

# *TREATMENT DIRECTORY*

*2005*

National Native Alcohol and Drug Abuse Program  
and National Youth Solvent Addiction Program

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## CENTRES BY TYPE OF PROGRAMMING

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Nimkee Nupigawagan Healing Centre	53
Ka Na Chi Hih Specialized solvent Centre	55
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## **INTRODUCTION**

First Nations and Inuit Health Branch (FNIHB) welcomes you to the 8th edition of the National Native Alcohol and Drug Abuse Program (NNADAP) Treatment Centre Directory. It was developed in order to provide a document that summarizes basic information on all native treatment centres funded by FNIHB.

This year several more centres have email addresses and websites, for easy access to more detailed program information.

The following data was collected through phone questionnaires and given on a volunteer basis at the discretion of each individual treatment centre.

Included are some definitions and terminologies often used in the addictions field.

FNIHB hopes that you will find this directory to be useful. For direct questions concerning treatment centres, please contact the individual centres. For any suggestions, corrections or other questions, please contact Christine Wilson, Program Officer, FNIHB

The Address is:                      First Nations and Inuit Health Branch  
    Jeanne Mance Building  
    20th Floor  
    Postal Locator 1920A  
    Tunney's Pasture  
    Ottawa, Ontario  
    (613) 952-1377

## DEFINITIONS AND TERMINOLOGY

<b>Alcohol and Other Drug Education:</b>	Provision and discussion of factual information on drugs and alcohol. Through such avenues as lecture, video and workshops in order to stimulate client attitude and behavioural change.
<b>Aftercare</b>	The period of time that begins when a client leaves a formal treatment program and treatment professionals are no longer directly involved with the client on a regular basis. Aftercare may constitute referral to support services, ongoing telephone or supportive contact and especially help from family, friends and community based support services.
<b>Assessment:</b>	Systematic procedures for the identification of a clients major strengths and problem areas, culminating in treatment plan and referral assistance.
<b>Case Management:</b>	A process involving on-going assessment of current strengths, weaknesses and needs, planning to identify services appropriate to the particular needs of a client. The process includes the continuous monitoring and evaluation of progress as well as interceding on behalf of the client to ensure that the treatment system responds equitably and effectively to the needs of the client.
<b>CARF</b>	The Commission on Accreditation of rehabilitation facilities. CARF reviews and grants accreditation services nationally and internationally on request of a facility or program. <a href="http://www.carf.org">www.carf.org</a>
<b>CCHSA</b>	Canadian Council for Health Services Accreditation a national accrediting body that surveys centres against national standards for continuous quality. <a href="http://www.cchsa.com">www.cchsa.com</a>
<b>Consultation with Professional:</b>	Relating with other professionals to ensure comprehensive care for the client.
<b>Crisis Intervention:</b>	Those services which respond to an alcohol and/or drug abusers need during acute emotional and/or physical distress.
<b>Cultural Activities:</b>	Activities that are of a cultural nature.(i.e. sweat lodges, smudge ceremonies, Elders services, language programs etc.
<b>Detoxification</b>	Recovery from the toxic effects of a drug or substance by the removal of the toxic properties of the substance.

## DEFENITIONS AND TERMINOLOGY CONTINUED

<b>Dual Diagnosis</b>	Dual Diagnosis characterizes individuals who face a wide range of psychosocial issues and may experience multiple interacting illnesses (more than two). The term "co-occurring disorders" is becoming more frequently used to refer to dual diagnosis, or co-occurring substance abuse disorders and psychiatric or emotional illnesses
<b>Dual Addictions</b>	A condition characterized by addiction to several substances simultaneously i.e. alcohol and prescription drugs. Poly Drug use may also be used as a term in this case
<b>Follow Up</b>	A means of gathering data and information about the progress of clients in recovery. Follow Up gathers information about clients over a period of time ( i.e.3, 6, 9 months post discharge) and can be used as an indicator of program effectiveness.
<b>Group Counselling</b>	The utilization of special skills to assist groups or families to achieve personal objectives through exploration of a problem and its ramifications..
<b>Hallucinogens</b>	A substance that causes excitation of central nervous system, characterized by hallucinations, mood changes, anxiety, sensory distortion, delusion and depersonalization.
<b>Individual Counselling</b>	The utilization of special skills to assist individuals to work through a variety of presenting problems in a one on one format.
<b>Intake Screening</b>	The process by which a client is determined appropriate and eligible for admission to a particular program
<b>Intake</b>	The administrative and initial assessment procedures necessary for admission to a treatment centre.
<b>Interpretation Services</b>	Providing language translation through an interpreter.
<b>Life skills/Personal Development</b>	A series of activities that are taught to groups and individuals in order to enhance their social, personal and life management skills.
<b>Narcotics</b>	Pertaining to a substance, derived from the poppy seed opium, that produces insensibility or stupor, can alter perception of pain, induce euphoria, mood changes and mental clouding.

## DEFENITIONS AND TERMINOLOGY CONTINUED

<b>Orientation</b>	The orientation phase, describes to the client the general nature and goals of the program, and the rights and responsibilities of clients. Orientation generally involves a tour, general introductions and preliminary question and answer sessions.
<b>Outpatient Services</b>	Treatment provided in a non residential manner usually in regularly scheduled sessions as frequently as daily or weekly intervals.
<b>Recreation Therapy</b>	The practice of involving clients in routine socialization through sport, leisure or involvement in community based activities.
<b>Referral</b>	The process of recommending a person to a treatment program after conducting an assessment on them. Following treatment, some programs will refer client to structured after care programming and supports.
<b>Reports and Record Keeping</b>	Charting the results of the assessment, and ongoing treatment plan monitoring. Writing reports, progress notes, incident reports, discharge plans or summaries and other client related data.
<b>Solvents</b>	Chemicals that are volatile, evaporate quickly at room temperature. The deliberate inhalation of such products in order to get high is characterized as “solvent abuse” Examples gasoline, glue, marking pens, aerosols and correction fluid.

<b>Treatment Center:</b> Carrier Sekani Family Services 987 4th Avenue Prince George, <b>BRITISH COLUMBIA</b> V2L-3H7		<b>Director:</b> ARP Manager Jackie Thomas <b>Phone:</b> (250) 562-3591 <b>Fax:</b> (250) 562-2272	
<b>Vanderhoof Office:</b> Addiction Recovery Program 240 West Stewart Street ( P.O. Box 1219) Vanderhoof, <b>BRITISH COLUMBIA</b> V0J-3 A0		<b>Phone:</b> (250) 567-2900 <b>Fax:</b> (250) 567-2975 <b>Date Opened:</b>	
<b>Email:</b> jackie@csfs.org		<b>Website:</b> <a href="http://www.csfs.org">www.csfs.org</a>	
<b>Treatment Type</b>	Camp environment	Mobile Outreach	
<b>Number of Beds</b>	14 bed equivalent	<b>FNIHB Funded</b>	14 bed equivalent
<b>Specific Beds For</b>	Males– Yes	Females– yes	Co-Ed program- Specialized Camps
<b>Languages Offered</b>	First Nation (Carrier)	English	
<b>Target Age Group</b>	No age Limitations		
<b>Treatment Cycle</b>	7 days (camps)	<b>Intake Frequency</b>	Bi Weekly
<b>Type of Treatment Program</b>	Adult Women Youth Men	Couples Families Inmates ( On probation)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In Crisis Services	Dual Addictions Outpatient Services	Follow Up /Aftercare Other (Family Violence Program)
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Solvent Abuse Hallucinogens	Prescription Other
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access Literature in Braille	Large Print Materials	Other:
<b>Accreditation Status</b>	In Process	by: CCHSA	<b>First Survey:</b> May 2005

<b>Treatment Center:</b> Haisla Support and Recovery Centre P.O.Box 1018 Haisla Post Office Kitamaat Village, <b>BRITISH COLUMBIA</b> V0T-2B0		<b>Contact:</b> Ms. Mary Green <b>Phone:</b> (250) 639-9817 <b>Fax:</b> (250) 639-9815 <b>Date Opened:</b> Nov 3, 1995	
<b>Email:</b> haislasupportctr@uniserve.com		<b>Website:</b> <a href="http://www.firstnationstreatment.org/haisla.htm">www.firstnationstreatment.org/haisla.htm</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males-No	Females-No	Co Ed based on need Specialized programs for women 2 times per year
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	19 and over		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Male	Couples Inmates (with probation order)	<b>Clients on Methadone Accepted: Yes</b>
<b>Special Services</b>	Intake Screening Dual Addictions Follow Up/Aftercare	Will accept clients with dual diagnosis	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Hallucinogens Prescription	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Case management</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/ personal development</li> <li>• Referral</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Materials		
<b>Accreditation Status</b>	In process		

<b>Treatment Centre:</b> Hay' Way' Noqu 401, 1638 East Broadway Vancouver, <b>BRITISH COLUMBIA</b> V5T-1V4		<b>Contact:</b> Marie Anderson <b>Phone:</b> (604) 874-1831 <b>Fax:</b> (604) 874-5235 <b>Date Opened:</b> 1989	
<b>Email:</b> <a href="mailto:heywaynoqu@telus.net">heywaynoqu@telus.net</a>		<b>Website:</b> <a href="http://www.firstnationstreatment.org/heywaynoqu.htm">www.firstnationstreatment.org/heywaynoqu.htm</a>	
<b>Treatment Type</b>	Out Patient	Day program	
<b>Number of Spaces</b>	No Limit	<b>FNIHB Funded</b>	1.3 bed equivalent
<b>Specific Spaces For</b>	Males– Yes	Females- Yes	
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	All ages		
<b>Treatment Cycle</b>	Individual Based		
<b>Intake Frequency</b>	Daily		
<b>Type of Treatment Program</b>	Adult Women Men	Families Youth Couples	<b>Clients on Methadone Accepted:</b> Yes
<b>Special Services</b>	Intake Screening Dual Addiction Interpretation Services	Follow Up/Aftercare Outpatient Services Psychological Services	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Ktunaxa/Kinbasket Health and Wellness Society 3628 Highway 21 Creston, <b>BRITISH COLUMBIA</b> V0B-1G2		<b>Contact:</b> Mary Basil <b>Phone:</b> (250) 428-5516 <b>Fax:</b> (250) 428-5235  <b>Date Opened:</b> Not Available	
<b>Email:</b> <a href="mailto:kkwc@shawcable.com">kkwc@shawcable.com</a>		<b>Website:</b> <a href="http://www.healing-journey.org">www.healing-journey.org</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males-No	Females-No	Co Ed based on need
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	19 and Over		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	* Some families	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Dual Addiction Interpretation Services	Follow Up/Aftercare Outpatient ( Limited) Psychological Services	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Case management</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>
<b>Impairments Accommodated</b>	FAS/FAE Brain Injuries		
<b>Disability Needs Services</b>	Large Print Material		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>First Survey:</b> January 2005

<b>Treatment Centre:</b> Namgis Substance Abuse Treatment Centre P.O.Box 290 Alert Bay, <b>BRITISH COLUMBIA</b> V0N-1A0		<b>Contact:</b> Mr. Ian Knipe <b>Phone:</b> (250) 974-5522 <b>Fax:</b> (250) 974-2257 <b>Date Opened:</b> 1984	
<b>Email:</b> PatD@namgis.bc.ca		<b>Website:</b> <a href="http://www.namgis.org">www.namgis.org</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	15	<b>FNIHB Funded</b>	15
<b>Specific Beds For</b>	Males-No	Females-No	Co Ed based on need
<b>Languages Offered</b>	English	First Nation (Kwak'wala)	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Couples ( 2 per cycle)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( Limited)
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Case management</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Traditional Medicines</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>
<b>Impairments Accommodated</b>	Visual Impairment Physical Disability	Hearing Impairment Developmental Disability	Learning Disability
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	In process	<b>By:</b> CARF	<b>First Survey:</b> October 2005

<b>Treatment Centre:</b> Nenqayni Wellness Centre P.O. Box 2529 Williams Lake, <b>BRITISH COLUMBIA</b> V2G- 4P2		<b>Executive Director:</b> Antoine Archie <b>Clinical Director:</b> Ralph Wright <b>Phone:</b> (250) 989-0301 <b>Fax:</b> (250) 989-0307  <b>Date Opened:</b> Not Available	
<b>Email:</b> aarchie@nenqayni.com		<b>Website:</b> <a href="http://www.firstnationstreatment.org/nenqayni.htm">http://www.firstnationstreatment.org/nenqayni.htm</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	19	<b>FNIHB Funded</b>	19
<b>Specific Beds For</b>	Males- No	Females- No	Family Unit based Co Ed
<b>Languages Offered</b>	First Nation	English	
<b>Target Age Group</b>	No age limitation		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Once per 6 week cycle		
<b>Type of Treatment Program</b>	Families	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Community Mobile Outreach	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( Limited) Other:
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Developmental Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> November 2001

<b>Treatment Centre:</b> Round Lake Treatment Centre 200 Emery Louis Road Armstrong, <b>BRITISH COLUMBIA</b> V0E 1B5		<b>Contact:</b> Jami Tonasket <b>Phone:</b> (250) 546-3077 <b>Fax:</b> (250) 546-3227 <b>Date Opened:</b> 1979	
<b>Email:</b> rltc@roundlake.bc.ca		<b>Website:</b> <a href="http://www.roundlake.bc.ca">www.roundlake.bc.ca</a>	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	36	<b>FNIHB Funded</b>	16
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co ed Program based on need
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	19 and over		
<b>Treatment Cycle</b>	5-6 Weeks		
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Couples ( 4 max per cycle)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Detoxification Intake Screening	Dual Addiction Follow Up/Aftercare	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Recreation Therapy</li> <li>• Case management</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Learning Disability (Assist)		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CARF	<b>Accreditation Date:</b> November 1993

<b>Treatment Centre:</b> North Wind Healing Center Box 240 Station A Dawson Creek, <b>BRITISH COLUMBIA</b> V0C-4T9		<b>Contact:</b> Isaac Hernandez <b>Phone:</b> (250) 843-6977 <b>Fax:</b> (250) 843-6978 <b>Toll Free:</b> 1-888-698-4333	
		<b>Date Opened:</b> 1996	
<b>Email:</b> t8heal@pris.bc.ca		<b>Website:</b> <a href="http://www.firstnationstreatment.org/North_Wind/north_wind.htm">http://www.firstnationstreatment.org/North_Wind/north_wind.htm</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	10	<b>FNIHB Funded</b>	10
<b>Specific Beds For</b>	Males- No	Females– No	Co Ed by referral need
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	30 days 24/7 Telephone Counselling		
<b>Intake Frequency</b>	Once Per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Inmates	<b>Clients on Methadone Accepted: No</b>
<b>Special Services</b>	Intake Screening Telephone Crisis ( 24/7)	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient Other: Sex Addiction Will accept clients with dual diagnosis
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Solvent Abuse Hallucinogens	Prescription Drugs
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> <li>• Cultural Activities</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• 24/7 Aftercare and telephone counselling</li> </ul>
<b>Impairments Accommodated</b>	Learning Disability FASD		
<b>Disability Needs Services</b>	Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Tsow-Tun le Lum Treatment Center Box 370-699 Capilano Road Lantzville, <b>BRITISH COLUMBIA</b> V0R-2H0		<b>Contact:</b> Ms Yvonne Rigsby-Jones <b>Phone:</b> (250) 390-3123 <b>Fax:</b> (250) 390-3119  <b>Date Opened:</b> Not Available	
<b>Email:</b> info@tsowtunlelum.org		<b>Website:</b> <a href="http://www.tsowtunlelum.org">www.tsowtunlelum.org</a>	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	34	<b>FNIHB Funded</b>	19
<b>Specific Beds For</b>	Males– No	Females– No	Co Ed by referral need
<b>Languages Offered</b>	English Holkemino		
<b>Target Age Group</b>	19 and over		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Once per cycle ( every 3 weeks)		
<b>Type of Treatment Program</b>	Adult Women Men	Parolees	<b>Clients on Methadone Accepted: No</b>
<b>Special Services</b>	Intake Screening	Dual Addiction Follow Up/Aftercare	Other: Special program for survivors of trauma and residential schools
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Other: will accept clients with dual diagnosis	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> November 2002

<b>Treatment Centre:</b> Wilp Si' Satx House of Purification Box 429 Cedarvale-Kitwanga Road Kitwanga, <b>BRITISH COLUMBIA</b> V0J 2A0		<b>Contact:</b> Mr. Donald Prince <b>Phone:</b> (250)-849-5211 <b>Fax:</b> (250) 849-5374 <b>Date Opened:</b> April, 1989	
<b>Email:</b> wilpchc@navigata.net		<b>Website:</b> <a href="http://www.wilpchc.ca/">http://www.wilpchc.ca/</a>	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	19	<b>FNIHB Funded</b>	19
<b>Specific Beds For</b>	Specific gender beds depending on program cycle		
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 weeks 3 week men's	3 week women's 10 day youth	5 week co ed
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Youth Elders	<b>Clients on Methadone Accepted:</b> Yes
<b>Special Services</b>	Intake Screening Walk In- Crisis	Dual Addiction Follow Up/Aftercare	Outpatient ( Limited) Other: Family Violence Program
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Case management</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Psychological Services ( funded through NNADAP/Mental Health)</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> May 2003

<b>Treatment Centre:</b> Nenqayni Wellness Center Youth Program P.O. Box 2529 Williams Lake, <b>BRITISH COLUMBIA</b> V2G- 4P2		<b>Executive Director:</b> Antoine Archie <b>Clinical Director:</b> Ralph Wright <b>Phone:</b> (250) 989-0301 <b>Fax:</b> (250) 989-0307  <b>Date Opened:</b> September 1996	
<b>Email:</b> aarchie@nenqayni.com		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient- Youth		
<b>Number of Beds</b>	10	<b>FNIHB Funded</b>	10 plus 2 families
<b>Specific Beds For</b>	Males- No	Females- Yes	Currently female gender specific
<b>Languages Offered</b>	First Nation ( Shushwap, Carrier,Chilcotin)	English	
<b>Target Age Group</b>	12-17		
<b>Treatment Cycle</b>	6 Months		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Youth Female Families	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Community Mobile Outreach	Dual Addiction Interpretation Services Follow Up/Aftercare	Outreach Services
<b>Treatment for Specific Substances</b>	Solvent Abuse		
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Developmental Disability	Visual Impairment (minor)	Hearing Impediment (minor)
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> November 2001

<b>Treatment Centre:</b> Beaver Lake Wah Pow Detox and Treatment Centre Box 1648 La La Biche, ALBERTA T0A 2C0		<b>Director:</b> Doreen Lameman <b>Program Coordinator:</b> Randy Whitford <b>Phone:</b> (780) 623-2553 <b>Fax:</b> (780) 623-4076	
		<b>Date Opened:</b> 1984	
<b>Email:</b> <a href="mailto:info@beaverlakewahpow.com">info@beaverlakewahpow.com</a>		<b>Website:</b> <a href="http://www.beaverlakewahpow.com">www.beaverlakewahpow.com</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	25	<b>FNIHB Funded</b>	25
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Daily		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Families	<b>Clients on Methadone Accepted:</b> Yes
<b>Special Services</b>	Detoxification Intake Screening	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Visual Impairment Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>First Survey:</b> September 2005

<b>Treatment Centre:</b> Footprints Healing Centre Box 3570 Morinville, ALBERTA T8R-1S3		<b>Director:</b> Rita V Arcand  <b>Phone:</b> (780) 939-3544/4787 <b>Fax:</b> (780) 939-2951/3524  <b>Date Opened:</b> Not Available	
<b>Email:</b> rva8660@yahoo.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males– 6	Females– 6	
<b>Languages Offered</b>	First Nation ( Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	35 Days		
<b>Intake Frequency</b>	Rotation basis		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Families ( no children)	<b>Clients on Methadone Accepted:</b> Yes
<b>Special Services</b>	Detoxification Intake Screening Medical Team	Dual Addiction Interpretation Services Follow Up/Aftercare	Aftercare Footcare Therapy Holistic healing
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Hallucinogens Prescription Drugs	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Evening/weekend program</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• On site Education</li> <li>• Healing Week</li> </ul>
<b>Impairments Accommodated</b>	Visual Impairment Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>First Survey:</b> April 2005

<b>Treatment Centre:</b> Kainaiwa Adolescent Treatment Centre Box 120 Standoff, ALBERTA TOL-1Y0		<b>Contact:</b> Twyla Little Shields <b>Phone:</b> (403) 653-3315 <b>Fax:</b> (403) 653-3328 <b>Date Opened:</b> 2004	
<b>Email:</b> btyr@theboss.net		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	7	<b>FNIHB Funded</b>	7
<b>Specific Beds For</b>	Males– No	Females– No	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Blackfoot)	English	
<b>Target Age Group</b>	12-17 years		
<b>Treatment Cycle</b>	3 months		
<b>Intake Frequency</b>	Daily		
<b>Type of Treatment Program</b>	Youth	<b>Clients on Methadone Accepted:</b> Yes	
<b>Special Services</b>	Intake Screening Dual Addiction	Interpretation Services Follow Up/Aftercare	Schooling – On site
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>First Survey:</b> TBA

<b>Treatment Centre:</b> Kapown Treatment Centre Box 40 Grouard, ALBERTA T0G 1C0		<b>Contact:</b> Bob Maracle <b>Phone:</b> (780) 751-3921 <b>Fax:</b> (780) 751-3831 <b>Date Opened:</b> February , 1983	
<b>Email:</b> maracleb48@yahoo.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	30	<b>FNIHB Funded</b>	30
<b>Specific Beds For</b>	Males-	Females-	Co Ed by referral need
<b>Languages Offered</b>	First Nation (Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	6-12 weeks		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Families (July Only)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In- Crisis	Dual Addiction Interpretation Services	Follow Up/Aftercare
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material	Large Print AA Book	
<b>Accreditation Status</b>	In Process	By: CCHSA	

<b>Treatment Centre:</b> Mark Amy Centre for Healing Addictions Ltd Box 5748 Fort McMurray, ALBERTA T9H- 4V9		<b>Contact:</b> Frank Tavares <b>Phone:</b> (780) 334-2398 <b>Fax:</b> (780) 334-2352 <b>Date Opened:</b> 1989	
<b>Email:</b> FTavares@onehealth.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	10
<b>Specific Beds For</b>	Males- Yes	Females- Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Cree) ( Chipewyan)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	4 weeks		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Dual Addiction	Interpretation Services Follow Up/Aftercare	Outpatient ( Limited) Other:
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Drinking and Driving workshops</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Anger Management</li> <li>• Grieving</li> <li>• FAS</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Developmental Disability	
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> May 2004

<b>Treatment Centre:</b> Morning Sky Problem Gambling Program Box 547 Frog Lake ALBERTA T0A-1M0		<b>Contact:</b> Karen Abraham <b>Phone:</b> (780) 943-2715 <b>Fax:</b> (780) 943-2007 <b>Date Opened:</b> Not Available	
<b>Email:</b> kabraham@onehealth.ca		<b>Website:</b> www.morningsky.ca	
<b>Treatment Type</b>	In Patient	Day Treatment	Out Patient
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	3 weeks		
<b>Intake Frequency</b>	daily		
<b>Type of Treatment Program</b>	Adult Women Men	Family treatment (considered)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening	Follow Up/Aftercare	Outpatient
<b>Treatment for Specific Addiction</b>	Problem Gambling		
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Gambling Awareness</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> <li>• Drinking and Driving workshops</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Anger Management</li> <li>• Evening Program</li> <li>• Healing Circle</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access	Large Print Reading Materials	
<b>Accreditation Status</b>	Not Accredited ( So far)		

<b>Treatment Centre:</b> St Pauls Treatment Center Box 179 Cardston, ALBERTA T0K-0K0		<b>Contact:</b> Woodrow Goodstriker <b>Phone:</b> (403)737-3756 <b>Fax:</b> (403)737-2207 <b>Toll free:</b> 1-888-737-3757  <b>Date Opened:</b> 1977	
<b>Email:</b> stpauls@telusplanet.net		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	24	<b>FNIHB Funded</b>	24
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co ed by referral need
<b>Languages Offered</b>	First Nation ( Blackfoot)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	Once Per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Follow Up/Aftercare	Dual Addiction Interpretation Services	Outpatient ( Limited) Residential School Survivors Group
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Hearing Impediment	Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> October 2003

<b>Treatment Centre:</b> Tsuu T'ina Spirit Healing Lodge Society 3700 Anderson Road SW Box 101 Calgary, ALBERTA T2W-3C4		<b>Contact:</b> Mr. Mervin Wolfleg <b>Phone:</b> (403) 281-6866/6933 <b>Fax:</b> (403) 238-0995 <b>Date Opened:</b> 1977	
<b>Email:</b> ttshl@telusplanet.net		<b>Website:</b> Under Construction	
<b>Treatment Type</b>	After Care (Residential)		
<b>Number of Beds</b>	10	<b>FNIHB Funded</b>	10
<b>Specific Beds For</b>	Males-Yes- 6 beds	Females– Yes– 4 beds	Co– Ed
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Continuous up to 2 weeks of program start		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction	Follow Up/Aftercare
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	None		
<b>Disability Needs Services</b>	Wheelchair Access (limited)		
<b>Accreditation Status</b>	Not Accredited	Researching Accreditation Options	

<b>Treatment Centre:</b> Young Spirit Winds Treatment Program Box 570 Hobbema, ALBERTA TOC-1N0		<b>Contact:</b> Theresa Bull <b>Phone:</b> (780) 585-2219 <b>Fax:</b> (780) 585-2665 <b>Date Opened:</b> June 2004	
<b>Email:</b> cindiemsimon@yahoo.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	Day Treatment ( Out patient)		
<b>Number of Spaces</b>	15 space Max	<b>FNIHB Funded</b>	same
<b>Specific Beds For</b>	Males– No	Females– No	Co Ed by referral need
<b>Languages Offered</b>	First nation ( Cree)	English	
<b>Target Age Group</b>	17 and under		
<b>Treatment Cycle</b>	17 weeks		
<b>Intake Frequency</b>	Daily		
<b>Type of Treatment Program</b>	Youth Families ( Soon)	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Walk In– Crisis	Interpretation Services Follow Up/Aftercare	Outpatient Other: Prevention Project
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Evening Program</li> </ul>
<b>Impairments Accommodated</b>	None		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> White Swan Treatment Centres Inc. Box 25 Kinuso, ALBERTA T0G-1X0		<b>Director:</b> Bertha Paddy <b>Phone:</b> (780) 775-2555 <b>Fax:</b> (780) 775-2552 <b>Date Opened:</b> Sept, 2000	
<b>Email:</b> dianemaloney@msn.com		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient	Service Delivery at two separate locations	
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males– 6	Females– 6	
<b>Languages Offered</b>	First Nation ( Cree)	English	
<b>Target Age Group</b>	12-17	Possibly accept younger ages based on referral	
<b>Treatment Cycle</b>	6 months		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Youth Male Youth Female	Family program in residence	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Detoxification Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	
<b>Treatment for Specific Substances</b>	Solvent Abuse		
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case Management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• On Site Education</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Learning Disability ( minor) Developmental Disability	Hearing Impediment
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> September 2004

<b>Treatment Centre:</b> Athabasca Alcohol and Drug Abuse Project Box 162 Black Lake, SASKATCHEWAN S0J-0H0		<b>Contact:</b> Sandra Hanson <b>Phone:</b> (306) 439-2200 <b>Fax:</b> (306) 439-2211	
		<b>Fond Du Lac:</b> (306) 686-2077) Fax: 306-686-2050 <b>Wollaston Lake</b> (306) 633-2088 Fax: 306-663-2013 <b>Black Lake:</b> (306) 284-2124 <b>Fax:</b> 306-284-2173 <b>Date Opened:</b> Not Available	
<b>Email:</b> shanson@Athabascahealth.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	Out Patient		
<b>Number of Beds</b>	No Beds	<b>FNIHB Funded</b>	Out Patient
<b>Specific Spaces For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Dene)	English	
<b>Target Age Group</b>	No Age Limit		
<b>Treatment Cycle</b>	1 month (longer as needed)		
<b>Intake Frequency</b>	Daily		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Youth	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis Telephone Counselling	Dual Addiction Interpretation Services	Outpatient Services Follow Up/Aftercare
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Referral/Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Sessions</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Follow Up</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Phone Counselling</li> <li>• Home Visits</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Clear Water River Dene Nation Box 5010 Clearwater River, SASKATCHEWAN S0M- 3G0		<b>Contact:</b> Gordon Laliberte <b>Phone:</b> ( 306) 822-2033 <b>Fax:</b> (306) 822-2750 <b>Date Opened:</b> 1999	
<b>Email:</b> clearwatertc@yahoo.com		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	17	<b>FNIHB Funded</b>	17
<b>Specific Beds For</b>	Males- 8	Females-8	Extra bed as needed
<b>Languages Offered</b>	First Nation (Dene)	English	
<b>Target Age Group</b>	19 and over		
<b>Treatment Cycle</b>	28 days		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Inmates	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In- Crisis	Dual Addiction Interpretation Services	Outpatient ( Limited) Follow Up/Aftercare
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Visual Impairment	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited Yet		

<b>Treatment Centre:</b> Cree Nations Treatment Haven Box 340 Canwood, SASKATCHEWAN S0J-0K0		<b>Contact:</b> Louis J.A. van Loon <b>Phone:</b> (306) 468-2072 <b>Fax:</b> (306) 468-2758 <b>Date Opened:</b> 1987	
<b>Email:</b> cree.nations@sasktel.net		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	20	<b>FNIHB Funded</b>	20
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation (Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	Weekly		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Inmates	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Interpretation Services	Dual Addiction Gambling Addiction	Sexual Addiction Tobacco Cessation
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse ( some) Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>First Survey:</b> TBA

<b>Treatment Centre:</b> Ekweskeet Youth Healing Lodge Box 280 Onion Lake, SAKATCHEWAN S0M-2E0		<b>Contact:</b> Albert Jimmy <b>Phone:</b> (306) 344-2094/2380 <b>Fax:</b> (306) 344-4805  <b>Date Opened:</b> Slated to Open April 2005	
<b>Email:</b> In process		<b>Website:</b> Under Construction	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	9	<b>FNIHB Funded</b>	9
<b>Specific Beds For</b>	Males– Yes	Females-Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation (Cree)		
<b>Target Age Group</b>	17 and under		
<b>Treatment Cycle</b>	12 weeks		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Youth Male Youth Female	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Learning Disability	( Special Education Program)
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited Yet		

<b>Treatment Centre:</b> Mistahey Musqua Treatment Center Box 404 Loon Lake, SASKATCHEWAN S0M-1L0		<b>Contact:</b> Dave King <b>Phone:</b> (306) 837-2184 <b>Fax:</b> (306) 837-4414 <b>Date Opened:</b> 1986	
<b>Email:</b> mmtc@sasktel.net		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	5	<b>FNIHB Funded</b>	5
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation (Cree)		
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	4 weeks		
<b>Intake Frequency</b>	Once per cycle	10 per year	
<b>Type of Treatment Program</b>	Adult Women Men	Youth (on occasion) Couples	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( Limited) Other:
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	Gambling
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited Yet-but working towards it		

<b>Treatment Centre:</b> New Dawn Valley Center Box 400 Fort Qu'apelle, SASKATCHEWAN S0G-1S0		<b>Contact:</b> <b>Phone:</b> (306)332-5637 <b>Fax:</b> (306)332-4815 <b>Date Opened:</b> May 1, 1978	
<b>Email:</b>		<b>Website:</b>	
<b>Treatment Type</b>	Centre Currently Closed for redevelopment		
<b>Number of Beds</b>			
<b>Specific Beds For</b>			
<b>Languages Offered</b>			
<b>Target Age Group</b>			
<b>Treatment Cycle</b>			
<b>Intake Frequency</b>			
<b>Type of Treatment Program</b>			
<b>Special Services</b>			
<b>Treatment for Specific Substances</b>			
<b>Treatment Components</b>			
<b>Impairments Accommodated</b>			
<b>Disability Needs Services</b>			
<b>Accreditation Status</b>			

<b>Treatment Centre:</b> Sakwatamo Lodge Box 3917 Melfort, SASKATCHEWAN S0E- 1A0		<b>Contact:</b> Joan Breland <b>Phone:</b> (306) 864-3631/3632 <b>Fax:</b> (306) 864-2204 <b>Date Opened:</b> 1988	
<b>Email:</b> sakwatamo@sasktel.net		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	20	<b>FNIHB Funded</b>	20
<b>Specific Beds For</b>	Males- Yes	Females- Yes	Co Ed by referral need
<b>Languages Offered</b>	First nation ( Cree)	English	
<b>Target Age Group</b>	18 and Over	Some youth and family components and specialized services offered August through December	
<b>Treatment Cycle</b>	4 weeks		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Families	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Interpretation Services	Dual Addiction Follow Up/Aftercare	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Developmental Disability	
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Saulteaux Healing and Wellness Center Inc. Box 868 Kamsack, SASKATCHEWAN S0A-1S0		<b>Contact:</b> Zelda Quewezance <b>Phone:</b> (306) 542-4110 <b>Fax:</b> (306) 542-3241 <b>Date Opened:</b> 1998	
<b>Email:</b> Not Available		<b>Website:</b> Not Available	
<b>Treatment Type</b>	Out Patient		
<b>Number of Beds</b>	Out Patient	<b>FNIHB Funded</b>	Out Patient
<b>Specific Spaces For</b>	Males– Yes	Females– Yes	
<b>Languages Offered</b>	First Nation ( Saulteaux)	English	
<b>Target Age Group</b>	No Age Limit		
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	By Client Need		
<b>Type of Treatment Program</b>	Adult Women Men	Youth Couples Families	<b>Clients on Methadone Accepted:</b> Yes ( in conjunction with hospital)
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Follow Up/Aftercare	Outpatient
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Referral/Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Sessions</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Home Visits</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> White Buffalo Treatment Center Box 2500 Prince Albert, SASKATCHEWAN S6V-7G3		<b>Contact:</b> Anna Flaminio <b>Phone:</b> (306) 764-5250 <b>Fax:</b> (306) 764-5255 <b>Date Opened:</b> February, 1997	
<b>Email:</b> gatimoyoo@onehealth.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	10	<b>FNIHB Funded</b>	10 plus 2 Outreach
<b>Specific Beds For</b>	Females Only		
<b>Languages Offered</b>	First Nation ( Cree)	English	
<b>Target Age Group</b>	12-17		
<b>Treatment Cycle</b>	4 months		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Youth– Female		<b>Clients on Methadone Accepted:</b>
<b>Special Services</b>	Detoxification Intake Screening	Dual Addiction Interpretation Services Follow Up/Aftercare	Outreach Mobile Treatment
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Primarily Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills</li> <li>• Referral</li> <li>• Strength Based Programming</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Hearing Impediment Developmental Disability	Learning Disability
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> November 1999

<b>Treatment Centre:</b> Native Addiction Council of Manitoba 160 Salter Street Winnipeg, MANITOBA R2W-4K1		<b>Contact:</b> Bertha Fontaine <b>Phone:</b> (204) 586-8395 <b>Fax:</b> (204) 589-3921 <b>Date Opened:</b> 1972	
<b>Email:</b> nacm@escape.ca		<b>Website:</b> <a href="http://www.mts.net/~nacm/">http://www.mts.net/~nacm/</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	20	<b>FNIHB Funded</b>	20
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co ed by need
<b>Languages Offered</b>	First Nation ( Ojibway, Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	Once Per Cycle	Intake Mon– Wed	
<b>Type of Treatment Program</b>	Adult Women Men	Couples Inmates	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient Other: Family Intervention day and evening treatment
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	Gambling program
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Women’s Sage 6 week program</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> November 2004

<b>Treatment Centre:</b> Nelson House Medicine Lodge Box 458 Nelson House, <b>MANITOBA</b> R0B 1A0		<b>Contact:</b> Ed Azure <b>Phone:</b> (204) 484-2256 <b>Fax:</b> (204) 484-2016 <b>Date Opened:</b> 1989	
<b>Email:</b> eazure@medicinelodge.ca		<b>Website:</b> <a href="http://www.medicinelodge.ca">www.medicinelodge.ca</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	21	<b>FNIHB Funded</b>	21
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	17 weeks		
<b>Intake Frequency</b>	On demand pending availability		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Inmates	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Detoxification Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Prescription Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA/	<b>Accreditation Date:</b> November 2004

<b>Treatment Centre:</b> Peguis Al-Care Treatment Centre Box 69 Peguis, MANITOBA R0C-3J0		<b>Contact:</b> J. Maxine Stevenson <b>Phone:</b> (204) 645-2666 <b>Fax:</b> (204) 645-2216 <b>Date Opened:</b> 1986	
<b>Email:</b> None		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	20	<b>FNIHB Funded</b>	20
<b>Specific Beds For</b>	Males– Yes	Females– Yes	
<b>Languages Offered</b>	First Nation ( Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	42 Days		
<b>Intake Frequency</b>	Once per cycle	Staggered Weeks	
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening	Outpatient Services	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Sagkeeng Mino Pimatiziwin Family Center Box 4 Fort Alexander, MANITOBA R0E-0P0		<b>Contact: Vacant</b> <b>Phone:</b> (204) 367-2172 <b>Fax:</b> (204) 367-2324 <b>Date Opened:</b> 2004	
<b>Email:</b>		<b>Website:</b> Not Available	
<b>Treatment Type</b>	Family In Patient		
<b>Number of Beds</b>	10	<b>FNIHB Funded</b>	10
<b>Specific Beds For</b>	Males– No	Females– No	Family Units
<b>Languages Offered</b>	First Nation ( Ojibway)	English	
<b>Target Age Group</b>	All ages	Children ( with Parents)	
<b>Treatment Cycle</b>	7 weeks		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Families Children	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( Limited)
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Hearing Impediment Developmental Disability	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	In Process	By: CCHSA	

<b>Treatment Centre:</b> Whiskyjack Treatment Center Box 580 Norway House, MANITOBA R0B-1Y0		<b>Contact:</b> Florence Duncan <b>Phone:</b> (204) 359-8995 <b>Fax:</b> (204) 359-6497 <b>Date Opened:</b> October 1996	
<b>Email:</b> fjduncan@msn.com		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In patient	12 beds solvent 10 beds Alcohol and drugs	
<b>Number of Beds</b>	22	<b>FNIHB Funded</b>	22
<b>Specific Beds For</b>	Males– No	Females– No	As needed by referral
<b>Languages Offered</b>	First Nation ( Cree) (Ojibway)	English	
<b>Target Age Group</b>	11-17		
<b>Treatment Cycle</b>	6 Months		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Youth Male Youth Female	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Detoxification Intake Screening	Dual Addiction Follow Up/Aftercare	Outpatient ( Limited) Other:
<b>Treatment for Specific Substances</b>	Alcohol All Drugs	Solvent Abuse	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Developmental Disability Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	In Process	By: CCHSA	

<b>Treatment Centre:</b> Anishnabie Naadmaagi Gamig Treatment Centre Box 568 Blind River, ONTARIO P0R-1B0		<b>Contact:</b> Janice Thibodeau <b>Phone:</b> (705) 356-1681 <b>Fax:</b> (705) 356-1684 <b>Date Opened:</b> 1991	
<b>Email:</b> janic1@bellnet.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	16	<b>FNIHB Funded</b>	10
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by need
<b>Languages Offered</b>	First Nation ( Ojibway)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	4 weeks		
<b>Intake Frequency</b>	Bi Weekly		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Dual Addiction	Interpretation Services Follow Up/Aftercare	Outpatient Services
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>First Survey:</b> April 2005

<b>Treatment Centre:</b> Dilico Ojibwa Child and Family Services 120 Carp River Road Thunder Bay, ONTARIO P7J-1K1		<b>Contact:</b> Betty Perreault <b>Phone:</b> (807) 623-7963 <b>Fax:</b> (807) 623-2810 <b>Date Opened:</b> Not Available	
<b>Email:</b> <a href="mailto:bettyperreault@dilico.com">bettyperreault@dilico.com</a>		<b>Website:</b> <a href="http://www.dilico.com">www.dilico.com</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	20	<b>FNIHB Funded</b>	20
<b>Specific Beds For</b>	Males-10	Females-10	
<b>Languages Offered</b>	First Nation ( Ojibway)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	Weekly		
<b>Type of Treatment Program</b>	Adult Women Men	Inmates	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Dual Addiction	Interpretation Services Follow Up/Aftercare	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse ( Depending on severity) Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairments		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> June 2002

<b>Treatment Centre:</b> Migisi Alcohol and Drug Abuse Treatment Centre Anishinabe of Wauzhushk Onigum Nation Box 1340 Kenora, <b>ONTARIO</b> P9N-3X7		<b>Contact:</b> Glen Murray ( Interim) <b>Phone:</b> (807) 548-5959 <b>Fax:</b> (807) 548-2084 <b>Date Opened:</b> 1989	
<b>Email:</b> migisi@voyageur.ca		<b>Website:</b> <a href="http://www.voyageur.ca/~migisi/">http://www.voyageur.ca/~migisi/</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	14	<b>FNIHB Funded</b>	14
<b>Specific Beds For</b>	Males– Yes	Females– Yes	
<b>Languages Offered</b>	First Nation ( Ojibway)	English	
<b>Target Age Group</b>	19 and over		
<b>Treatment Cycle</b>	4 weeks		
<b>Intake Frequency</b>	Once per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Detoxification Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( Limited) Other:
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Native Horizons Treatment Center 130 New Credit Road RR # 1 Site 3A, Box 6 Hagersville, ONTARIO NOA-1H0		<b>Contact:</b> Wanda Smith <b>Phone:</b> (905) 768-5144 <b>Fax:</b> (905) 768-5564 <b>Toll Free:</b> 1-877-330-8467  <b>Date Opened:</b> 1990	
<b>Email:</b> nhtc@sympatico.ca		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	15	<b>FNIHB Funded</b>	15
<b>Specific Beds For</b>	Males-Yes	Females– Yes	Co Ed by need
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	6 Weeks		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Inmate	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Dual Addiction	Interpretation Services Follow Up/Aftercare	Outpatient Services
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Learning Disability	Hearing Impediment Visual Impairment	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Ngwaagan Gamig Recovery Centre Inc. Box 81, 56 Pitawanakat Wikwemikong, <b>ONTARIO</b> POP-2J0		<b>Contact:</b> Rolanda Manitowabi <b>Phone:</b> (705) 859-2324 <b>Fax:</b> (705) 859-2325 <b>Date Opened:</b> 1992	
<b>Email:</b> rainbowlodge@amtelecom.net		<b>Website:</b> <a href="http://www.msdcorp.com/rainbowlodge/">http://www.msdcorp.com/rainbowlodge/</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	8	<b>FNIHB Funded</b>	8
<b>Specific Beds For</b>	Males– Yes	Females– Yes	
<b>Languages Offered</b>	First Nation ( Ojibway)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	4 weeks		
<b>Intake Frequency</b>	Once Per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b>	
<b>Special Services</b>	Detoxification Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient Services Prevention Program
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Prescription Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and After-care Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>First Survey:</b> TBA

<b>Treatment Centre:</b> Oh Shki Be Ma Te Ze Win Inc. Box 820 Fort Frances, ONTARIO P9A 3M3		<b>Contact:</b> Allen Yerxa <b>Phone:</b> (807) 274-8438 <b>Fax:</b> (807) 274-7753 <b>Date Opened:</b> Not Available	
<b>Email:</b> Not Available		<b>Website:</b> Not Available	
<b>Treatment Type</b>	Outpatient		
<b>Number of Spaces</b>	Unlimited	<b>FNIHB Funded</b>	
<b>Specific Spaces For</b>	Males– Yes	Females– Yes	Outpatient
<b>Languages Offered</b>	First Nation (Ojibway)	English	
<b>Target Age Group</b>	No Age Limitations	Specific Program for Adults, Youth	
<b>Treatment Cycle</b>	8 Weeks		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Youth	<b>Clients on Methadone Accepted:</b>
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient Services
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Prescription Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Reverend Tommy Beardy Memorial & Wee Che He Wayo Gamik Family Treatment Centre Box 131 Muskrat Dam, <b>ONTARIO</b> POV-3B0		<b>Contact:</b> Coleen Arch <b>Phone:</b> (807) 471-2554 <b>Fax:</b> (807) 471-2510 <b>Date Opened:</b> Not Available	
<b>Email:</b> None		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	15	<b>FNIHB Funded</b>	15
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Family Units
<b>Languages Offered</b>	First nation ( Oji Cree)	English	
<b>Target Age Group</b>	No Age Limitation		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Once per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Families	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening	Dual Addiction Interpretation Services	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and After-care Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Sagashtawao Healing Lodge Box 99 Moosonee, ONTARIO POL-1Y0		<b>Contact:</b> Colette Hookimawillillene <b>Phone:</b> (705) 336-3450 <b>Fax:</b> (705) 336-3452 <b>Date Opened:</b> 1987	
<b>Email:</b> office@shlodge.com		<b>Website:</b> under construction	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	14	<b>FNIHB Funded</b>	14
<b>Specific Beds For</b>	Males-Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Cree)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	6 weeks	3 week relapse prevention	
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening Interpretation Services	Dual Addiction	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Hallucinogens	
<b>Treatment Components</b>	Assessment Client Orientation Professional Consultation Group Counselling Individual Treatment Planning Reports and Record Keeping	Alcohol and Drug Education Cultural Activities Individual and Aftercare Planning Intake Recreation Therapy	Case management Crisis Intervention Individual Counselling Life skills/personal development Referral
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> May 2003

<b>Treatment Centre:</b> Nimkee Nupigawagan Healing Centre RR # 1 Box 381 Muncey, ONTARIO NOL-1Y0		<b>Director:</b> Carol Hopkins <b>Phone:</b> (519) 264-2277 <b>Fax:</b> (519) 264-1552 <b>Toll Free:</b> 1-888-685-9862  <b>Date Opened:</b> January 1997	
<b>Email:</b> nimkee@netrover.com		<b>Website:</b> <a href="http://www.nimkee.ca/">http://www.nimkee.ca/</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	9	<b>FNIHB Funded</b>	9
<b>Specific Beds For</b>	Males- 9	Females-9	Genders rotate every 4 month cycle
<b>Languages Offered</b>	First Nation ( Ojibway,Cree)	English	
<b>Target Age Group</b>	12-17		
<b>Treatment Cycle</b>	4 Months		
<b>Intake Frequency</b>	Once Per cycle	January, May, September	
<b>Type of Treatment Program</b>	Youth Male Youth Female	Families ( portion)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening	Dual Addiction Follow Up/Aftercare	Outpatient ( Limited) Other: Day Treatment
<b>Treatment for Specific Substances</b>	Solvent Abuse ( Primarily)		
<b>Treatment Components</b>	Assessment Client Orientation Professional Consultation Group Counselling Individual Treatment Planning Reports and Record Keeping	Alcohol and Drug Educa- tion Cultural Activities Individual and Aftercare Planning Intake Recreation Therapy	Case management Crisis Intervention Individual Counselling Life skills/personal development Referral
<b>Impairments Accommodated</b>	Learning Disability Visual Impairment ( minor severity)		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> October 1999

<b>Treatment Centre:</b> Ka Na Chi Hh Solvent Centre Suite 102-100 Anemki Drive Thunder Bay, ONTARIO P7A-1J5		<b>Contact:</b> Vincent Simon <b>Phone:</b> ( 807) 626-1692 <b>Fax:</b> <b>Date Opened:</b> November 1996	
<b>Email:</b> vinsimon@hotmail.com		<b>Website:</b> <a href="http://www.kanachihh.ca/">http://www.kanachihh.ca/</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males– 12	Male Only	
<b>Languages Offered</b>	First Nation (Oji-cree, Ojibway, Cree)	English	
<b>Target Age Group</b>	16-25		
<b>Treatment Cycle</b>	Up to 2 years	Specialized Long Term	
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Adult Youth	Families ( portion)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Detoxification Intake Screening	Dual Addiction Interpretation Services Follow Up/Aftercare	
<b>Treatment for Specific Substances</b>	Solvent Abuse ( Primarily)		
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Hearing Impediment Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> November 2002

<b>Treatment Centre:</b> Center de readaptation Miam Uapukun Inc. ( Maliotenam) C.P. 389 Moisie, QUEBEC G0G-2B0		<b>Contact:</b> Delvina Gopeau <b>Phone:</b> (418) 927-2254 <b>Fax:</b> (418) 927-2262 <b>Date Opened:</b> 1998	
<b>Email:</b> <a href="mailto:centreka@globetrotter.net">centreka@globetrotter.net</a>		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males-	Females-	
<b>Languages Offered</b>	First Nation ( Innu)	French	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	21 days		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Inmates	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services	Follow Up/Aftercare
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> 2003

<b>Treatment Centre:</b> Center de readaptation Wapan C.P. 428 La Tuque, QUEBEC G9X -3P3		<b>Contact:</b> Fred Kistabish <b>Phone:</b> (819) 523-7641/7642 <b>Fax:</b> (819) 523-7513 <b>Date Opened:</b> 1990	
<b>Email:</b> wapan@lino.sympatico.ca		<b>Website:</b> <a href="http://www.wapan.org">www.wapan.org</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males-yes	Females– yes	
<b>Languages Offered</b>	French		
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	Under 4 weeks		
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Couples Other: 4 th and 5 th step	<b>Clients on Methadone Accepted:</b> Yes
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Follow Up/Aftercare	Outpatient ( Limited)
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> 2002

<b>Treatment Centre:</b> Mawiomi Treatment Services Box 1068 Gesgapegiag, , QUEBEC G0C-1Y0		<b>Contact:</b> Mary Bradstreet <b>Phone:</b> (418) 759-3522 <b>Fax:</b> (418) 759-3048 <b>Date Opened:</b> 1986	
<b>Email:</b> mawiomi@globetrotter.net		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	7	<b>FNIHB Funded</b>	7
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Mi' gmaq)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 Weeks		
<b>Intake Frequency</b>	Once Per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b>	
<b>Special Services</b>	Intake Screening Follow Up/Aftercare	Dual Addiction Interpretation Services	Outpatient Services
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Hallucinogens Prescription	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Onen'to:Kon Treatment Services 380 St. Michel P.O.Box 89 Kanehsatake, QUEBEC J0N 1E0		<b>Contact:</b> Mr. Curtis Nelson <b>Phone:</b> (450) 479-8353 <b>Fax:</b> (450) 479-1034 <b>Date Opened:</b> March 1987	
<b>Email:</b> onento.kon@qc.aibn.com		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	16	<b>FNIHB Funded</b>	16
<b>Specific Beds For</b>	Males– No	Females– No	Co ED based on referral need
<b>Languages Offered</b>	Mohawk English		
<b>Target Age Group</b>	18 and Over		
<b>Treatment Cycle</b>	6 weeks		
<b>Intake Frequency</b>	Once every 3 weeks		
<b>Type of Treatment Program</b>	Adult Women Men	Inmate	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( 2 offices)
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Hallucinogens Prescription	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Family Interventions</li> <li>• Relapse prevention</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Wanaki Center P.O. Box 37 Maniwaki, QUEBEC J9E-3B3		<b>Contact:</b> Patrick Dumont <b>Phone:</b> (819) 449-7000 <b>Fax:</b> (819) 449-7832 <b>Date Opened:</b> October 1991	
<b>Email:</b> wanaki@iresseau.com		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	11	<b>FNIHB Funded</b>	11
<b>Specific Beds For</b>	Males– yes	Females-yes	Depending on # of applicants
<b>Languages Offered</b>	First Nation (Algonquin)	English	French
<b>Target Age Group</b>	18 and over	17 with guardian consent	
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Family sessions	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Dual Addiction	Interpretation Services Follow Up/Aftercare	Outpatient ( Limited)
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens Other: Considered	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Aftercare release plans</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Visual Impairment	Learning Disability ( some)	
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> June 2000

<b>Treatment Centre:</b> Walgwan Center– First Nations Youth Rehabilitation Center Box 1009 Gesgapegiag, QUEBEC G0C-1Y0		<b>Contact:</b> Josee Quesnel <b>Phone:</b> (418) 759-3006 <b>Fax:</b> (418) 759-3064 <b>Date Opened:</b> June 6, 1997	
<b>Email:</b> fnyrc@globetrotter.net		<b>Website:</b> <a href="http://www.walgwan.com">www.walgwan.com</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males– No	Females– No	Co ed by need
<b>Languages Offered</b>	First Nation ( Mic Mac)	English	French
<b>Target Age Group</b>	12-17		
<b>Treatment Cycle</b>	3-6 Months	Possible extensions	
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Youth Male Youth Female	Families ( at end)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening	Dual Addiction Follow Up/Aftercare	Outreach Services
<b>Treatment for Specific Substances</b>	Solvent Abuse	And other solvent drugs	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability Developmental Difficulties	Learning Difficulties	
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> December 2003

<b>Treatment Centre:</b> Eagles Nest Recovery House Box 263 Shubenacadie, NOVA SCOTIA B0N 2H0		<b>Contact:</b> Bernard Knockwood <b>Phone:</b> (902) 758-4277 <b>Fax:</b> (902) 758-4229 <b>Date Opened:</b> 1989	
<b>Email:</b> nest@cnova.net		<b>Website:</b> <a href="http://www.eaglesnestrecovery.ca">www.eaglesnestrecovery.ca</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	7	<b>FNIHB Funded</b>	7
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed by referral need
<b>Languages Offered</b>	First Nation ( Mikmaq)	English	
<b>Target Age Group</b>	17 and over		
<b>Treatment Cycle</b>	8 weeks		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b> No	
<b>Special Services</b>	Intake Screening	Dual Addiction Interpretation Services	
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens Other:	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Kingsclear First Nation Outpatient Program 77 French Village Road Kingsclear First Nation, <b>NEW BRUNSWICK</b> E3E-1K3		<b>Contact:</b> Elizabeth Sacobie <b>Phone:</b> (506) 363-4005 <b>Fax:</b> (506) 363-4042 <b>Date Opened:</b> Not Available	
<b>Email:</b>		<b>Website:</b> Not Available	
<b>Treatment Type</b>	Out Patient		
<b>Number of Spaces</b>	Un limited	<b>FNIHB Funded</b>	Out Patient
<b>Specific Spaces For</b>	Males– Yes	Females– Yes	Out Patient
<b>Languages Offered</b>	English		
<b>Target Age Group</b>	No age limitations		
<b>Treatment Cycle</b>	4 weeks		
<b>Intake Frequency</b>	Once per cycle		
<b>Type of Treatment Program</b>	Adult Women Men	<b>Clients on Methadone Accepted:</b>	
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Follow Up/Aftercare	Outpatient Suicide Prevention Family Intervention
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Solvent Abuse	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Lone Eagle Treatment Center 491 Graham Road Elsipogtog, NEW BRUNSWICK E4W-2T8		<b>Contact:</b> Brian Augustine <b>Phone:</b> (506) 523-8244/8243 <b>Fax:</b> (506) 523- 8242 <b>Date Opened:</b> 1990	
<b>Email:</b> None		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	6	<b>FNIHB Funded</b>	6
<b>Specific Beds For</b>	Males- yes	Females-yes	Co ed by need
<b>Languages Offered</b>	First Nation ( Mikmaq)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Summer Youth Program	<b>Clients on Methadone Accepted:</b> Yes
<b>Special Services</b>	Intake Screening Walk In- Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( Limited)
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Visual Impairment	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Mi'kmaw Lodge Treatment Center 70 Gabriel Street Box 7824 Eskasoni, Cape Breton, NOVA SCOTIA B1W-1B4		<b>Contact:</b> Clarence J Gould <b>Phone:</b> (902) 379-2267/2262 <b>Fax:</b> (902) 379-2702/2412 <b>Date Opened:</b> 1985	
<b>Email:</b> nadaca@istar.ca		<b>Website:</b> <a href="http://www.mikmawlodge.ca/">http://www.mikmawlodge.ca/</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	15	<b>FNIHB Funded</b>	15
<b>Specific Beds For</b>	Males-	Females-	Co Ed 14 Double, 1 Private
<b>Languages Offered</b>	First Nation ( Mic Mac)	English	
<b>Target Age Group</b>	No Age Limitations		
<b>Treatment Cycle</b>	Varied by program	2 week relapse program 4 week youth program	5 week adult Co Ed
<b>Intake Frequency</b>	Daily		
<b>Type of Treatment Program</b>	Adult Women Men	Youth Inmate ( 1 per cycle)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Follow Up/Aftercare	Outpatient Services
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Visual Impairment Hearing Impediment	Learning Disability	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Rising Sun Rehabilitation Center 31 Riverview Road West Eel Ground, NEW BRUNSWICK E1V 4G2		<b>Contact:</b> Ms. Joyce Paul <b>Phone:</b> (506) 627-4626 <b>Fax:</b> (506) 627-4627 <b>Date Opened:</b> 1988	
<b>Email:</b> egrs@nbnet.nb.ca		<b>Website:</b> <a href="http://www.miramichi.net/risingsun">www.miramichi.net/risingsun</a>	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	10	<b>FNIHB Funded</b>	10
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Co Ed depending on need
<b>Languages Offered</b>	First Nation ( Mikmaq)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	5 weeks		
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Youth Corrections Client ( finished sentence)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening	Dual Addiction Follow Up/Aftercare	Outpatient Day program
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills</li> <li>• Referral</li> <li>• Medicine Wheel Teachings</li> <li>• Choice Theory</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability	Assessed Case by case	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Saputjivik Care Center Labrador Inuit Health Commission P.O.Box 234 North West River, LABRADOR AOP-1M0		<b>Contact:</b> Mr. Kevin Lane <b>Phone:</b> (709) 497-8509/8514 <b>Fax:</b> (709) 497-8944 <b>Date Opened:</b> 1987	
<b>Email:</b> pmsapu@hvgv.net		<b>Website:</b> Not Available	
<b>Treatment Type</b>	In Patient		
<b>Number of Beds</b>	12	<b>FNIHB Funded</b>	12
<b>Specific Beds For</b>	Males-Yes	Females– Yes	Co Ed
<b>Languages Offered</b>	First nation ( Inuktitut)	English	
<b>Target Age Group</b>	17 and under	18 and over	
<b>Treatment Cycle</b>	6 weeks	July ( Youth Program)	
<b>Intake Frequency</b>	Once Per Cycle		
<b>Type of Treatment Program</b>	Adult Women Men	Youth ( with consent) Couples Families Inmates	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( by health commission) Other: 7 offices in 7 communities
<b>Treatment for Specific Substances</b>	Alcohol Narcotics	Solvent Abuse Hallucinogens	Prescription
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> <li>• Reports and Record Keeping</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access		
<b>Accreditation Status</b>	Not Accredited		

<b>Treatment Centre:</b> Tobique Addiction rehab Center 23 Rehab Road Tobique First Nation, <b>NEW BRUNSWICK</b> E7H-3M9		<b>Contact:</b> Ms. Dianne Perley <b>Phone:</b> (506) 273-5403/5422 <b>Fax:</b> (506) 273-4286 <b>Date Opened:</b> 1987	
<b>Email:</b> tobiqueaddictionsrehab@hotmail.com		<b>Website:</b> Not Available	
<b>Treatment Type</b>	Out Patient		
<b>Number of Beds</b>	No Space Limited	<b>FNIHB Funded</b>	
<b>Specific Beds For</b>	Males– Yes	Females- Yes	
<b>Languages Offered</b>	First Nation ( Micmaq, Maliseet)	English	
<b>Target Age Group</b>	18 and over		
<b>Treatment Cycle</b>	Varies by client		
<b>Intake Frequency</b>	Continuous		
<b>Type of Treatment Program</b>	Adult Women Men	Youth ( on occasion)	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Intake Screening Walk In– Crisis	Dual Addiction Follow Up/Aftercare Youth– School talks	Outpatient Soaring Eagles Prevention Program
<b>Treatment for Specific Substances</b>	Alcohol Narcotics Prescription	Solvent Abuse Hallucinogens	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability		
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	Accredited	<b>By:</b> CCHSA	<b>Accreditation Date:</b> November 2001

<b>Treatment Centre:</b> Charles J Andrew Youth Treatment Center Box 109 Sheshatshiu, LABRADOR AOP-1M0		<b>Contact:</b> Kristin Sellon <b>Phone:</b> (709) 497-8995 <b>Fax:</b> (709) 497-8993 <b>Date Opened:</b> May 2000	
<b>Email:</b> kristinsellon@cjay.org		<b>Website:</b> <a href="http://www.cjay.org">www.cjay.org</a>	
<b>Treatment Type</b>	In patient		
<b>Number of Beds</b>	10	<b>FNIHB Funded</b>	10
<b>Specific Beds For</b>	Males– Yes	Females– Yes	Alternating 4 month block intake
<b>Languages Offered</b>	First Nation (Innueimun)	English	
<b>Target Age Group</b>	11-17		
<b>Treatment Cycle</b>	14 weeks		
<b>Intake Frequency</b>	Block intake		
<b>Type of Treatment Program</b>	Youth male Youth Female	Family Component	<b>Clients on Methadone Accepted:</b> No
<b>Special Services</b>	Detoxification (land based) Intake Screening	Dual Addiction Interpretation Services Follow Up/Aftercare	Outpatient ( Limited) Other:
<b>Treatment for Specific Substances</b>	Solvent Abuse	Alcohol and other drugs	
<b>Treatment Components</b>	<ul style="list-style-type: none"> <li>• Assessment</li> <li>• Client Orientation</li> <li>• Professional Consultation</li> <li>• Group Counselling</li> <li>• Individual Treatment Planning</li> <li>• Reports and Record Keeping</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol and Drug Education</li> <li>• Cultural Activities</li> <li>• Individual and Aftercare Planning</li> <li>• Intake</li> <li>• Recreation Therapy</li> </ul>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Crisis Intervention</li> <li>• Individual Counselling</li> <li>• Life skills/personal development</li> <li>• Referral</li> </ul>
<b>Impairments Accommodated</b>	Physical Disability (minor) Learning Disability (minor)	Developmental Disability (minor)	
<b>Disability Needs Services</b>	Wheelchair Access Large Print Material		
<b>Accreditation Status</b>	In process	<b>By:</b> CCHSA	<b>Next Survey:</b> 2005