleaning involved to keep everyone safe. You can call me at the office to book an appointment at 250-457-6233 ext 228 or my cell 250-457-7125, I am looking forward to seeing everyone, its been too long. You will be required to wear a mask when you come in to have your feet done.

Thank you,
Sher Perry

Head Start

Head Start: 250-457-9747

The Head Start Program will have the final Summer Lawn Party on Friday, September 4, 12 - 1:30.

Parent Participation Program

The Parent Participation Program is for families with children 0-6, to enjoy the many choices of activities in the Center. Snacks provided. Scheduled visits for Monday to Friday can be made by phone, we have a limit of 6 people at each visit. A ticket for the monthly draw is entered each time a family visits the center; prizes vary, this month is a Smart Trike Fresh 3 in 1 beginners tricycle.

This month's prize is a Smart Trike Fresh 3 in 1 beginners tricycle !!

The After School Drop-Off Program

The After School Drop-Off Program is for children ages 4-6 will not resume until the end of October. Please watch for updates.



A message from the Health Director

August 21, 2020

Hello Bonaparte community members:

I hope everyone had a good summer!

The B.C. Government has extended the state of emergency through the end of the day on Sept. 1, 2020, to allow government to continue to take the necessary actions to keep British Columbians safe and manage immediate concerns, such as recent outbreaks in some areas of the province. Another update will be provided after Sept. 1, 2020.

The Province is introducing new measures to enforce COVID public safety. \$2000.00+ fines will be issued to owners & organizations for gatherings and events with 50+ people in attendance. There will be a COVID-19 guideline and protocol package at the Health Centre ready for pick up for any funeral, event, or gathering that is being organized. Please ensure you pick up a package before you plan any gathering. This is to ensure the safety of everyone. Thank you for your understanding and cooperation.

I have been working on; Budgets, strategic planning, COVID safety, reports, Secwepemc Health Caucus; Mental Health and Wellness Traditional Wellness Emergency Management Plan, On the Land Community Initiatives, and the Community Garden and Food preservation with Karen/Youth Worker and more.....

Keep up the good work by doing what we have been doing to keep ourselves and our families safe from COVID-19;

- handwashing/hand sanitizer
- cough into your sleeve
- physical distant
- disinfect touched surfaces
- stay home if you are sick

“THIS IS NOT THE TIME TO LET OUR GUARD DOWN.” PREMIER JOHN HORGAN

“FEWER FACES IN BIGGER SPACES” DR. HENRY

Vanessa Thevarge/Health Director





SECWEPEMC NATION – FUNERAL PROTOCOL – COVID 19

PURPOSE:

To enact a Secwepemc Nation Funeral Protocol to take effect during the Covid 19 Crisis. This protocol will help to ensure the safety of our nation members dealing with funerals during Covid 19. The Funeral Protocol will be lifted when the Provincial Health Officer lifts the restrictions on mass and/or group gatherings.

CURRENT SITUATION:

On March 23, 2020, A Secwepemc Declaration of State of Emergency within Secwepemculecw was endorsed by all 16 Chiefs who are members of the Secwepemc Health Caucus (SHC). In planning for the Covid 19 Crisis it has been identified that a Secwepemc Funeral Protocol is a high priority. As such the following outlines the Secwepemc Nation approach to a funeral during Covid 19.

Please note: The Secwepemc Nation Funeral Protocol does not supersede any Community protocols but should be considered in addition with the more stringent standard being recommended.

SECWEPEMC NATION FUNERAL PROTOCOLS – DURING COVID 19

Traditional and Western Funeral Practices

The Secwepemc Health Caucus acknowledge that each community have their own Traditional and Western funeral practices that they abide by in normal circumstances. During Covid 19 we may not implement these Traditional and Western funeral practices but find unique and innovative ways to adapt our Traditional and Western protocols.

Spiritual Practices

It is important to acknowledge the spiritual journey of those that pass on and enter the spirit world by continuing our traditional practices which can still be incorporated during Covid 19. Traditional practices can be performed or offered by individuals with physical distancing in innovative ways where we can honor and respect the spirit of the individual during this unprecedented time.

Mass Gatherings Cancellation

The Provincial Health Officer, Dr. Bonnie Henry by order cancelled mass gatherings of more than 50 people until May 30, 2020, when it will be re-assessed. This cancellation of mass gathering is to reduce the number of people being infected by Covid 19. Interaction with people contributes to the transmission of respiratory illnesses such as Covid 19 with Elders and/or individual with pre-existing conditions being most at risk for poor outcomes.

Difficult Times – Difficult Decisions

The Secwepemc Health Caucus acknowledge this is a difficult time and a funeral during this time is even more traumatic. As such, these guidelines need to be recommended to prevent the spread of Covid 19 among our community and nation members. We need to keep our people safe.

Plan to proceed with funeral during Covid 19

1. **# Of people/Physical Distancing:** Although the Provincial Health Officer states no gatherings over 50 people, best practices state 5-10 people and these people must practice physical distancing which states no contact within 2 meters of another person. As such, SHC advise to apply best practice limiting funerals to no more than 5-10 people in attendance with physical distancing measures in place. (Note: people living in same household are exempt from this 2-meter guideline.)
2. **People attending:** Those 5-10 attending to the funeral practices should not be: sick, in contact with sick people, should not have travelled outside of Canada in the past 14 days, should not reside with an Elder or somebody with significant chronic disease or children. It is also recommended to reduce those travelling to limited funeral service by means of having only immediate family and/or local community individuals attend.
3. **Avoid Contact:** do not hug, shake hands, or have any human contact in order to limit transmission of Covid 19 keep 6 feet apart. Do not touch your face and cough or sneeze into tissue or the bend of your arm. Dispose of tissue in lined waste baskets followed by proper hand washing. If handwashing is not available, use hand sanitizer.
4. **Public Area Disinfected:** for those limited people taking care of funeral practices at this time, ensure all public areas (kitchen, bathroom, and common areas) are disinfected throughout the day. Disinfectant (1:50 bleach disinfectant solution). Pay particular attention to surfaces that are touched often.
5. **Plan for those who become sick on site:** Have Personal Protective Equipment on hand in case somebody becomes sick on site. Have a plan to isolate them and move them to safety to prevent transmission.
6. **Hygiene stations:** have hand sanitizer and hand wash stations with lined waste baskets, soap, and paper towel dispensers on site, hand washing signage to promote proper and constant cleansing of hands.
7. **Mourning Time:** Traditionally mourning occurs within a four-day cycle but during the time of Covid we ask that mourning take place within one day.
8. **Funeral Location:** if possible, have funeral outdoors as there is higher ventilation and greater capacity for separation between attendees outside.



9. **Cleansing the Body:** The SHC acknowledge this is a Traditional practice but due to Covid 19 recommend omitting this stage by the family if death is due to Covid 19.
 10. **Viewing:** Ban viewing of the Body during Covid 19 unless strict physical distancing measures are in place and enforced.
 11. **No Feast/Food –Instead have Food Offering:** Cancel feast and allow no food during Covid 19 for one day funeral practices. Consider doing a food, water and tobacco offering rather than a feast.
 12. **Communication:** Ensure that those limited people (recommended 5-10 people) attending the funeral have clear understandings of the Covid 19 funeral protocols and all the precautions that are needed to ensure everybody’s safety and to reduce the virus transmission.
- 13. Funeral Options**
- a. *Spiritual Practices:* With physical distancing measures in place and/or as individuals, spiritual practices may be performed such as smudging, cleansing the home, fire keeping in shifts (for the day), offering prayers, drumming/singing individually, connect with Elder via phone, and/or offering medicines to the fire or water.
 - b. *Cremation:* SHC acknowledges that some communities may or may not believe in, and/or practice cremation but we encourage this practice until the Covid 19 Crisis is over.
 - c. *Streaming the Ceremony:* utilize technology and stream the minimal funeral services to extended family and friends so they can watch from the safety of their own home.
 - d. *Future Ceremony:* The SHC recommend that when the Provincial Health Officer cease bans on mass gatherings and it is safe for communities and nation members to gather, that individuals that have passed during the time of the Covid 19 crisis be held up in ceremony as per the direction of the community’s Traditional and/or Western funerals practices

Any concerns or questions about your health call *811 or go to www.fnha.ca/coronavirus or contact Cara Basil – Secwepemc Health Caucus Covid -19 Lead at 250-457-1808 or email twlead@secwepemchealth.ca or Vicki W. Manuel – SHC Nation Lead at 250-320-6859 or email at vicki.manuel@fnha.ca

SIGNED



Charlene Belleau – SHC Chair

DATE

March 25 2020

Reminder:

To be reimbursed for travel to appointments, a Confirmation of Attendance Form or a letter from doctor's office MUST BE handed in no later than 1pm on Monday's.

Cheque Requisitions are submitted to finance by 3:30pm on Mondays.

Cheques are then ready for pick up on **Friday afternoons.**

*****PLEASE make sure that DATE, TIME and TYPE of appointment is included on the form or in the letter*****

I do not need to know the specifics of why you are at the appointment; I just need the type of appointment ie) chiropractor, ER, physio, ultrasound, CT Scan, cardiology, nurse practitioner (NP), regular doctor (just put 'Check Up'), optometry, ophthalmology, etc

All this information is needed for reporting purposes to First Nations Health Authority (FNHA).

Stay safe,

Jeannie William
Patient Travel/CHR

The Patient Transportation Program provides SUPPLEMENTARY benefits for eligible clients. It may not cover all costs associated with a client's travel requirements

CALL FOR ARTISTS: LOGO DESIGN

Bringing The Salmon Home:

The Columbia River Salmon Reintroduction Initiative

of the

Syilx Okanagan Nation, Ktunaxa Nation, Secwepemc Nation,
Government of Canada, Government of British Columbia

Deadline for response September 9, 2020

1. Project Description

The Syilx Okanagan Nation, Ktunaxa Nation and Secwepemc Nation are seeking **portfolio examples** from artists from their respective Nations for consideration for a logo illustration commission for **Bringing The Salmon Home: The Columbia River Salmon Reintroduction Initiative**.

The final logo concept will combine three salmon graphics—one from an artist of each Nation—to represent the unifying spirit of this Indigenous-led Initiative. The banner title **Bringing The Salmon Home** will also be presented in each Nation's language.

2. Project Background

Though it's been over 80 years since salmon were able to return to the upper reaches of the Columbia, the spirit of the salmon endures all the way to the river's beginning place. As do the Syilx, Ktunaxa and Secwepemc Nations who've lived here since time immemorial, and who hold firm to their sacred responsibility to bring the salmon back home to the upper Columbia.

The Syilx Okanagan, Ktunaxa and Secwepemc Nations, Canada and British Columbia signed a landmark agreement on July 29, 2019 to explore salmon reintroduction into the Canadian portion of the Columbia River. Reintroducing salmon concerns Indigenous rights and responsibility. This is an Indigenous-led Initiative in unceded Indigenous territories. The long-term aim of **Bringing the Salmon Home: The Columbia River Salmon Reintroduction Initiative** is to return fish stocks for Indigenous food, social and ceremonial needs, and to benefit the region's residents and ecosystems as a whole.

3. Eligibility

This artist call is open to professional or accomplished Indigenous visual artists who are members of the communities of the Syilx Okanagan Nation, the Ktunaxa Nation, and the Secwepemc Nation.

4. Compensation

The three artists chosen to deliver final designs will receive an artist's fee of \$1200 each, further to fulfilling the contract commission requirements. Design considerations will be provided to the successful artists. Delivery requirements will include draft illustrations of chinook and sockeye salmon, and revisions to the initial illustrations or new illustrations if requested.

5. Selection Process and Criteria

Primary selection committee members are the **Bringing the Salmon Home: The Columbia River Salmon Reintroduction Initiative** Indigenous Nation Communications and Implementation Team representatives. Selection criteria will include:

- The applicant's professional qualifications and experience;
- Proven ability to undertake and complete projects of a similar scope;
- Artistic merit as shown by the submitted materials;
- Knowledge of the distinct culture of their respective Nation(s).

Bringing the Salmon Home: The Columbia River Salmon Reintroduction Initiative reserves the right to decline any applications. The final logo design will be the joint commissioned property of the five government partners of the Columbia River Salmon Reintroduction Initiative. Individual artist contracts will be administered through the Initiative’s Secretariat.

6. Project Timeline

*The schedule may be revised at any time.

September 9, 2020	Deadline for response by interested artists (by 5 pm PST)
September 17, 2020	Review of applications
September 21, 2020	Selected artists notified. Artist contracts, including final graphic design specifications and deadlines, signed by Sept 25, 2020.
October 2, 2020	Initial designs delivered by each artist.
October 9, 2020	Design revisions delivered by artists.
October 22, 2020	Approval of logo design
October 30, 2020	Final delivery of logo

7. Online Entry Requirements

Entries must be submitted through email (address below) and include the following:

- ▶ Artist biography or summary of experience;
- ▶ Full contact information;
- ▶ Examples of previous work: photos, digital image files and/or online links.

8. Deadline: 5pm Wednesday September 9, 2020

Please send your entry by email by the deadline of 5pm Wednesday September 9, 2020 to:

BringingTheSalmonHomeArtists@gmail.com

Artists are also welcome to send any questions care of this same email address, before the deadline.

Limlám̓t / Hu sukítquknaṭaʔni / Kukstemc / Thank you