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HANSARD

Friday, February 22, 2013

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**The Honourable Jackie Jacobson, Speaker**

**Legislative Assembly of the Northwest Territories**

Members of the Legislative Assembly

Speaker

Hon. Jackie Jacobson

(Nunakput)

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(Great Slave)

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*Minister of Human Resources*

*Minister of Public Works and Services*

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*Public Utilities Board*

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*NWT Power Corporation*

Mr. Alfred Moses

(Inuvik Boot Lake)

Mr. Michael Nadli

(Deh Cho)

Hon. David Ramsay

(Kam Lake)

*Minister of Industry, Tourism*

*and Investment*

*Minister of Transportation*

Mr. Norman Yakeleya

(Sahtu)

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**YELLOWKNIFE, NORTHWEST TERRITORIES**

**Friday, February 22, 2013**

**Members Present**

Hon. Glen Abernethy, Hon. Tom Beaulieu, Ms. Bisaro, Mr. Blake, Mr. Bouchard, Mr. Bromley, Mr. Dolynny, Mrs. Groenewegen, Mr. Hawkins, Hon. Jackie Jacobson, Hon. Jackson Lafferty, Hon. Bob McLeod, Hon. Robert McLeod, Mr. Menicoche, Hon. Michael Miltenberger, Mr. Moses, Mr. Nadli, Hon. David Ramsay, Mr. Yakeleya

The House met at 10:01 a.m.

# Prayer

---Prayer

**SPEAKER (Hon. Jackie Jacobson):** Good morning, colleagues. Item 2, Ministers’ statements. The Minister of Transportation, Mr. Ramsay.

# Ministers’ Statements

## MINISTER’S STATEMENT 21-17(4): MACKENZIE VALLEY HIGHWAY

**HON. DAVID RAMSAY:** The construction of an all-weather highway down the Mackenzie Valley to the Arctic coast is vital to connect our communities, and to access a wealth of natural resources that are critical for growing the NWT economy and ensuring Canada remains prosperous within the global economy.

Mr. Speaker, the northern most segment of the Mackenzie Valley all-weather highway, the Inuvik-Tuktoyaktuk highway, is our first priority for construction. This highway has received much attention recently as the Government of the Northwest Territories approaches some key decision points concerning the next steps for construction of this segment. At the same time, the Department of Transportation is reaching significant and notable milestones in planning the southern section of the highway from Wrigley to the Dempster Highway. The recent exploration activity in the Sahtu has drawn much attention to the southern portion of the Mackenzie Valley and we need to also continue our planning efforts to focus on the next construction priority: the road from Wrigley to Norman Wells.

I’m very pleased to announce the department initiated the second planning stage for the Mackenzie Valley Highway at the beginning of February.

Four project description reports for highway segments passing through land claim settlement areas have been combined into one scoping document and submitted to the Mackenzie Valley Land and Water Board for initial review. The department requested the application be referred to an environmental assessment. Last week the

Mackenzie Valley Environmental Impact Review Board initiated the environmental review process for the proposed all-weather highway from Wrigley to the Dempster.

The project description reports for the southern segment of the highway were completed through partnerships with CanNor and Aboriginal land claim organizations. The partnerships delivered environmental and engineering information to support the regulatory review process for the all-weather highway project.

The Department of Transportation has engaged the federal government in discussions on funding for additional planning activities required to move the project through the EA process. In support of this work, CanNor recently contributed $600,000 for the next stage of environmental and engineering study activities.

A memorandum of understanding to create a partnership for Stage 2 Planning Activities was signed with the Gwich’in Development Corporation in January 2013 and a similar MOU is anticipated with the Tulita District Investment Corporation shortly.

While we work through the planning process for the all-weather highway, we have also been busy upgrading the Mackenzie Valley winter road. Through federal partnerships, such as the Building Canada Plan, the Department of Transportation has already invested over $100 million in incremental infrastructure improvements on the winter road.

The winter road’s grade and alignment have been improved significantly at key locations and the installation of permanent bridges has helped to stabilize the road’s operating season in the face of warming weather. Improvements in safety have been achieved by installing signs to indicate speed limits, distance and changing surface conditions.

Mr. Speaker, since 2005, the department has been collaborating with industry through annual contribution agreements to improve the level of service on the road to accommodate increased heavy traffic associated with resource development needs. This year the GNWT received $1.2 million in contributions from industry to advance the winter road construction effort.

This additional funding has allowed the department to accelerate the construction of ice crossings to deliver earlier access to the winter road, strengthen the road surface to better receive heavy equipment, and accommodate the demobilization of rigs and other gear at the latest possible date in the spring. Unfortunately, advance planning cannot account for the added measure of unpredictable and sometimes severe weather conditions experienced this year.

To improve safety, the department has increased the number of vehicle inspections and enforcement patrols, and is providing information packages to industrial drivers new to the winter road experience. Additional signage marking all the crossings will help new drivers understand and communicate their locations as they travel the route. We will continue to engage industry and work with them to improve winter road safety.

Mr. Speaker, while the capital investments required to complete the highway are substantial, the benefits that will accrue from this investment are significant and national in scope. The completion of the all-weather highway will improve access to our communities, help maximize the exploration investments from resource development companies, provide greater certainty for further exploration, and create significant employment opportunities for Northerners during construction and ongoing maintenance.

Mr. Speaker, strategic investment in our transportation infrastructure that will support economic development is an investment in a strong, prosperous Northwest Territories. The Department of Transportation is pleased to be moving the Mackenzie Valley Highway into the environmental assessment phase and closer to realizing the dream of an all-weather highway down the entire length of the Mackenzie Valley. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Ramsay. The honourable Minister of Municipal and Community Affairs, Mr. McLeod.

## MINISTER’S STATEMENT 22-17(4): GOOD GOVERNANCE CONFERENCES

**HON. ROBERT MCLEOD:** Mr. Speaker, today I am pleased to speak about the Department of Municipal and Community Affairs’ upcoming Good Governance Conference. This year’s conference theme is Community Ownership. The conference will take place at the Explorer Hotel in Yellowknife from February 26th to 28th and 165 participants representing all 33 communities are expected to attend.

Mr. Speaker, our 33 community governments play a vital role in the sustainability and strength of our territory. MACA, through the School of Community Government, continues to support them as they build capacity to address their increased authority.

We promote and support effective governance and program delivery through initiatives such as the Advancing Local Government Administrators Program, the Community Government Mentorship Program, Occupational Certification and the Recreation Leaders Program. We also provide specific training on a wide range of community government-related topics. From April to December 2012, 450 community government staff from 29 communities participated in courses delivered through the School of Community Government.

Building community capacity requires partnerships with stakeholders, including the Northwest Territories Association of Communities, the Local Government Administrators of the NWT, our own Department of Human Resources and community governments themselves.

Strategic investments in capacity building have resulted in programs that meet community governments’ unique needs. The Public Service Capacity Initiative, through which MACA is hosting the upcoming conference, is one example of the type of collaborative program being delivered through the school.

This year’s conference theme of Community Ownership reflects the importance of asset management and community involvement in planning. Sessions will cover a variety of topics and feature some of the foremost experts in the field from the North and across Canada. We will talk about community capacity and how to keep our communities sustainable, vibrant and safe.

I invite all of my fellow Members to attend what is sure to be an informative conference. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. McLeod. The honourable Minister of Health and Social Services, Mr. Beaulieu.

## MINISTER’S STATEMENT 23-17(4): EARLY CHILDHOOD DEVELOPMENT

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. It is a priority of this government that children get the best possible start in life so they can reach their full potential. It is important that we continue investment in early childhood development as this is an investment in the future of our children.

In January of this year, in partnership with the Department of Education, Culture and Employment, we hosted a roundtable to identify priorities for a renewed Early Childhood Development Framework. I’m pleased to report that the roundtable was a success.

I know the Members of this House that attended the roundtable would agree that the experts provided us with great insights about integrating new research findings into current practices.

Mr. Speaker, it is important to note that we are on the right track. The experts and the local presenters confirmed that we are funding the right programs. We must continue with existing programs like the Healthy Families Program, which we plan to expand to more communities. This program provides community-level support for families.

We continue our investment of over 3 percent of our budget in prevention programs. We know that by starting prevention programs at a young age will allow our families to grow strong and healthy. Our Mental Health and Addictions Plan, A Shared Path Towards Wellness, will complement our Early Childhood Development Framework.

We continue to support the great work NGOs are providing. NGOs like the NWT Literacy Council and NWT Disability Council and programs like the Aboriginal Head Start will contribute to successful early childhood development.

We all want our children to have the best possible start in life. We must work in partnership with all agencies to ensure that our children are healthy and can grow into responsible, healthy residents.

Minister Lafferty and I look forward to sharing our renewed framework with Members of this Assembly. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Item 3, Members’ statements. The honourable Member for Sahtu, Mr. Yakeleya.

# Members’ Statements

## MEMBER’S STATEMENT ON NEED FOR A SOCIAL HOUSING STRATEGIC PLAN

**MR. YAKELEYA:** Thank you, Mr. Speaker. The federal government will be getting out of public housing in 2038. That’s 25 years from now. I should be about 35 years old by then. The federal government will not continue to allocate funding for social housing in the Northwest Territories or in Canada.

We are experiencing cutbacks from social housing right now as we speak. Every year we’re receiving less and less. Soon the money will run dry, and then what? Are we ready for this? That’s a good question.

Today we own about 2,400 public housing units in the Northwest Territories. Each unit costs the NWT Housing Corporation about $16,000 per year. That includes electricity, heat, and water and sewer delivery. The sad part is that we have some houses sitting empty in our communities.

People keep reminding me of the promises that were made by the government of the day a long time ago, about how they were going to own their own homes once they were relocated off the land and put into public housing units at that time. Since we pay more for keeping our residents in those units, they are still not close to owning their own homes. They are residents who live in those units until they pass on. The government has to do away with that kind of thinking and work with people in training, creating jobs and assisting our residents with home ownership, and make it a priority of this government to provide support to our residents to become homeowners.

We value and take pride in our diverse cultures and our ability to adapt, and I believe we could adapt to new ways of looking at housing. We need to have discussions with our people, pay attention to them, and to adjust our strategic planning to see the future of our residents. We need a comprehensive territorial or national housing strategy.

We’re all in this together. There’s no telling what will happen if we work together with our residents and come up with solutions for our housing strategic plan. With the right amount of funding, it might just work. We need it to work. We need it to work now.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. The honourable Member for Range Lake, Mr. Dolynny.

## MEMBER’S STATEMENT ON HEALTH BUDGET REDUCTION OPPORTUNITIES IDENTIFIED DURING BUDGET DIALOGUE 2012

**MR. DOLYNNY:** Thank you, Mr. Speaker. A couple of months ago our Minister of Finance took to the skies with his childhood bag of Legos and travelled the territory to talk to the people about the budget. I must admit the format was unique and provided some visual interaction, but months later, after the report has been tabled, one must look back and ask what we learned. What was used from this experience to influence the main estimates we’re currently reviewing? Did we listen? More importantly, did we hear the wishes of our people?

Interestingly, we are currently looking at the Department of Health and Social Services budget and I find myself dusting off this Budget Dialogue 2012 report to see what was captured and what was being transferred to good use today. Health was cited by most participants as the area where there were the most opportunities for savings. Suggestions range from cost reduction in administration of medical travel, using strategic staffing, using technology to reduce medical travel and investing in healthy lifestyles. These were all opportunities of efficiencies.

Medical travel, comments like “unnecessary trips to Edmonton” and “bad enough I had to travel to Yellowknife for medical reasons, even worse when I found out my appointment was cancelled” and “government needs to be vigilant about the abuse of the privilege” clearly shows opportunity for savings or potential abuse of the system. Some participants also indicated to have a better use of existing resources. Another quote, “We need to keep people in the North to get the treatment they need. That could be a cost-saving measure.” I agree. Reducing our need to fly people down south, in itself, is a very forward-thinking approach to reducing our medical travel costs. I applaud the residents who came up with that.

However, the many ideas generated for reducing the costs of medical travel, such as better scheduling practices to avoid these multiple trips and long stays, these checks and balances to reduce cancellation and missed appointments, and better coordination of our patients’ medical appointments, for the most part have fallen on deaf ears as we do not see any changes to these recommendations or any of this action today. This is very unfortunate.

I can speak to many more residents’ suggestions that are now part of the GNWT archaeological archives of other countless reports, but I’ll stop here. I will use this Budget Dialogue 2012 report to ask the Minister of Health and Social Services the appropriate questions later today.

**MR. SPEAKER:** Thank you, Mr. Dolynny. The Member for Hay River South, Mrs. Groenewegen.

## MEMBER’S STATEMENT ON HEALTH CARE CARD RENEWAL PROCESS

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. I wonder how many people in our territory know that they have to renew their health care card. I just asked that because that is the new system that has been adopted by our Health department. It is now up to everyone to check the expiry date on their health care card and apply for a new one a few months in advance. The form is available on the Health and Social Services website, and at nursing stations and medical clinics.

I know there has been some advertising about this, and postcards to remind people to renew are being sent out, but old habits die hard. No doubt there will be people who do not get the message.

It used to be the health care cards were seldom replaced and when they were, the new one would simply arrive in the mail. Many of our residents probably still think that that’s how it works. Of course, what I do not want to see happen is any of our residents running into problems with their health care coverage – especially if they happen to travel outside the Northwest Territories – expiring. Sometimes we are asked to pay a bill and then we have to seek reimbursement after we get home.

I know that many people have applied for new cards but have not received them yet. There may be a backlog in Inuvik; I’m not sure. But, obviously, we need to provide health care to those people when it is required, so it’s important that there be a grace period. My understanding is that health care providers are supposed to confirm the patient’s enrolment number. It might be a good idea to have an automatic grace period of some length and then handle problems on a case-by-case basis.

I am glad that the Health department is keeping health care cards up to date. I’m sure that one good side effect will be that few people who have left the NWT will still have valid cards. I am always amazed by how many times I am approached by people in the public who want to convince me of an urban myth that there are more health care cards than there are people in the Northwest Territories. We have gone over this many, many times and I’ve assured people this is not the case, but it is still out there in the public that we have people who have left the Northwest Territories still carrying around NWT health care cards. This new system will, hopefully, help to alleviate that.

But change is always hard and I’m sure there will be little glitches before the population is used to renewing their health care cards, and I want to encourage the Health Minister to stay with the information campaign for a while and then reinforce it from time to time.

Later today I will have questions for the Minister of Health and Social Services on this new health care card renewal process.

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. The Member for Frame Lake, Ms. Bisaro.

## MEMBER’S STATEMENT ON FUNDING SUPPORT FOR HERITAGE AND CULTURAL ORGANIZATIONS

**MS. BISARO:** Thank you, Mr. Speaker. The arts are alive and well in the NWT. We are blessed with visual arts, music, film, dance, and written word artists, to name just a few. This government recognizes the contributions that arts performers make. We recognize the positive impact on the economy from the arts and that they are essential to the preservation of NWT culture. Funding for the arts is provided through the Education, Culture and Employment budget, and we present awards for culture through the Minister’s Cultural Circle. But there’s one aspect of our lives and our history which needs greater profile, Mr. Speaker, greater profile and recognition, and that would be heritage.

We often speak of heritage and culture in the same breath. They complement one another. Culture tends to refer to language, customs and the arts, whereas, heritage tends to refer to artifacts, structures and stories from the past. The Minister of Education, Culture and Employment will be aware of a request to him and the department from nine NWT culture and heritage groups for assistance in preserving and profiling NWT heritage. This isn’t to say that the government doesn’t do anything for heritage right now, but we could do more. Other jurisdictions do. They recognize heritage in their ministries. For instance, Manitoba has a Department of Culture, Heritage and Tourism. In the Yukon, the Department of Tourism and Culture specifically identifies a process for managing, conserving and interpreting heritage.

Around the NWT we have nine heritage and culture groups: NWT Mine Heritage Society, Gwich’in Social and Cultural Institute, Hay River Museum Society, Norman Wells Historical Society, NWT Metis Cultural Institute in Fort Resolution, Heritage Centre Society in Fort Simpson, Native Communications Society of the NWT and the Fox Moth Society in Yellowknife. These all play an important role in the social and the economic fabric of their communities.

The GNWT needs to expand our focus and our support for culture to specifically include heritage. The requests in the letters sent to the Minister from these organizations are not huge. They ask the government to consider the following:

* form a culture and heritage council similar to the NWT Arts Council;
* establish a ministerial portfolio for heritage and culture;
* allocate permanent funding for heritage and culture organizations and activities.

Mr. Speaker, I seek unanimous consent to conclude my statement.

---Unanimous consent granted

**MS. BISARO:** They also ask for continuation of funding to hold their bi-annual meetings for culture and heritage. They also ask to provide support for ongoing training and networking opportunities. All of these asks are something that we as a government can do that won’t require much financial support. Maybe we don’t need another ministerial portfolio, but to consider an expansion of the Cultural Circle awards to include heritage I believe is certainly doable. I urge the Minister to seriously consider the requests from the NWT’s nine heritage and culture societies and to copy Members of this House on his response to their letter. Thank you.

**MADAM SPEAKER:** Thank you, Ms. Bisaro. Member for Mackenzie Delta, Mr. Blake.

## MEMBER’S STATEMENT ON RELOCATING THE MERV HARDIE FERRY TO THE MACKENZIE DELTA

**MR. BLAKE:** Thank you, Mr. Speaker. The Department of Transportation is going to mothball the Merv Hardie ferry. With the opening of the Deh Cho Bridge, the ferry service is no longer required at Fort Providence. Although the department has no intentions of selling the ferry or disposing of it, there are no plans to use it, either.

We need that ferry at the crossing in Tsiigehtchic. The Merv Hardie is a bigger vessel than the Louis Cardinal that currently services the river crossing in the Delta. Its bigger size allows it to transport more goods in a single trip.

That ferry supplied the entire city of Yellowknife and the North Slave region for many years, hauling all the material for this city and the Tli Cho communities could ask for. They built this city with that ferry. Just think of what it could do for the communities of the Mackenzie Delta.

The Merv Hardie can also run longer than the Louis Cardinal. Two hours every day over the course of the summer can really add up. A longer operating season across the river at the Tsiigehtchic crossing will also result in lower costs and help reduce the cost of living, overall, for the people of the Mackenzie Delta, and also extend the supply for liquid natural gas for Inuvik in the fall season.

Before the Merv Hardie is put into permanent storage and begins to fall into disrepair because of it not being used, the Department of Transportation should seriously consider moving it up the river to serve the Mackenzie Delta. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Blake. Member for Weledeh, Mr. Bromley.

## MEMBER’S STATEMENT ON EXPANSION OF MIDWIFERY PROGRAMS AND SERVICES

**MR. BROMLEY:** Thank you, Mr. Speaker. Again today, advocates for the prompt provision of on-the-ground midwifery services are gathering outside this Assembly to press their case. Some may join us here in the gallery yet again, to watch our proceedings and repeat the appeal for early and full introduction of midwifery service. Through petition, letter, contacts with MLAs and with the Health Minister, the NWT Citizens for Midwifery have demonstrated their broad base of support espousing the wisdom of implementing territory-wide midwifery.

The proposed budget contains limited amounts for partial introduction of midwifery services. Some funds will be used to quote and gauge communities on expanding service further, and support planning activities for Hay River.

Enough study, enough planning, enough lost opportunity for savings and benefits, enough idling. We have a 162-page Midwifery Program review and expansion analysis report of March 2012. It’s comprehensive in all things but the assessment of the cost-savings to be reaped if we stop unnecessarily flying expectant mothers out of communities for residential living, away from home, and hospital delivery.

The social and health benefits have been repeatedly stated: improve social functioning, enhanced autonomy, bringing birth closer to home, increased continuity of care, decreased stress, improved early child development, improved access to culturally appropriate care that promotes the ancestral traditions of midwifery; and the increased opportunities for health promotion and disease prevention. Regional health centres are cost-effective and the foundational basis of our community health service. Midwifery service is an indispensable element of this approach.

We’ve delivered reports and studies of the quintuplets. The March 2012 report lays out the options, the detailed implementation requirements and costs. Now it’s time to bring this baby home.

I’ll be calling for inclusion of significant sums in this year’s budget for real progress in the expansion of this service for real people.

**MR. SPEAKER:** Thank you, Mr. Bromley. The Member for Deh Cho, Mr. Nadli.

## MEMBER’S STATEMENT ON LAUNCH OF CELLULAR TELEPHONE SERVICE IN FORT PROVIDENCE

**MR. NADLI:** Thank you, Mr. Speaker. For the first time ever, residents of Fort Providence can call, text and browse the Internet from a hand-held device in the community.

NorthwesTel launched its 4G network in Fort Providence on Wednesday, February 20th. Cell phone service is a goal of my constituents and I’ve had a petition that’s spoken loudly about it for a long time. The 4G network will allow residents and visitors to use the latest wireless devices, tablets and smartphones in our community. The introduction of this technology will enhance the quality of life for both residents and travellers. Anyone travelling through to the southern part of the Northwest Territories goes through Fort Providence.

We had a very sobering reminder of the need for emergency services on our highways this week. My sincere condolences go out to the friends and families of those involved in this accident. Expansion of telecommunications will enable continued steps to improve public safety, such as 911 telephone services and ground ambulance and highway rescue measures. Kakisa has also expressed the need for cell service.

NorthwesTel is not only providing 4G services, but representatives will also be in the community until Saturday to answer any questions about mobile devices and plans, and to demonstrate the latest gadgets, including the Apple iPhone 5, Samsung Galaxy S3 and the brand new Blackberry Z10. Maybe they’ll show us how to get moose calls and geese ringtones on our phones.

People can also get information about NorthwesTel’s services through its website or by calling its 1-800 line. NorthwesTel serves the largest operating area of any telecommunications on this side of the planet. It is expected to contribute over $15 million to support the enhanced broadband Internet service for 31 communities in the NWT in introducing enhanced mobile Internet services in 25 communities. This is the beginning of a new era for the North. This work is made possible by Infrastructure Canada and Falcon Communications, a broadband business alliance made of the Akaitcho Regional Investment Corporation, Dehcho Economic Corporation, Denendeh Advancements and the Tetlit Gwich’in Council. We can be proud of this Aboriginal partnership and what they are able to accomplish.

I’d like to recognize the work of NorthwesTel and all its partners, and encourage all Northerners to make the best and most responsible use of this amazing technology. Mahsi.

**MR. SPEAKER:** Thank you, Mr. Nadli. The Member for Inuvik Boot Lake, Mr. Moses.

## MEMBER’S STATEMENT ON HEALTH PRIORITIES IDENTIFIED DURING BUDGET DIALOGUE 2012

**MR. MOSES:** Thank you, Mr. Speaker. As we’re proceeding into the budget dialogue process, I’d like to refer back to the budget dialogue report that the Minister of Finance and his little tour that he went on through the Northwest Territories listening to our residents. Actually, I want to focus on three main areas that were discussed and addressed under the Health portfolio.

I won’t get into some of the detailed comments that my colleague went into earlier, but one was the investment in treatment programs and for mental illness, something that this side of the House has been fighting for ever since we started the 17th Legislative Assembly. It’s great to see that the Minister of Health and Social Services did commit to the detox beds and that he also committed to possibly bringing a supplementary appropriation here for an early intervention team to start up possibly this fiscal year. Also, one of our priorities is using existing infrastructure to put some of these programs in place. So it’s stuff those Members have been talking about since we started the 17th Legislative Assembly.

Another area of his focus that residents of the NWT have been speaking to is preventative health programs. The percentage of budget dollars that go to the Health budget is still very low, even though the Minister did make comments about it earlier in his opening remarks. It still doesn’t address the need of residents in the Northwest Territories and it’s something Members on this side of the House will continue to fight for.

You’ve heard colleagues mention this, but midwives was something that was also discussed and emphasized from the residents of the Northwest Territories for community-based maternal care and employment of midwives, not consulting about creating action.

On the news this morning, it was clearly stated, we’ve had enough consulting, it’s time for action. We have the reports. We have the documents. It’s time to put some of this stuff on the ground and start listening to our residents. If government isn’t going to act on it, then rest assured committee and Members on this side of the House will bring these concerns forward, get them addressed, get them in the budget process, and get the dollars for these programs and services to ensure that our residents are being listened to.

**MR. SPEAKER:** Thank you, Mr. Moses. The honourable Member for Hay River North, Mr. Bouchard.

## MEMBER’S STATEMENT ON RECOGNITION OF FAMILY AND COMMUNITY SUPPORT FOR YOUTH ACTIVITIES

**MR. BOUCHARD:**  Thank you, Mr. Speaker. This morning the Minister of Health, Tom Beaulieu, started his statement, “It is a priority of this government that children get the best possible start in life so that they can reach their full potential.” I’d like to recognize some of those people that help that.

We all know that many youth throughout the winter travel throughout the North to compete in many different sports: hockey, soccer, swimming, basketball, figure skating, hand games, and many others, including skiing. I’d like to recognize all those parents, grandparents and coaches that have been on the road for most of the winter taking these youth to different tournaments and events. Without that, these events would not take place and these youth would not have more potential to become successful in life.

Over the last couple of weeks, I’ve had the opportunity to be in the arenas watching a lot of senior men’s hockey, and I’m glad the Huskies are doing pretty good. In my opportunity to speak in the arenas, I’ve seen lots of people from different communities in Hay River as well as when I was in Yellowknife. There were lots of people travelling in. I’d ask them what they’re doing in Yellowknife: we’re here for basketball; we’re here for hockey.

I think, in the process of raising these children in the North, we need to thank those people that get involved in their development. I was speaking with one of my friends. Out of the last six weeks, he’s been home for only one week of those six. They’ve been on the road for five weeks. As I’ve indicated, I’d like to acknowledge those hardworking parents, and coaches, and grandparents who help these youth in the Northwest Territories.

**MR. SPEAKER:** Thank you, Mr. Bouchard. The honourable Member for Nahendeh, Mr. Menicoche.

## MEMBER’S STATEMENT ON PASSING OF STEPHEN ROWAN

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. Today I rise to recognize the passing of Mr. Stephen Rowan, a long-time resident of Fort Simpson.

Stephen Hamilton Rowan was born in England and was educated in the United States, serving as a volunteer ambulance driver during World War II. He arrived in the Canadian North in 1963, after training as a teacher. Mr. Rowan also worked in Iqaluit, northern Quebec, Sanikiluaq, and Gameti, where he became a citizen of Canada in 1980. He also worked in Trout Lake, Behchoko and, finally, Fort Simpson. He retired in Fort Simpson, from the position of superintendent of schools in 1987.

Stephen Rowan lived simply, without a microwave or satellite TV, and burned wood to heat his home, known as The Yellow House. He was a strong member of his community, who showed quiet leadership by example. As a retired educator, he provided library services and guest speakers at the John Tetso Memorial Library. He offered ski lessons and led Jackrabbit skiing for children over 15 years.

His real passion was the history and heritage of Fort Simpson. Mr. Rowan was a founding member of the Fort Simpson Historical Society. He advocated for the preservation of Fort Simpson’s heritage buildings, which are some of the oldest buildings in the Northwest Territories. Stephen Rowan developed an annotated inventory of these buildings, gave public lectures, and led walking tours for both local residents and visitors. He loved spending time with archaeologists and other researchers, and was always ready to help.

Stephen Rowan was a generous man, a wise elder, and beloved friend to all. He will be sorely missed.

**MR. SPEAKER:** Thank you, Mr. Menicoche. The honourable Member for Yellowknife Centre, Mr. Hawkins.

## MEMBER’S STATEMENT ON NEED FOR NEW TERRITORIAL COURTHOUSE

**MR. HAWKINS:** Thank you, Mr. Speaker. Fifteen years ago a study said that it was time to build a new courthouse in the NWT because the needs of the population had certainly increased. It would be cheaper, the study said, and more effective for the people who need the services, rather than continue to sink money into the existing building. The needs have not kept pace with modern times. Even Nunavut and Yukon have independent courthouses. When is it time that the Northwest Territories get its own independent courthouse?

If you don’t believe me, believe our Public Works. Two feasibility studies were led by our own Public Works, and they identified that our needs cannot be accommodated within the existing courthouse we have today.

Let’s go back a bit of time. Thirty-six years ago, that’s 1977, our courthouse was designed for three Territorial Court judges and one Supreme Court judge. What has changed? Security has changed, functionality has changed, victims' and accused’s' rights have changed and improved, working space has changed. We don’t have four judges like back in 1977. We’ve increased to eight judges in total, not even talking about the increase in the court circuit of appeal that has to show up every once in a while.

In 2003 this Legislature gave $3.6 million. In 2006-2007 we spent another $4.166 million on planning for the new courthouse. The functionality, size and requirements are inadequate for these modern times. Nunavut has a new courthouse. Yukon has a courthouse. When is it time that the Northwest Territories has its own independent courthouse?

I would like to ask who is speaking on behalf of the judges on this particular file. Who is fighting for the rights of those victims and accused who have to cross paths and share rooms with each other before a trial? That is not fair. Who is speaking for the bottom line when the 2003-2004 court case of Giant Mine was going on here in Yellowknife? They had to rent YK Centre space at $353,000, not even talking about the stress when the Franco-TeNOise challenged the NWT government and the Government of Canada about their rights.

The bottom line is that things have changed, except for the courthouse. Demands have increased, and it’s time that we addressed these needs with an independent study.

I will be asking the Premier about the program review office later today.

**MR. SPEAKER:** Thank you, Mr. Hawkins. The honourable Member for Great Slave, Mr. Abernethy.

## MEMBER’S STATEMENT ON PASSING OF AMANDA DEI

**HON. GLEN ABERNETHY:** Thank you, Mr. Speaker. I rise today to recognize a friend and constituent, Amanda Dei. Amanda passed away last week after battling ovarian cancer for well over a year. She was a loving mother, daughter and friend. Amanda will be greatly missed by her daughter, Madilynn; her sister, Kim Lambrecht; brothers Robert Langlands, Trevor Lambrecht and Joel Dei; nephew, Alex Lambrecht; and father, Norman Dei, who is with us in the gallery today.

In addition to her loving family, Amanda had a huge circle of friends, often referred to as the No-Pants Army in recognition of Amanda’s distaste for pants. Amanda was a passionate musician and one of the founding members of one of Yellowknife’s more popular bands, The Break-Up. She wrote songs that came from the heart and struck a chord with everyone who had an opportunity to see her and her band perform.

In addition to being a musician herself, Amanda was a champion of women in music. She was a regular participant in the T’seko Celebration of Women in Music and was also one of the event organizers.

After being diagnosed with cancer, Amanda took on a dual battle. She not only fought her own battle with cancer but took on the challenge to raise money toward supporting cancer research, in hopes of eliminating cancer altogether. In Amanda’s honour, the No-Pants Army will continue to support cancer research. I understand that the No-Pants Army is already registered for the 2013 relay.

Amanda was an amazing person who will be missed by everyone that she knew and everyone that loved her. She will not be forgotten. Her music, distaste for pants, and desire to support the fight for cancer and raise money for research will continue through her family and friends. There will be a celebration of life for Amanda this Saturday, February 23rd, starting at 2:00 p.m. at St. Joseph School.

Thank you, Mr. Speaker, and thanks to Mandy No-Pants for contributing a verse to our lives.

**MR. SPEAKER:** Thank you, Mr. Abernethy. Item 4, returns to oral questions. Item 5, recognition of visitors in the gallery. Mr. Abernethy.

# Recognition of Visitors in the Gallery

**HON. GLEN ABERNETHY:** Thank you, Mr. Speaker. I’d like to recognize two people in the gallery. First I’d like to recognize Norman Dei, who is the father of Amanda. He is a long-time northern resident and long-time Yellowknife resident. He is a quantity surveyor for the Department of Public Works and Services. With him today is Sherry Otis. I’d also like to recognize Sherry Otis.

**MR. SPEAKER:** Thank you, Mr. Abernethy. Mr. Ramsay.

**HON. DAVID RAMSAY:** Thank you, Mr. Speaker. Seeing as it’s Education Week, I’d like to welcome back to the Northwest Territories a long-term Yellowknifer and teacher here in the Northwest Territories, Ms. Myrna Strain. With Myrna are Ms. Tai Blake and Ms. Sam Pearce. Welcome to the House.

**MR. SPEAKER:** Thank you, Mr. Ramsay. Mr. McLeod.

**HON. ROBERT MCLEOD:** Thank you, Mr. Speaker. I’d like to recognize my wife of 34 years and the most patient woman in the world. Judy, welcome to the gallery.

**MR. SPEAKER:** Thank you, Mr. McLeod. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Mahsi cho, Mr. Speaker. I would like to recognize two Pages from the Deninoo School in Fort Resolution: Rayleen McKay and Tianna Simon.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Mr. Menicoche.

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. I just want to commend your Page Program for the small communities, because this week we had two young students from the Echo Dene School out of Fort Liard: Ms. Kali Norn and Michael Bertrand-Sassie. I would also like to recognize the hard work of their chaperone, Ms. Sylvia Bertrand. Welcome to the Legislative Assembly, and I hope you had a great week. Hopefully we’ll see you back here one day, maybe in this chair.

**MR. SPEAKER:** Thank you, Mr. Menicoche. Mr. Moses.

**MR. MOSES:** Thank you, Mr. Speaker. I’d like to recognize a constituent of Inuvik Boot Lake. Welcome, Ms. Judy McLeod, to the Assembly.

**MR. SPEAKER:** Thank you, Mr. Moses. Mr. Hawkins.

**MR. HAWKINS:** Thank you, Mr. Speaker. I’d like to use this occasion to recognize Kain Bezha, who is a St. Pat student and a Yellowknife Centre constituent. I would like to let him know, as well as everyone else who is a Page here, that I am greatly appreciative of their services, as Mr. Menicoche was saying. He is quite right. Several of us MLAs got our start as Pages in this Assembly. You never know where you can go next.

**MR. SPEAKER:** Thank you, Mr. Hawkins. I’d like to welcome all visitors here in the public gallery. Thank you for taking the time to attend our proceedings here today.

Item 6, acknowledgements. Item 7, oral questions. The honourable Member for Hay River South, Mrs. Groenewegen.

# Oral Questions

## QUESTION 120-17(4): HEALTH CARE CARD RENEWAL PROCESS

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. My questions are for the Minister of Health and Social Services and in follow-up to my Member’s statement today. Question number one: How far behind are we on issuing new health care cards to residents who have applied for them? How many applications are in limbo at this time?

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. The honourable Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Mahsi cho, Mr. Speaker. There are some issues with mailing, but I think that the majority of the people that went for renewal have had their health cards renewed without any issues.

There are some issues. To answer her question of how far behind we are in this is difficult for me. I can say that we did change the system just a bit by mailing out postcards as opposed to forms, and that has caused a little bit of an issue. Aside from wrong addresses, I think we’re fairly up to speed on our renewals.

**MRS. GROENEWEGEN:** Because this is a new system and the expiry coincides with people’s birthdates, I would like to ask the Minister if there is a grace period that’s being extended to someone. If they show up at any kind of a medical service provider and their health care card is expired, will they still be provided services without having to apply for them and then be reimbursed or anything like that? Is there a grace period?

**HON. TOM BEAULIEU:** Unfortunately, if you show up with expired health care, you will not get insured coverage. However, you do have four months after that grace period to renew your health care card.

**MRS. GROENEWEGEN:** If somebody’s birthday was on January 15th and the applications for renewal of health care cards had not gone out, and with the backlog and number of cards that were not processed right away, is the Minister saying that if you’re an NWT resident, and you have an NWT health care card, and you show up for service, that you are not going to be provided that service during this transition phase into a new system?

**HON. TOM BEAULIEU:** On this new system where we moved to birthdates, we have about 2,000 per month. The majority of them are processed, yes. A lot of the mailings went out after people’s birthdays, on the 21st of January actually, so we do have a bit of a glitch in the system. But, in reality, we didn’t see it as a huge issue, that most people will have their cards renewed. But if they don’t have their cards renewed then, yes, they will not get the service provided at that time. They can get a service and they can pay for it or else they can quickly get the card renewed.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mrs. Groenewegen.

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. That’s very discouraging to hear, because I don’t think the department was on their game on the implementation of this new health care card system. I’m particularly worried about students that maybe hold NWT health care cards but they’re down in Alberta or someplace else, that this Minister is now telling us in this House that they would not receive services. I could see in the Northwest Territories people probably know people and it would be a lot easier, but I’m particularly worried about people outside of the territory who have birthdates early on in the year. Probably by the time we get to November or December it will all be worked out, but there were glitches, there were problems, and I would like there to be some kind of a grace period where people could be provided the services and they will get their cards eventually. I’d like the Minister to explain to us why that would not be possible.

**HON. TOM BEAULIEU:** We began a media campaign in December to advise people that we’re moving to the system where their health care card expires on their birthday. These are health care cards that would have been in place for three years, and then expiring on their birthdays starting this year and then more in the coming years. What has happened is, because there have been issues where there are indications that individuals that are holding health care cards that are not eligible that are outside the province, we wanted to have a clean process when we transfer into the new system that we’re requiring that people have health care cards, eligible health care cards in order to get coverage. Then we can deal with the individual cases. If MLAs know of individual cases where this has become an issue, then the department is prepared to deal with those on a one-off basis.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. The Member for Mackenzie Delta, Mr. Blake.

## QUESTION 121-17(4): RELOCATING THE MERV HARDIE FERRY TO THE MACKENZIE DELTA

**MR. BLAKE:** Thank you, Mr. Speaker. Following up from my statement, I’d like to ask the Minister of Transportation, will the Minister transfer the Merv Hardie from Fort Providence to Tsiigehtchic.

**MR. SPEAKER:** Thank you, Mr. Blake. The Minister of Transportation, Mr. Ramsay.

**HON. DAVID RAMSAY:** Thank you, Mr. Speaker. I thank the Member for the question. We are putting that under consideration and we should be able to have a decision made probably within the next three or four months on where that asset will be located.

**MR. BLAKE:** I believe that this government needs to try to avoid the crisis that almost happened in Norman Wells, and the best way to do that in the Mackenzie Delta is to transfer the Merv Hardie ferry to the Tsiigehtchic ferry crossing this summer to commence operation as soon as possible. Will the Minister commit to that?

**HON. DAVID RAMSAY:** The Merv Hardie served this government and the people of the Northwest Territories very well at Fort Providence. It will require some work, a bit of a refit, but certainly, once that refit is complete, we’d look at locating that ferry at Tsiigehtchic. That has been under consideration and we will continue to take a look at where that ferry will be best utilized here in the NWT.

**MR. BLAKE:** I thank the Minister. I have no further questions at this time.

**MR. SPEAKER:** Thank you, Mr. Blake. The Member for Hay River North, Mr. Bouchard.

**MR. BOUCHARD:** Thank you, Mr. Speaker. I don’t have any questions today.

**MR. SPEAKER:** Okay. I saw your hand go up, Mr. Bouchard. The Member for Weledeh, Mr. Bromley.

## QUESTION 122-17(4): VACANT HOME OWNERSHIP UNITS IN DETAH AND NDILO

**MR. BROMLEY:** Thank you, Mr. Speaker. My questions are for the Minister of the NWT Housing Corporation. Last fall I asked the Minister about vacant home ownership units in Detah and Ndilo in the riding of Weledeh. The waiting list for public and market rent units is long, and the people can’t see the sense of leaving unsold units standing vacant. The Minister replied, saying that approval notice for home ownership applications would be issued January 31st, and that home ownership units not allocated will be used as replacement of public housing units or market rental units.

How many of these units were sold under Housing Choices in Ndilo and Detah and how many have been released for public or market housing?

**MR. SPEAKER:** Thank you, Mr. Bromley. The Minister responsible for NWT Housing, Mr. McLeod.

**HON. ROBERT MCLEOD:** Thank you, Mr. Speaker. As far as the ones in Detah and Ndilo go, I’m not quite sure how many have actually been sold yet and then the ones that are vacant out there, so I will undertake to get that information for the Member. I know I did commit to getting the information for the Member. There’s still a little work to do, but I will get that information not only for Detah and Ndilo but for the units across the Northwest Territories.

**MR. BROMLEY:** I did, indeed, give the Minister considerable notice here, so I appreciate that I will be getting that information very soon.

Last session I asked the Minister why home ownership units stand unsold, pointing out that income rating and debt restrictions often prevent people from meeting program eligibilities. A more individual approach is needed. Both the Housing Corporation and I would like to see increased home ownership.

What is the Minister doing to evaluate the Housing Choices program to include some applicant file audits and to pursue other measures to tune up the program and get people into home ownership units?

**HON. ROBERT MCLEOD:** We have made some changes to our Home Ownership Program. We’re actually just in the process of putting a Minister’s statement together in which we will make the announcement within the next week or so. But the Member is correct, though; there has been a great concern across the Northwest Territories about the number of vacant units. I believe that at one particular time we had 130 vacant units, and that was because we were taking advantage of the federal infrastructure money and getting these units on the ground, and we were left with a situation where we have allotted many more units than actually approved clients.

But we are making some changes to our Home Ownership Program. A couple years ago we tried a program where if you were slightly over the core need income threshold you would still be considered, because right now if you were a dollar over, you would automatically be declined, so we tried to make some changes to that. We had limited success, so we’re still trying to come up with ways that we could get people into home ownership. But we have managed to fill a lot of the vacant units. I think we’ve got, maybe, 65 right now across the Northwest Territories. We’re just completing our evaluation on the intake. I understand there might be about 12 people across the territory that have been approved so far for the HELP program and possibly about seven for the PATH program. And then again, the ones that we can’t sell or get homeowners into, we will either use them for market housing in the community or turn them into public housing. Thank you, Mr. Speaker.

**MR. BROMLEY:** Mr. Speaker, the Minister has outlined many of the concerns that we have with this situation. He has also expressed a commitment to get me the information for Ndilo and Detah and for the Northwest Territories. I appreciate that.

When can I expect to receive that, recognizing that I have given advance notice? Mahsi.

**HON. ROBERT MCLEOD:** Mr. Speaker, I’ll have the information to the Member by the end of day Monday. Thank you.

**MR. SPEAKER:** Thank you, Mr. McLeod. The honourable Member for Nahendeh, Mr. Menicoche.

## QUESTION 123-17(4): CONTAMINATED SOIL IN ENBRIDGE PIPELINE REMEDIATION DIG

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. I just wanted to ask some questions on the… I don’t know if the Minister of Industry, Tourism and Investment had any update on the contaminated soil that was recently exposed by Enbridge Pipelines during their remediation digs. I’d just like to ask the Minister if he has had an update on the contaminated soil that was dug up. Mahsi.

**MR. SPEAKER:** Thank you, Mr. Menicoche. Minister of Industry, Tourism and Investment, Mr. Ramsay.

**HON. DAVID RAMSAY:** Thank you, Mr. Speaker. We’re certainly aware of the situation in Nahendeh and the contaminated soil. Perhaps we have some folks from Environment and Natural Resources that would be better able to respond to that question. Thank you.

**MR. MENICOCHE:** Mr. Speaker, the Minister had directed me to the Minister of ENR. If I can do that and ask him, has he had an update from Enbridge Pipelines on the contaminated soil that was dug up on the remediation digs? Thank you.

**MR. SPEAKER:** Thank you, Mr. Menicoche. Only the Premier can do that, in regard to changing, but I’ll put you back on the list. Thank you. The honourable Member for Frame Lake, Ms. Bisaro.

## QUESTION 124-17(4): FUNDING SUPPORT FOR HERITAGE AND CULTURAL ORGANIZATIONS

**MS. BISARO:** Thank you, Mr. Speaker. I want to follow up on my Member’s statement. I have some questions for the Minister of Education, Culture and Employment with regard to the focus that we put on heritage in the NWT and in the activities of the department. I’d like to ask the Minister if he could explain to me and to the House what we currently do to support heritage activities. Thank you.

**MR. SPEAKER:** Thank you, Ms. Bisaro. Minister of Education, Culture and Employment, Mr. Lafferty.

**HON. JACKSON LAFFERTY:** Mahsi, Mr. Speaker. As you know, currently we provide some funding allocation to culture and heritage organizations. Within that, there are approximately 15 different organizations that we sponsor. Out of the 15, there are approximately seven of them who are with respect to the cultural projects, heritage, Yamozha Kue Society, the museum, historical centres, heritage centres and so forth and also the Minister’s Cultural Circle is another venue that we recognize for valuable contribution towards the Northwest Territories on preserving our culture, language and our heritage. Those individuals will definitely fall within the groups and organizations and also Minister’s choice. Those are venues that are available to them so we continue to strive towards that. Mahsi, Mr. Speaker.

**MS. BISARO:** Mr. Speaker, thanks to the Minister. I appreciate that we do, as a government, provide some funding for heritage activities, but the Minister received this letter from the nine organizations who are looking for more funding, obviously, everybody wants more funding, but they are also looking for a little more assistance, I think, to sort of profile some of their activities.

To quote from the letter, the activities of these nine organizations create an enhanced learning, research, tourism, employment and business opportunities across the NWT, and that’s a pretty broad reach. I’d like to know from the Minister – he’s mentioned the number of activities that are out there – how much funding. What are the dollars that are available to these nine heritage organizations to promote their activities and to actually do their programs? Thank you.

**HON. JACKSON LAFFERTY:** Mr. Speaker, as I stated in my response to the letter, I was in full agreement with the suggestion of the heritage, culture and history. They all complement each other. I would like to take this opportunity to better inform the new part of the Minister’s Cultural Circle Recognition Program. With the funding the Member alluded to, I can certainly provide the detailed list. I do have approximately $2.2 million that is going towards all 15 different organizations. Out of that, it will be what the Member is referring to, those nine organizations, and I can provide the breakdown. Mahsi.

**MS. BISARO:** Mr. Speaker, thanks to the Minister. I appreciate that commitment and I look forward to the information. I think the Minister said that he has responded to the letter that came from the nine organizations. I don’t believe the Minister copied us on that letter. If he did, I haven’t seen it yet.

I’d like to know from the Minister what the Minister’s response was to the four or five requests that were in the letter that he received in December. Thank you.

**HON. JACKSON LAFFERTY:** Mr. Speaker, the letter I was referring to was a response to the NWT Mine Heritage Society, that letter I received, and I responded to the individual, the president. Also, there was a distribution list with all the MLAs. The information has been sent and shared with the NWT Mine Heritage Society as a response. Mahsi.

**MR. SPEAKER:** Thank you, Mr. Lafferty. Final, short supplementary, Ms. Bisaro.

**MS. BISARO:** Thank you, Mr. Speaker. Not having seen what the response to the group’s requests were, I know the letter came on letterhead from the NWT Mine Heritage Society, but it certainly was signed by nine different organizations. I’d like to ask the Minister if he at least is considering expanding the Minister’s Cultural Circle to be a Minister’s culture and heritage circle in terms of the awards that he presents on an annual basis. Thank you.

**HON. JACKSON LAFFERTY:** Mr. Speaker, the Minister’s Culture Circle, again, does highlight those individual groups and organizations, also individuals. There are elders, youth, and Minister’s choice. It does consist of heritage as well, so it’s not exclusive just to the culture and language. It covers heritage as well. In order to fulfill those requests, we need to have those discussions with the various groups. We’ve done that with the Minister’s Culture Circle before we initiated the project, but to consult and engage with public stakeholders. We do have a program in place that already has been very successful to date, a couple of years now. The Minister’s Culture Circle will continue to promote that. Mahsi.

**MR. SPEAKER:** Thank you, Mr. Lafferty. Member for Inuvik Boot Lake, Mr. Moses.

## QUESTION 125-17(4): FUNDING FOR MIDWIFERY PROGRAMS

**MR. MOSES:** Thank you, Mr. Speaker. My questions today are for the Minister of Health and Social Services following up on my Member’s statement with what residents have been asking for, and one in particular is with the Midwifery Program and dollars that are being allocated for this program here that was a suggestion brought forth by Members of the Assembly. I’m just wondering what the intention of dollars that are being allocated for this Midwifery Program, where they are going to be allocated and what the intention is of those dollars. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Moses. Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. The plan for 2013-14 in this budget session for midwifery is community consultation activities for Hay River, review and update NWT Midwifery Practice Framework and midwifery regulations, hire a Midwifery Program development consultant and midwifery project coordinator at the department to support ongoing planning and program development activities, Hay River community Midwifery Program planning activities, and community consultation activities for Beaufort-Delta communities. Thank you.

**MR. MOSES:** Mr. Speaker, with all the mention of community consulting and consulting with Inuvik, I want to ask the Minister of Health and Social Services, is he familiar with the Department of Health and Social Services’ Midwifery Program review and expansion analysis midwifery options report of March 2012. Is the Minister familiar with that report? Can he confirm, please?

**HON. TOM BEAULIEU:** I am familiar with the report, I don’t have all the details of the report, but I do have enough details in the report to move forward in the direction that the department is taking it. Thank you.

**MR. MOSES:** Thank you. The Minister just mentioned that he knows enough in the report to move forward on what the report is saying. The report is saying we need a community-based midwifery report. I mean, if he knows enough to move forward on that, why aren’t we doing that and we’re going into consultation where the consultation is all done in this report? So it really makes me wonder about that.

Can the Minister kind of confirm why dollars are being spent in regulations and standards when our previous Minister of Health has this signed off on the standards of practice for registered midwives? Can the Minister justify why he’s putting more money into regulations and standards when there’s already one in the report? Thank you.

**HON. TOM BEAULIEU:** Thank you. Midwifery is not a cost-savings measure. Midwifery is to provide a service that will be put into place for the health of the children and for the long-term benefits to the health system. It’s not an immediate cost savings. Any cost savings that would come as a result of midwifery through medical travel and so on will be eaten up by incremental costs of hiring midwives. So we can’t approach this and say we’re going to put Midwifery Program feet on the ground right away and start seeing the results of savings. That’s not going to happen.

What will happen is, in the long run, as we expand a proper Midwifery Program, we’re going to see the development of the children that are working with midwives, and that’s why we’re trying to expand from a community Midwifery Program, which has regulations, to a regional Midwifery Program, which needs updated regulations, and to a territorial Midwifery Program, which will need further regulations. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Moses.

**MR. MOSES:** Thank you, Mr. Speaker. It’s been a long week and I came into the House this morning pretty tired and I needed something to wake me up, and I’m really glad the Minister’s statement did wake me up here, yup. There’s a lot of savings, this investment that we’re doing into midwives, and I’m really concerned about what the Minister just said in terms of cost-savings measures. There’s so many different cost savings, so many benefits. I’d like to ask the Minister where the report is and where does he get his findings from to justify and confirm what he just previously said in his statement. Thank you.

**HON. TOM BEAULIEU:** Thank you. Most of it is common sense. The reduction in medical travel will happen, yes, if you had midwives in Yellowknife. However, right now people are coming to Yellowknife to have babies. People are coming to Inuvik to have babies. That’s not going to change. Whether the midwives are in Inuvik or the midwives are in Yellowknife, that’s not changing. The people are still coming here. There’s still medical travel to come here. So that’s the territorial program, same with Inuvik.

Now in Fort Smith, about half of the people that are having babies in Fort Smith are still coming to Yellowknife. Now that they have physicians, that number may change. Hay River does not have physicians. So as we expand Hay River, we’re anticipating that similar numbers may result in Hay River. So there is where you will see some cost savings. Half of the people in Hay River may not have to travel to Yellowknife to have their babies. It’s a community program. However, the savings will be less than the incremental costs of hiring midwives and paying their salaries. It’s pretty simple.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. The Member for Range Lake, Mr. Dolynny.

## QUESTION 126-17(4): MEDICAL TRAVEL BUDGET REDUCTION OPPORTUNITIES IDENTIFIED DURING BUDGET DIALOGUE 2012

**MR. DOLYNNY:** Thank you, Mr. Speaker. Interesting morning. I rise today and follow up on my Member’s statement today on what did the Department of Health and Social Services learn from the Minister of Finance budget housing dialogue 2012 talks this past fall. As indicated, Health is cited by most participants as the area for most opportunities of savings.

I have been critical since day one on this job on the lack of spending for health initiatives and I stand steadfast to this. However, today I want to work on the other side of that equals sign and focus on savings of opportunity, especially medical travel and medevac services. So my questions today will be for the Minister of Health and Social Services.

Could the Minister of Health and Social Services indicate what his department has done as a result of the findings of Budget Dialogue 2012 with the residents of the Northwest Territories? Thank you.

**MR. SPEAKER:** Thank you, Mr. Dolynny. The Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. The department recognizes that prevention is probably the key to long-term savings for the department. Some of the money that we’re putting into the system on prevention, at the end of the day, downstream, will have positive financial benefits to the department. So that is probably the main thing.

In as far as medical travel goes, we recognize that maybe medical travel is not as efficient as it should be. There are a lot of pressures on medical travel. People put pressures on medical travel and sometimes individuals that may not be eligible for an escort, as an example, will request one and then there’s pressure put upon departments for the department to provide that additional cost. So, some of those things are there. Then we rely on Stanton to deliver it, thinking that Stanton was the best location for the delivery of the program, but because of a lot of the politics around it and everything, we’re now reviewing that one item, medical travel, one program, and we’re thinking about centralizing that at the department. Thank you.

**MR. DOLYNNY:** Thank you, I appreciate the Minister’s response, but I’m referring to the budget dialogue, the voices of the people. More importantly, what opportunities for efficiencies in medical travel services has the Department of Health and Social Services identified as a result of such talks with residents, and are these recommendations in action today or are they coming soon? Thank you.

**HON. TOM BEAULIEU:** As a Minister of Health, I’m trying to develop things today that will have a savings in the future. I recognize that the Minister of Finance has done the tour on the ways that they can put the savings into the budget and, as the Member indicates, a lot of them are related to Health as a department, and consulting with my senior managers and finding out how do we think that we can meet some of the objectives of the people in the Territories and that’s what we’re doing. We’re putting together things that we think are huge cost drivers in the system and we’re trying to curb that now so that they will stop being huge cost drivers in the system. An example of that is addictions, early childhood development and many other items that we have in our budget that are working in that direction. Thank you.

**MR. DOLYNNY:** Thank you, I appreciate the Minister’s response, but again, I want to focus my questions and response to the medical travel and the concerns the residents have. So a medical travel review has been promised for years now. What assurances can the Minister of Health and Social Services offer and to the people of the Northwest Territories that we will see an improved and more efficient service and travel policy in the life of the 17th Assembly? Thank you.

**HON. TOM BEAULIEU:** Thank you. I don’t know how long the promise of reviewing medical travel has gone on. I do know that at this time we are a bit behind in our schedule for reviewing medical travel. Like I indicated in the House yesterday, there are a lot of pressures in our system, a lot of pressures to do a lot of different things in the system. As we had the human resources in the department allocated to certain projects, this is one of the projects which is kind of stumbling out of the blocks, because there’s a lot of real high-priority issues for the department. We are planning to do a review of it and we’re planning on trying to make it more efficient. If the plan was to review it and we didn’t think we could make medical travel more efficient, then we probably wouldn’t do the review, but this is the thought that somehow, some way we will make medical travel more efficient and also dealing with the politics of medical travel too.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final supplementary, Mr. Dolynny.

**MR. DOLYNNY:** Thank you, Mr. Speaker. I’m still concerned and confused. We’ve heard the voice of reason of the people. We should treat these as ladders of opportunity to make meaningful changes, especially with what we’ve heard on medical travel from our residents. We’ve heard that the Minister is a great proponent of common-sense approach policies so I’m going to ask the Minister: Will we have a common-sense approach to this policy, in terms of using what we know from the residents and applying those today, so that we have meaningful changes to our Medical Travel Policy at this juncture within the life of this physical Assembly?

**HON. TOM BEAULIEU:** Yes, we will continue to employ common sense. The medical travel, we must remember that many individuals who have their opinion on medical travel is based on what they have gone through themselves. There are many, many, many scenarios with medical travel. We have to look at all of them. We also have to take into account the delivery of the program, the politics of it, the regulations. All of those aspects are things that we’re looking at to try and make it more efficient, and to develop a policy that does have common sense and is responsible through the government.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. The honourable Member for Sahtu, Mr. Yakeleya.

## QUESTION 127-17(4): NEED FOR SOCIAL HOUSING STRATEGIC PLAN

**MR. YAKELEYA:** Thank you, Mr. Speaker. In my Member’s statement I indicated a date of 2038, 25 years away. I will be, roughly, about 75 years old. I want to ask the Minister, what then? Once the social funding is done with the federal government, are we moving towards where people in the Northwest Territories will then all own the 2,400 units that are right now in stock?

**MR. SPEAKER:** Thank you, Mr. Yakeleya. The honourable Minister responsible for the NWT Housing Corporation, Mr. Robert McLeod.

**HON. ROBERT MCLEOD:** Thank you, Mr. Speaker. First of all I want to correct the Member. The Member will be 79 years old in 2038, because I’ll be 78. We continue to raise this issue with our counterparts in Ottawa. We try to get them to see the fact that it is affecting how we administer public housing. I think, between now and then, if they don’t move on this, a lot of decisions may have to be made within the Housing Corporation and the government as to what exactly we want to be. Do we want to be just a social housing provider, or continue with all the programs that we offer now?

**MR. YAKELEYA:** I want to ask the Minister, did he say “roughly”? I will be roughly about 78, quick calculations. I want to ask the Minister, is this something we could look at on a territorial strategy for housing, or national housing strategy, that we can think about these types of things that are going to be put onto our future generations with regard to housing in the Northwest Territories?

**HON. ROBERT MCLEOD:** We do have our Building for the Future, the Northwest Territories strategy for housing looking into the future. There probably is a lot of work that’s going on nationally. A lot of the communities and jurisdictions down south, I think, are going to feel the effect a lot more than we are because their public housing and social housing portfolios are much larger than ours. It is a great concern across this country, not only for us but it affects us quite a bit because we have a majority of our houses, especially in the small communities, that are public housing partly funded by the money that we get from CMHC. We have our strategy and we continue to try and look at ways that we can make improvements to how we do business, cut down the cost of operating our social housing, removing some of public housing from stock. We’ve been quite busy working on our plans and dealing with the declining CMHC funding.

**MR. YAKELEYA:** I was reading a book, and in the book there was a quote that said the home is the heart of the nation. In 2038, if that’s the case with the federal government, they’re going to rip the heart of our nation out here. I want to ask the Minister – I know he’s working hard on reducing the public housing units and in regard to his strategy – will this strategy meet the point in 25 years that we will not have any public housing? Will all those homes belong to people in our communities?

**HON. ROBERT MCLEOD:** We would have to look at that. Ultimately, our goal in the Northwest Territories Housing Corporation is to try and see as many homeowners as possible. We have to recognize, also, that there is always going to be a need for public housing and public housing clients. It’s a bit of a balancing act and we have to weigh those out. Ultimately, we’d like to get people into home ownership. Some of the changes that we want to make now will probably have long-term effects and we’ll have to wait until 2038, if things don’t change by then, to see where the Northwest Territories is at as far as providing housing. We do know that we are trying to address the issue and we’ll continue to do so. That includes bringing our concerns to the federal Minister and the federal government.

**MR. SPEAKER:** Thank you, Mr. McLeod. Final supplementary, Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Speaker. The Minister earlier made a ministerial statement on MACA and talked about community ownership and community involvement in planning. I want to ask the Minister if his government colleagues have talked about some type of territorial housing strategy sometime within the life of this government to look at year 2038.

**HON. ROBERT MCLEOD:** As I mentioned before, we do have the Building for the Future, a strategic framework for housing that we just recently completed. In there it talks about a lot of the ways that we want to deal with the declining CMHC funding. Also, the Member talked about communities. We’ve had communities in the past that have taken on the responsibility of administering their own public housing and realized that it was a lot more than they had bargained for, so they had turned the administration back over to the NWT Housing Corporation. We’re always open to partnerships. I think we’ve proven that in the past. We’d be more than willing to sit down with any community government that has some kind of desire to administer social housing and public housing in their community. However, we will make sure they realize it’s a huge challenge and they need to be ready for it.

**MR. SPEAKER:** Thank you, Mr. McLeod. The honourable Member for Yellowknife Centre, Mr. Hawkins.

## QUESTION 128-17(4): NEW TERRITORIAL COURTHOUSE

**MR. HAWKINS:** Thank you, Mr. Speaker. In my Member’s statement today I talked about the need for a new territorial courthouse. Needs have certainly changed, but the space has not. You can only reorganize the existing courthouse so many times before it becomes unpalatable. I just want to say two more things, which is, the courthouse as it exists now doesn’t flow nicely when you consider the responsibility and sensitivity needed towards sexual assault victims where sometimes accused, the victims and the witnesses are all huddled together in the same area. It just makes it unpalatable.

The last thing I want to say on this point is, quite often when the judges call people to appear before court, whether it’s the day’s docket or for jury duty, they’re not only in the room standing against the walls, they’re standing out in the hall, down the spiral staircase, and into the first floor. All problems with the existing courthouse.

My question will be to the Premier. Will the Premier direct the program review office to review the functionality of our existing courthouse, and weight and balance that fairly to evaluate the need for a new independent courthouse to serve the citizens of the Northwest Territories, and ensure that people are getting justice safely and fairly?

**MR. SPEAKER:** Thank you, Mr. Hawkins. The honourable Premier, Mr. McLeod.

**HON. BOB MCLEOD:** Thank you, Mr. Speaker. We’ve worked very closely with the committee and asked the committee to identify the areas that they want the Program Review Office to review. I’ve reviewed the list and I don’t see the Yellowknife courthouse on that list.

**MR. HAWKINS:** That’s one of the worst answers I’ve heard from Premier McLeod in a long time. The fact is, the 15-year-old study said we needed a new courthouse. The existing building was built in 1977 when we only had four judges and limited staff and processes. The territory has practically doubled in size. What will it take to get the courthouse situation reviewed by this government, weighed and balanced fairly, not an emotional decision? Because does this Premier have an issue with investing in Yellowknife or is he thinking that our needs in this territory don’t matter when it comes to a territorial courthouse?

**HON. BOB MCLEOD:** Maybe if he asked better questions, he’d get better answers. I’ll leave it up to the committee. We did, as the government put it, have that project, called the NWT Law Courts Project, and we put $40 million in the capital budget in 2005-2006. Committee took it out of the budget. If the Member wants to put it back in, he would have to get the support of all the Members of the Legislative Assembly, especially the committee.

**MR. HAWKINS:** Now is another fine example of divide and conquer. Urban versus rural, committee versus process. Maybe the Premier, being such a maven when it comes to court space and experience, maybe you can explain why the existing courthouse, in its existing form, works and meets the needs of health and safety of our employees as well as, as I mentioned earlier, those accused, those victims and those witnesses when we’re working on their initiatives for the people.

**HON. BOB MCLEOD:** I’d like to remind the Member that we don’t do capital planning in this Legislative Assembly. We do it in a separate process.

**MR. SPEAKER:** Thank you, Mr. McLeod. Final supplementary, Mr. Hawkins.

**MR. HAWKINS:** Thank you, Mr. Speaker. Where else would you do capital planning and discussion other than asking questions in the Assembly? What is the problem that’s holding this particular issue back? Is it because it’s an investment in the city of Yellowknife, or is it because the Premier has other ambitions or obligations that he is afraid to meet and cause conflict with this idea?

**HON. BOB MCLEOD:** I’d suggest that the Member make his case with the committee and that at the appropriate time, through the capital process, he tries to get that amount of money approved.

**MR. SPEAKER:** Thank you, Mr. McLeod. The honourable Member for Nahendeh, Mr. Menicoche.

## QUESTION 129-17(4): ENBRIDGE REPORT ON CONTAMINATED SOIL IN NAHENDEH

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. I’d like to ask the Minister of Environment and Natural Resources if he has received an update from Enbridge Pipelines about the reported contaminated soil on the remediation digs outside of Fort Simpson.

**MR. SPEAKER:** Thank you, Mr. Menicoche. The honourable Minister of Environment and Natural Resources, Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Yes, we have an update. There was some contaminated soil found a week or so ago, about 30 cubic metres. There was no visible spill. The pipeline was shut down as a precaution as they did the check. Then on the 8th, sorry, the 10th I believe it is, they put a sleeve around the area where they thought there was potential weakness and the pipeline was re-opened.

**MR. MENICOCHE:** The media report that I had looked at wasn’t really clear whether it was contaminated by crude oil or something else. Was Enbridge able to tell the Minister in their briefing exactly what the source of that contamination was?

**HON. MICHAEL MILTENBERGER:** The National Energy Board will have the lead on this. They collected all the soil and they’ve sent it away for analysis. They’ve put the precautionary sleeve around the pipeline, and when we get that information back or when I’m made aware of the results of those tests, I will make sure that we share that with the Member.

**MR. MENICOCHE:** Members of the public, the community and the people that use the land are concerned if there’s a public safety or hazardous risk. Can the Minister tell us if that’s the case?

**HON. MICHAEL MILTENBERGER:** All of the appropriate precautionary measures, processes and procedures have been activated. There was a spill report done. Enbridge kicked into gear their response. The National Energy Board was informed. We’ve been tracking the issue. They’ve collected the contaminated soil for testing, and they’ve put a precautionary sleeve around the affected area or what they believe could be the affected area of the pipeline. We’re waiting for the test results. The matter, as far as I’m aware, seems to be in hand at this juncture.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Final, short supplementary, Mr. Menicoche.

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. I’m glad that ENR is now working with Enbridge Pipelines. How soon does that information get to the Department of ENR should there be another incident, as it were?

**HON. MICHAEL MILTENBERGER:** The protocols are such that once we’re aware of it, there’s a response kicked into gear by Enbridge and the National Energy Board as the responsible agencies involved. As next in line, ENR is involved, and we activate all our processes to make sure we’re working closely with the National Energy Board and Enbridge. That process is in place. Then there’s a communication strategy that kicks into gear, as well, to make sure that folks are aware of what’s happening and what the circumstances are.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. The Member for Deh Cho, Mr. Nadli.

## QUESTION 130-17(4): MACKENZIE VALLEY FIBRE OPTIC LINK

**MR. NADLI:** Thank you, Mr. Speaker. Earlier today I acknowledged the reality of the expansion of telecommunications in the small communities. My question is to the Minister of Finance. Recently, we had a very successful lobbying effort to go to Ottawa, pound the pavement over there, and score at least seven major projects. One of them was the fibre optic line. I just want to ask the Minister if he could provide an update, in terms of the plan and the vision, in terms of how that project might unfold.

**MR. SPEAKER:** Thank you, Mr. Nadli. The Minister of Finance, Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Very quickly, the project description work is being done and will be concluded in the next couple of months. We have, as well, put out an expression of interest to the industry about building, running a fibre optic line. There has been substantial interest in that. We’ve met with the Aboriginal governments up and down the valley. A specific interest has been evidenced by the Inuvialuit, Gwich’in and the Sahtu. We are working with them on the joint venture approach. At the same time, we do have an ancillary effort with P3 Canada that is inching along. Our main focus is on the joint venture approach with the Aboriginal governments. There has been significant interest expressed by industry, by countries, Germany, Sweden. We have the Defence department.

There is consultation happening now. We were in Wrigley and Simpson this week. They are going to be going up the valley to talk to all the communities, bringing forward and laying out the models of what’s going to happen winter and summer as the project is put in place. We are going to have a breakfast up here mid-week next week for those folks around Cabinet and staff to just have the models there so they can see what’s being presented to the people up and down the valley. The consultation will continue all the way up to Tuk about the work that’s being done.

**MR. NADLI:** As we might know, I think the Mackenzie Highway, at this point, ends at Wrigley. Right now we’re building the proposed Inuvik-Tuk highway. I just want to understand, perhaps for the benefit of this side of the House, too, in terms of how the fibre optic line will be proposed to be laid in the ground when, in fact, half of the Mackenzie Valley Highway is not complete.

**HON. MICHAEL MILTENBERGER:** The project description for the Mackenzie Valley Highway has been worked on and is complete. We intend to work within the right-of-way of the proposed road. Where there is a cleared right-of-way, we’ll use that. But we’re going to follow that approved route. It’s a trench that’s four inches wide and about six inches deep and very modest in terms of its effect on the environment. It’s trenched, then the cable is laid, and it’s filled in behind. We’re going to use directional drilling. We’re going to go under every creek and river so that we leave the water systems alone. We look at this as being about as environmentally benign a project as there could possibly be.

**MR. NADLI:** I just wanted to understand. I know the Minister did mention that this is a partnership project, in terms of ensuring that industry is on board and supporting this very vital project that will really enhance the infrastructure in terms of telecommunications in the NWT. What is the nature of the relationship with industry?

**HON. MICHAEL MILTENBERGER:** The relationship is a broad one. We see the satellite remote sensing industry as being an anchor tenant that…(inaudible)…this project in Inuvik. We’ve put out an expression of interest. There have been about 18 different applications picked up by industry from around the country and the world. They see this as a very unique, novel, and groundbreaking project. We will be working through the joint venture to determine who is successful, and then we’ll be working out an arrangement to build, install and maintain the fibre optic line through the joint venture that’s going to get structured.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Final, short supplementary, Mr. Nadli.

**MR. NADLI:** Thank you, Mr. Speaker. My final question is, just recently we had the deregulations of the CRTC, kind of letting it loose in terms of how telecommunications companies perhaps might move up here in the Northwest Territories. And there have been recent issues, in terms of the media and times of profiling how consumers are being affected by just some of the practices that have been in place for some time. How is this government going to ensure that consumers are protected from being taken advantage of, in terms of the telecommunications technology that is being established up here in the Northwest Territories?

**HON. MICHAEL MILTENBERGER:** Let me speak specifically to the fibre optic line. The intent of the joint venture is to have a major piece of telecommunications technology and infrastructure owned and operated by Northerners, Aboriginal government and the territorial government. One of our collective goals is to, while we have a decent return on investment, we want to make it modest enough that we can keep the cost of the service into the communities as reasonable and as modest as possible to make it as affordable as possible to build the customer base. That’s going to be our goal.

The final mile piece in the communities, how that new technology will be put to use in communities, that’s where the economic opportunity lies for the private sector, as well, NorthwesTel, Ice Wireless. There are a whole host of options out there in terms of who will own and operate the systems and services within the various communities where you’ll have the cell phone service and the high-speed Internet, the cable, and all the other economic opportunities.

The government in all the communities will be a customer of whoever has that opportunity. It will give us cutting-edge technology that will allow us to use our telehealth properly. It will allow the children’s schools to have access to high-speed Internet and do all the kind of work nowadays that students can do in the rest of the world. We’re going to be very careful to make sure that this is owned and operated in the North and that we make it affordable for all Northerners and we build a substantial information-based technology and industry in Inuvik tied to remote sensing. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. The Member for Weledeh, Mr. Bromley.

## QUESTION 131-17(4): MENTAL HEALTH DIVERSION COURT

**MR. BROMLEY:** Thank you, Mr. Speaker. My questions are for the Minister of Justice. The Department of Justice has been working on the development of a mental health diversion court in response to repeated committee requests and motions passed in this and the 16th Assembly. The Minister has told me that justices are generally supportive but need to be assured that the model to be used will satisfy conditions for being a legal alternative form of sentencing.

How is the Minister working to ensure that this legal test is met and when can we expect to see these proposals for review by committee? Mahsi.

**MR. SPEAKER:** Thank you, Mr. Bromley. Minister of Justice, Mr. Abernethy.

**HON. GLEN ABERNETHY:** Thank you, Mr. Speaker. An interdepartmental committee consisting of members of the departments of Health and Social Services, Education, Culture and Employment, MACA, Justice and the Executive are working on this initiative. The committee expects to complete its assessment of the feasibility of a specialized court by March 31, 2013, at which point I’ll will be coming to committee to share the findings as well as the options that exist, and looking for committee’s support on moving on one of those options.

The judiciary has expressed a significant interest in a specialized court but had some reservations about the nature and the type of court. They seem to be more interested in a broader approach taken similar to a wellness court as opposed to a specific mental health court. We are looking and talking to them on a regular basis. We are looking and talking to the committee on a regular basis to find out what those needs are, what the desires are, and we will be bringing that to committee once it’s completed on March 31st. Thank you, Mr. Speaker.

**MR. BROMLEY:** Mr. Speaker, of course, committee has been quite clear in their interest in a mental health court, as have most jurisdictions in North America. The Minister has acknowledged that Justice and Health and Social Services must work closely together if a mental health or wellness court to be put in place.

Is the Minister working closely with his colleague in Health to ensure that the concerns of justices regarding the assurance that the mental health services are put in place before proceedings with the new court are met? Mahsi.

**HON. GLEN ABERNETHY:** Mr. Speaker, as I indicated, there are many options. Wellness court, mental wellness court or mental health court is one; wellness courts are others. We don’t know which type of court we are going to be moving forward with. We’re going to be bringing forth those recommendations to discuss with committee. Mental health court is just one example.

With respect to working together, the Minister of Health and I have had many conversations on this, and we have both directed our staff to be involved and to work on these exact initiatives. As I have indicated, there is an interdepartmental committee consisting of members from Health and Social Services, Justice, as well as other departments that are working on this initiative. We’ll be coming forth on March 31st with some information and options for committee to consider, review and have some discussions on. Thank you, Mr. Speaker.

**MR. BROMLEY:** Mr. Speaker, the Minister has told me that justices want these mental health services in place. In his work with the Minister of Health, and in recognizing that the programs being proposed for 2013-14 are in the budget, will these programs meet, as proposed, the needs assessed by justice requirements for a mental health court? Mahsi.

**HON. GLEN ABERNETHY:** Mr. Speaker, the need for the programming that will be supported by the type of court, if any that are supported by this government, is something that we are working on with the Department of Health and Social Services. The committee is involved. They are working together. It is a committee of Justice, Health and Social Services. By March 31st we’ll have a better idea of exactly what programming is going to be required in order to support the different models. Until we actually choose a model, with support of committee, we won’t know exactly the programming that is needed, but we are starting to get a sense and that information will be available by March 31st. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Abernethy. Final, short supplementary, Mr. Bromley.

**MR. BROMLEY:** Thank you, Mr. Speaker. We have been at this for several years now, so I’m glad the Minister is getting a sense. We were told by Health that, in fact, these programs will meet the mental health court requirements.

Is the Justice department going to be prepared to fund a court, given that those conditions are met, for 2013-14 and the feasibility study will, obviously, be done this fiscal year? Mahsi.

**HON. GLEN ABERNETHY:** Mr. Speaker, the Member’s timeline is a little bit different than the timeline I’m working on. I remember that a motion was passed in the 16th Assembly. Nothing happened. A motion was passed in the 17th Assembly, which is only about 18 months old, so we’ve been working on this for 18 months. We have a lot of good information. We have taken a lot of information to committee. We are working with committee.

Once again, the Member continues to refer to a mental health court. We’re not sure that that’s the option that’s going to be supported by committee, but we will be having those discussions.

At the end of the day, if this is supported by committee, the options are supported by committee, and the committee wants us to move forward on a court, we will be bringing it through as part of the business planning cycle. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Abernethy. Time for oral questions has expired. Item 8, written questions. Item 9, returns to written questions. Item 10, replies to opening address. Item 11, petitions. Item 12, reports of standing and special committees. Item 13, reports of committees on the review of bills. Item 14, tabling of documents. Mr. Bromley.

# Tabling of Documents

## TABLED DOCUMENT 26-17(4): LETTER ON PERPETUAL CARE OF CONTAMINATED SITES AND THE GIANT MINE

**MR. BROMLEY:** Thank you, Mr. Speaker. I would like to table a letter from Alternatives North addressed to Scott Vaughan, commissioner of the Environmental and Sustainable Development office of the Auditor General, regarding their petition on perpetual care of contaminated sites at the Giant Mine. Mahsi.

**MR. SPEAKER:** Item 15, notices of motion. Mr. Yakeleya.

# Notices of Motion

## MOTION 4-17(4): FEDERAL SUPPORT FOR SAHTU JOBS AND ECONOMIC GROWTH

**MR. YAKELEYA:** Thank you, Mr. Speaker. I give notice that, on Monday, February 25, 2013, I will move the following motion: Now therefore I move, seconded by the honourable Member for Nahendeh, that the Government of the Northwest Territories immediately initiate discussions with the Government of Canada to prioritize funding for an all-weather Mackenzie Valley Highway from Wrigley into the Sahtu;

And further, that the Government of the Northwest Territories immediately initiate discussions with the Government of Canada to seek federal investment and human resource development initiatives along the lines of the Voisey’s Bay model;

And furthermore, that the Government of the Northwest Territories provide a comprehensive response to this motion within 120 days.

Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Item 16, notices of motion for first reading of bills. Item 17, motions. Item 18, first reading of bills. Item 19, second reading of bills. Item 20, consideration in Committee of the Whole of bills and other matters: Tabled Document 9-17(4), NWT Main Estimates, 2013-2014; and Bill 1, Tlicho Statutes Amendment Act, with Mrs. Groenewegen in the chair.

# Consideration in Committee of the Whole of Bills and Other Matters

**CHAIRPERSON (Mrs. Groenewegen):** I would like to call the Committee of the Whole to order. The Speaker has outlined the matters before us today in Committee of the Whole. What is the wish of the committee? Mr. Menicoche.

**MR. MENICOCHE:** Thank you very much, Madam Chair. The committee wishes to consider Tabled Document 9-17(4), NWT Main Estimates, 2013-2014, with the continuation of deliberation of Health and Social Services. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Does the committee agree?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. We will continue with that after a brief recess. Thank you.

---SHORT RECESS

**CHAIRPERSON (Mrs. Groenewegen):** Committee, I’d like to call us back to order, please. We are on the Department of Health and Social Services. I’d like to ask the Minister if he would like to bring witnesses into the Chamber. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Yes, I would.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Does committee agree?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** I’ll ask the Sergeant-at-Arms to please escort the witnesses to the table.

For the record, Mr. Beaulieu, could you please introduce your witnesses again today?

**HON. TOM BEAULIEU:** Yes, Madam Chair. To my right is Debbie DeLancey, deputy minister of Health and Social Services. To my left is Jeannie Mathison, director of finance, Health and Social Services.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Beaulieu. Members, we are on page 8-13, Health and Social Services, activity summary, directorate, operations expenditure summary, $8.599 million. Mr. Bromley.

**MR. BROMLEY:** Thank you, Madam Chair. The Minister mentioned in his earlier comments the three pilot projects they’ve got going in the area of, I believe it’s chronic disease. Just in terms of our policy development and whatnot, what are those three programs and what is the basis for the evaluation that will go into designing the then permanent chronic care strategy?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Bromley. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. The three pilot projects are for renal care, diabetes, and mental health and addictions.

**MR. BROMLEY:** Are those terminating or being completed this fiscal year that we’re in?

**HON. TOM BEAULIEU:** They are scheduled to be completed, or the pilot completed, in April of this calendar year, 2013, and then from there we’re going to use that project to roll out the further chronic disease programs.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Beaulieu. Next I have Mr. Menicoche.

**MR. MENICOCHE:** Thank you very much, Madam Chair. I might be actually jumping ahead of myself, but it is under directorate. Just in terms of active positions. I don’t know if Madam Chair will allow me to ask that. There’s an increment of four positions over the last fiscal year. Maybe I can ask the Minister about that.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Yes, go ahead. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. Increase of four positions are three full time and one part time. Two positions, new positions from other sources. The Territorial Health System Sustainability Initiative from Health Canada is a project manager, medical travel, Yellowknife; a policy officer, health benefits, Yellowknife; another position, internal transfer, resource, paid internally from existing resources, system navigator in Yellowknife. One position, a new initiative to develop clinical governance, is a chief physician advisor, which is actually a 0.75 full-time equivalent, Yellowknife.

**MR. MENICOCHE:** How many of these will be located in Yellowknife?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. By the sounds of it, all of them, but I’ll refer to the Minister.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. The plan is to have three of the positions – the project manager, the policy officer, and the system navigator – in Yellowknife. Just a little explanation. The one project manager is the review of medical travel. The policy officer is a review of the health benefits and will also be located here. The system navigator, located in Yellowknife, is the person in charge of handling all of the issues that are brought forward to the system. The chief physician advisor, although we indicate Yellowknife, could actually be located anywhere in the Northwest Territories.

**MR. MENICOCHE:** Just for the Minister’s last point, I think, as we determine new positions, that’s got to be one of the qualifiers. It doesn’t have to be Yellowknife all the time. Just because they’ve got the said infrastructure or whatever reasoning that their planners come up with for these new positions, they should always ask the question as part of their assessment. Can it be in the regions? Can it be in the communities? I’d like to ask the Minister if, in the future, he’s willing to consider that with his department officials.

**HON. TOM BEAULIEU:** The Health and Social Services system is a fairly decentralized operation. We do try to place positions outside Yellowknife. We do that test each time there is a position that does not necessarily have to be located near the centre. In this case, as this position works with all authorities, it can be located anywhere the individual wishes to live, depending on who applies and who gets the actual job.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Beaulieu. Moving on. Mr. Hawkins.

**MR. HAWKINS:** Thank you, Madam Chair. Under infrastructure planning, I’m curious as to the detail, if the Minister can explain the infrastructure planning that falls with the Stanton Territorial Hospital. What money is involved? What money is being seeded into that master plan development and when can we start to see some details of that?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Hawkins. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. We’re looking for the infrastructure plan here. We have a little bit of detail on the capital plan with us. We are at the planning stages of the Stanton Territorial Hospital. We do have the dates on when we’re going to be rolling out the plan and when we’re going to start spending money, of course, in the actual renovation of the hospital, but that largely depends on the approval of the Legislative Assembly. I’m just going to… Bear with me, Madam Chair. The plan now is that prior to March 31, 2013, we’ll have spent $3 million on planning and in this fiscal year we will put $1 million into the budget for the planning. In 2014-2015 it will be $15 million as we get near to – sorry, sorry. Make that $5 million. I’m sorry; I’m having a little trouble seeing.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Minister Beaulieu. Ms. DeLancey.

**MS. DELANCEY:** But we’ll be bringing it in, in 2013, we’ll be bringing it through the capital planning process this fall.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. DeLancey. Minister Beaulieu.

**HON. TOM BEAULIEU:** Okay. Then in 2015-2016 we’re expecting the first actual construction in the Stanton Hospital, for allocation there of $20 million. However, it’s important to note that this has to go through the capital planning process and through the House at the appropriate time when we talk about capital.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Minister Beaulieu. Mr. Hawkins.

**MR. HAWKINS:** What does the Minister have by way of information that he can share with Members, such as myself, with regard to the $2 million that would have been spent by this March 31st? I’m trying to see what project development, what’s guiding information, planning documents, trying to get a sense of it. At the same time, the other additional question is: Who is doing this work?

**HON. TOM BEAULIEU:** We can provide the details of the expenditures up until the end of March. As far as who is doing the work, I will have the deputy minister provide the name.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Beaulieu. Ms. DeLancey.

**MS. DELANCEY:** Thank you, Madam Chair. The work is being done under the direction of a steering committee that includes the department, representatives from Stanton and the Department of Public Works and Services. The actual planning study is being done by external consultants.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. DeLancey. Mr. Hawkins.

**MR. HAWKINS:** Thank you, Madam Chair. Have there been any consultant reports generated thus far, and can they be shared with committee Members like myself?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Hawkins. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. There are several reports. Some we may possibly be able to share. We may be able to share all the reports but this is proprietary. Some of the reports may be proprietary information. We’ll share what we can with committee.

**MR. HAWKINS:** I was going to leave it but I think I heard a good question on the side here. Wouldn’t it be proprietary information for us?

**HON. TOM BEAULIEU:** When we request reports and we RFP work with the intention that the company is doing work for the Department of Health and Social Services, for that intent, if we are to release their work beyond our own coffers, beyond Health and Social Services, then we do have to return back to the company to see if it is okay to release their work that was initially requested by us for us.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Beaulieu. Mr. Hawkins. Good? Okay. Next I have Mr. Moses.

**MR. MOSES:** Thank you, Madam Chair. In terms of directorate here, I’m just looking at the policy communications and legislation. I just want to ask the Minister of Health and Social Services if there is a plan in place to create a translator program within the regional health centres to bring some of our patients from small communities into the regional hospital or even territorial hospital. If there is a translator program in place for all the Aboriginal languages in the Northwest Territories, ones that are specific to that region, Can the Minister please answer that?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Moses. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. Right now some of the positions at health centres and hospitals have built into their jobs that they would be able to do interpreting or translating. I’m not sure what the correct term is. I don’t have the information here. I would rather say to fully draw out what we plan on doing for translation or interpretive services at the hospitals.

**MR. MOSES:** The Minister mentioned that some jobs have the translator services built into their positions and duties. Are those extra responsibilities funded on top of their job duties, and if there are already positions in place where people have the opportunity to be translators, can he supply committee with all the hospitals and regional centres or health centres that do provide translator services in the Northwest Territories so that we know who to speak to and we know which hospitals and health centres actually provide that service?

**HON. TOM BEAULIEU:** We have no problem providing that information. If we are able to pull that information, the department is listening and is able to pull that information together before the end of the review, we will provide that in the House. If not, we will provide that to the Members at a later date.

**MR. MOSES:** Yes, just continuing on. Would the Minister be looking at creating a specific program on translation, in terms of medical terminology, that would either help support, maybe, our community health representatives who are probably some of our longest-standing employees in the Health and Social Services system? Would he be looking at possibly creating that program with the medical terminology, and make it part of either that program or some other program that local nurses could take, so that they can provide those services to our patients, especially the patients who don’t speak English?

**HON. TOM BEAULIEU:** Along those lines, we have recently hired an official languages manager. That was with the intention of updating our services on the official languages. We are also running a medical terminology specific to cancer, in Fort Good Hope as a pilot. Once the workshop is able to come back to us with terminology that we should be using to describe some of the things related to cancer, we will see the success of that type of workshop and then expand on that.

**MR. MOSES:** I look forward to seeing the results of that pilot project.

Under the policy area, under the directorate, would the Minister be willing to look at the policy right now for the Health Promotion Fund? I’m not sure if I should bring it under here or program services, but since it is under the directorate and they cover policy, would the Minister look at the policy for the Health Promotion Fund, and instead of having a one-year contribution agreement, would he be willing to make it a multi-year policy to reflect successful programs that we have in the small communities and the regions?

**HON. TOM BEAULIEU:** We have that ability now. We are able to do multi-year funding project by project.

**MR. MOSES:** Just specifically, up to how many years with that policy can one organization apply for the multi-year funding? How many years would they be able to receive funding under that policy?

**HON. TOM BEAULIEU:** My understanding is there is no cap in as far as time, but the flow of the funding within that agreement is contingent upon approvals in the Assembly.

**MR. MOSES:** With the little time I have left here, and looking in terms of policy and legislation, and the Minister alluded to it yesterday in his opening response to the general comments, but that was in terms of the second medical opinion and the right to have a second medical opinion, I wanted to get an update from the Minister on whether they’re going to be pursuing this, where they are in terms of providing that right to a second medical opinion for our residents.

**HON. TOM BEAULIEU:** In my response to MLA Menicoche, I indicated that we had hired a policy officer to review health benefits. That review of a second opinion is within that review.

**MR. MOSES:** When can committee members and Members of this Legislative Assembly see a review on those policies, but specifically to the one that I had mentioned, the right to a second medical opinion? When can we see the review specifically for that?

**HON. TOM BEAULIEU:** We are just starting to put the pieces of this review together now. The position will come on, hopefully, soon in the new fiscal year. We believe that it will take all of the 12 months in that fiscal year to complete this review.

**MR. MOSES:** I think, in terms of this, the right to the second medical opinion, I feel that, you know, we possibly could get ourselves in some hot water if we don’t have that right now, in terms of some people not being diagnosed properly or not being diagnosed at all and continue to… Some Members have stated in this House during question period, they go to the health centres and they’re just given some Tylenol to go home when there are bigger concerns. I think the longer we wait, we’re doing a disservice to the residents of the NWT.

As the Minister knows, we do have challenges in securing doctors, physicians and nurses in some of the communities. Is there any way that this Minister can use his ministerial authority to try and see if we can get something up and running, a review specifically for this program in place a lot sooner than later, because I feel that this department and this government could get themselves into some trouble knowing that we’re bringing this up now and discussing it and we’re probably going to see a review maybe in two years or something. Can the Minister use his authority and look at trying to fast-track this right to a second medical opinion?

**HON. TOM BEAULIEU:** We will do everything we can to speed the process up with the understanding that this review is going to be cross referenced to insured services, appeal process, two parts of the health benefits review that need to be done with extreme diligence. The case file review is something that we’re currently using and will continue to use until there are changes in this health benefits policy. On a case-by-case basis, we will use the case file reviews in situations where we think that an individual, or an individual has come to us through some medium that they need to have a second opinion. Then we would do that through a case-by-case review of the file.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Beaulieu. Mr. Moses, your 10 minutes is up, so I’m going to move on to some of the other people who are on the list for this page. Just so that Members know who is on the list, this is the order that I have: Mr. Menicoche, Mr. Nadli, Ms. Bisaro, Mr. Yakeleya and Mr. Dolynny, on this page. Thank you. Next I have Mr. Menicoche.

**MR. MENICOCHE:** Thank you very much, Madam Chair. Just with regard to establishing an agreement with the Northern BC Health Authority and our government, in terms of accommodating Fort Liard residents, and as well, I spoke about it in the House, about even having an impact on our medical travel costs out of the Nahendeh region. I believe that utilizing the services from the Northern BC Health Authority will greatly not only make life easier and better for the residents of Fort Liard, but also in terms of our medical travel. Just with that, I had a discussion and raised a Member’s statement and raised oral questions with the Minister with regard to that. I’d just like to know what his plan is about moving forward in discussions with the BC government with regard to a trans-border agreement. Thanks.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Minister Beaulieu.

**HON. TOM BEAULIEU:** Madam Chair, as I indicated earlier, we are going to have a discussion with the leadership in Fort Liard. After that, all things being equal, and then wanting to move in that direction, and we think they probably do, but we need to have that discussion just the same.

We would then have discussions with British Columbia Health to sort out the out-of-territory billing and then return emergent referrals from Nelson to the nearest centre where the required services are available. So if they are getting a service there and they need to have further services beyond what Nelson is able to provide, then we have to decide whether or not they are going to send them to Edmonton or Yellowknife. So you can appreciate that that work has to also happen.

We also need to review the capacity of Fort Nelson to serve the additional clients. Usually a system, no matter where, has a capacity to deal with the current load that they carry. With us putting additional community in for the majority of medical services onto Fort Nelson, a community the size of Liard, we need to know that that health system has the capacity to take our patients.

**MR. MENICOCHE:** Madam Chair, I can assure the Minister that’s the confidence that the leadership of Fort Liard and the constituents do want me to raise this issue. I would like to get some assurance that the Minister can begin the process of negotiating or talking with the BC government in advance of him coming over to Fort Liard. I know that we’re working on something for him to come over in June, but I don’t want the Minister to go there and say, thank you for letting me know, we’ll check into it now. He should be checking into it. That’s why I’m raising it in this House and raising it during Member’s statements and oral questions. This is something we should be prepared for when we go to Fort Liard to say, alright, here is the plan, here is how it’s going to work. Like he said, there are a lot of issues to be addressed. Hopefully he can begin some of the preliminary work. If I can just get the Minister assurance that he can do some background work.

It is kind of like Fort Liard. What they tell me is that they have a sore knee, so they’re driving to Fort Simpson for three hours, they get in a plane to come here, they’re overnighting, and the doctor tells them they have a sore knee, and then they have to go all the way back home. That’s what the Minister is telling me, is that, well, we have to go to Fort Liard and look at their sore knee, kind of thing. I’m telling you that the knee is sore, that the need is to go into Fort Liard, and they do have some baseline relationship. Most constituents do. But when it comes to the health care and travel needs, I think if we can begin this discussion and begin those arrangements, the sooner we can make lives better for the communities and the constituents in Fort Liard.

**HON. TOM BEAULIEU:** Madam Chair, yes, we can proceed with discussions with BC Health and then, from our findings there, we can then go back to Fort Liard for reasons of speeding up the process a bit.

**MR. MENICOCHE:** Just with that, of course, we continue to invest into our medical record system. The whole point of it is to be compatible throughout Canada. Does the ministry know if our medical records expenditures will be consistent with northern BC Health? The concern that I heard from medical staff in Fort Liard is that they want to be assured that if someone is getting treatment in Fort Nelson, that they’re not getting sick and then getting – I forget the term – on one medication and they’re given another, that they don’t want some kind of conflict and, of course, cause further harm to a client.

With our medical health records, is it Canada-wide? Is that something that will be consistent and accessible on the BC side? Thank you.

**HON. TOM BEAULIEU:** Madam Chair, that would be one of the huge issues in dealing with BC Health in Fort Nelson. At this point, the electronic medical records are for the NWT, and then we have a long history dealing with Health in Alberta, in Edmonton. We have some compatibilities there, but none in British Columbia. So that would be an issue that would be a barrier that we would have to deal with.

**MR. MENICOCHE:** Madam Chair, I know there’s lots of history there, but at the same time, we’re talking about a community of about 500 people and I think that’s all it’s going to impact. I don’t think we’re pushing to have clients from Ulukhaktok to go to Fort Nelson, either, just the ability to make lives easier for the residents of Fort Liard. It’s basically a two and a half hour drive from there to get their medical needs met in Fort Nelson, BC. I don’t think it would be a huge impact on their services. As well, it’s about developing the same kind of relationship that we have with Alberta Health Services and developing a baseline as we go along. Thanks.

**HON. TOM BEAULIEU:** Madam Chair, we will work on this as I agreed to do. I’ve only mentioned a few of the issues that we have to deal with. Even the privacy of individual files has to be something that we would deal with BC Health. We will try to employ the same type of systems that we do when we deal with Alberta Health and British Columbia, for the most part, but… As we do with Alberta, pardon me. For the most part, we will try to do that, but then BC Health also has their own regulations and restrictions on how they deal with patients. Those are things that we do have to deal with.

**MR. MENICOCHE:** Madam Chair, I think for the most part, residents of Fort Liard do have some type of working relationship just on an individual basis, so we’re going to have to work to support that, because I know that even some of the elders, when they get sick, end up in the Fort Nelson hospital. I’m glad for them because they are closer to family, cousins and relatives, but we have to support it and look for some kind of model and arrangements to continue those services there. Then we’ll begin on the whole area of dental services as well. That’s something that residents would like to go to Fort Nelson for.

If we start looking at it, concentrating on it seriously and support our constituents and residents as they get their services met in Fort Nelson, and if there is an agreement that has to be made, I believe we should be working hard on finding out what those mechanisms are. Thank you, Madam Chair.

**HON. TOM BEAULIEU:** Madam Chair, like I said, we will work on it. We have something that the Member has brought up, the non-insured services that we work with the federal government in providing non-insured health benefits. Like dental, those will be something that, again, would be another area that we have to work on with BC Health in order to get the patients for their various medical dental services through Fort Nelson. We fully intend to start the process of working on that.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Minister Beaulieu. Next on my list I have Mr. Nadli.

**MR. NADLI:** Thank you, Madam Chair. Right now my mind is at the community level, at the ground level. On the reserve we have a building that was constructed that has been sitting empty for some time and it’s called a health centre. I wanted to ask some questions regarding this and to try to get a sense in terms of the timeline and the priorities that have been directed to ensure that at least this place can be operable.

So, at the community level on the reserve, normally what happens on the reserve – and this is perhaps looking at the view from the examples from down south – is that First Nations usually have a governance arrangement with the federal government, or programs and services such as education and health are given to the reserves to administer to its citizens. But here in the North we have a different set of circumstances and those program responsibilities, for the most part, are set with the GNWT. The reserve, of course, is the only reserve in the Northwest Territories. So, obviously, there are some obstacles, but we had these discussions with the Minister and my understanding was that there have been some discussions in terms of trying to wrangle through the jurisdictional matters and to try to come to a point where the new health centre on the reserve could be operable. So I just want to get a status from the Minister in terms of where that might be at. Mahsi.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Nadli. Minister Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. We are very close to having the land tenure sorted out with ANSI and we’re very close. They didn’t want to proceed on dealing with the land tenure issue until the project was substantially complete. So this is what we’ve done. We’ve completed the facility as of August 2012, this past August the unit was considered to be final and, therefore, we’ve moved with the Aboriginal and Northern Affairs Canada in the process of finalizing land tenure and we are at the very final stage where we’re expecting to have that resolved very soon. I can’t give the exact date, unfortunately, but we’ve been moving forward on this.

**MR. NADLI:** I’d like to thank the Minister for that response. It gives me a sense in terms of where the problem may lie. It is a fundamental issue in terms of the land and the jurisdiction.

I know there have been some discussions in trying to bring the service to the ground level. There have been some talks with the two health authorities, including the Deh Cho and the Hay River Health Authority. Where is that at and are we going to see an alignment of this initiative along with the move to try to sort out the land issue and to ultimately have the health centre operable? At what point can we expect or the reserve residents expect the health centre to be open?

**HON. TOM BEAULIEU:** Thank you. We have had the two CEOs from Deh Cho Health and Social Services and the CEO of the Hay River Health and Social Services discussing how they’re going to be able to provide a service to the people on the reserve using that health centre. So the plan is that we’re going to be most likely using the medical services out of Hay River to come across and provide service on the reserve. So right now it’s just sorting out some of the details.

I mean, as soon as the land tenure is done, that place will be operational. We’re just going to sort out the details and then between the two CEOs they’re going to come up with a plan and remembering that this involves an Integrated Service Delivery Model. So we would look at what services can be provided right out of that health centre and so that individuals don’t have to go from the reserve across to Hay River, especially a 15-kilometre drive in the summer months to see the medical clinic when maybe there will be a doctor in Hay River one day a week or one day every two weeks, maybe a nurse practitioner a few days a week, a registered nurse and so on and so forth. So we were going to try to find the right integrated service that’s needed, the right medical services that are needed for Hay River and we’re going to try to put those services in that building using the staff at the Hay River Health and Social Services.

**MR. NADLI:** I just wanted to ask about the land tenure. Are those discussions primarily with Health and Social Services and the First Nations? Is the federal government involved with those discussions and at what point would there be an agreement?

**HON. TOM BEAULIEU:** Thank you. The actual discussions are between Municipal and Community Affairs, Public Works and ourselves with the federal government.

**MR. NADLI:** Thank you. The point that I think that I wanted to inquire about is what level of discussions have been happening with the federal government to ensure that they’re part of these discussions. Because what could happen is that as you path out, at least to wrangle through the jurisdictional layers and to get to the ground level to ensure that the health centre is operable, perhaps you could be setting a template for perhaps other departments to work cooperatively and collaboratively with the reserve.

**HON. TOM BEAULIEU:** We don’t have the detail of the level of discussion between officials for the GNWT and the federal government through ANSI, the federal government, Aboriginal Affairs. So we can provide that information to the membership or to this Member. It shouldn’t be difficult to pull that information together. We can pull that information and provide that to the Member.

**MR. NADLI:** Thank you. This is perhaps my final question. Can we expect the health centre to be open by the new fiscal year?

**HON. TOM BEAULIEU:** Thank you. We’re expecting the health centre to be open early in the new fiscal year, early.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Minister Beaulieu. Next on my list… First of all let’s recap where we are. We’re on Health and Social Services, directorate, operations expenditure summary, $8.599 million. Next I have Ms. Bisaro.

**MS. BISARO:** Thank you, Madam Chair. I have a number of questions on this page. I wanted to start off with looking at the federal funding that we have, which is due to expire in a year’s time, give or take. The information that we have currently indicates that much of the federal funding is being used for supplementing, I guess, our medical staff, doctors, nurse practitioners and the other large piece is supplementing our medical travel.

I mentioned in my comments the other day that I’m quite concerned with the fact that we haven’t yet got an extension of this federal funding. I appreciate the fact that the department is working on it, but I’d like to ask the Minister specifically about the money, federal money that we have, which is used to supplement physician services and supplement nurse practitioners. I think it’s also used to supplement nurses in small communities as well to a certain extent.

So I’d like to know from the Minister, he mentioned yesterday that while if we lose the money we’re just going to have to find it. I’d like to know from the Minister if we don’t have a bit of a better plan than just sort of a wing and a prayer and hoping that we’re going to get this money and if we don’t, well, then we’ll look at things at that time. What kind of a plan do we have in place to deal with the programs which are now, in terms of physician services and nurse practitioners and other programs within those sorts of provision of medical services, what plan do we have to keep those programs going when we lose federal funding?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Bisaro. Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. Our first plan A is to try and retain the THSSI funding. We are on the schedule of the federal Minister, and when the federal Minister wishes to discuss the plan or the furtherance of the THSSI funding with us, then at that time we will have that discussion. If there is no discussion and the money is sunsetted or lapsed, then we will need to come back to the Legislative Assembly to fill the gaps. We really don’t think it’s an option to reduce medical travel by that amount. We really don’t think it’s an option to lay off six nurse practitioners. We really don’t think it’s an option to reduce physician funding in Stanton.

**MS. BISARO:** I’m glad to hear the Minister say that it’s not an option to reduce physician support and nurse practitioners and that we will continue to fund those. I also sincerely hope that we will get an extension of this federal funding, because we desperately need it in order to provide the proper physician and nursing support that we need for our hospitals and health centres.

With regard to medical travel, it’s been mentioned by many Members and with regard to the amount of money that we currently put in to medical travel from our federal funding, it’s a large amount. What plan – and the Minister’s talked about a review of the Medical Travel Policy – exists specifically to medical travel to either (a) reduce the costs of our medical travel, or (b) find another revenue source to supplement the medical travel costs that we endure?

**HON. TOM BEAULIEU:** Just off the top of my head, a lot of the prevention work will reduce medical travel. Electronic medical records will reduce medical travel. E-health also will reduce medical travel. The TSN, I think we have a different name for that now, Territorial Support Network, where there’s a doctor on call who is able to assist people in remote communities through the telehealth system. Those items are intended to reduce the cost of medical travel. Otherwise we’re back to, without THSSI funding, the increase in the Canada Health Transfer will probably end up filling the gaps in 2014-2015.

**MS. BISARO:** Thanks to the Minister. The Minister mentioned a number of things that the department is hopeful will create a reduction in the cost of our medical travel. Could I get an indication from the department as to how much money we are, how much federal money is going into medical travel at this point and can I get an indication of what kind of cost savings the Minister is talking about when he mentions the programs that he mentioned.

**HON. TOM BEAULIEU:** The federal portion of medical travel is $3.2 million. There are many factors that are involved in reducing medical travel costs. Inflation is an issue. Any contracts within the medical travel system could also be an issue, depending on how much we’re able to sign contracts for, such as medevac, ground services and so on. These are things that are very difficult to predict. Also, the usage of some of the systems that are made available, how effective they are at using the system. The electronic system is designed to reduce this and, actually, mainly designed to provide a better service to the people. It’s difficult to really say. We do things this way because we can see that it should save, but costs seem to go up. Maybe we can contain the costs. That would be something that may be the best we could hope for. The thought is this would save some travel money.

**MS. BISARO:** I appreciate the Minister’s point that things change and we can’t predict everything. I realize that contract amounts change, inflation has an impact, but I’m troubled by the way this is presented in that we think we’re going to save money because it looks like we should. I would hope that the Minister, I’m going to ask the Minister, does the department not have a better method of deciding what changes we’re going to make? It sounds to me like, well, this looks like a pretty good idea so let’s just try this one. Surely the Minister should be able to, and the department should be able to, estimate, give or take a certain amount of money, the savings that will be generated by any one of the things that he mentioned relative to medical travel. That’s what I’m looking for, is a general estimate of cost savings relative to this $3.2 million which we’re now using of federal money.

The other point I want to make is, I didn’t hear anything in the Minister’s response to indicate that there’s going to be an evaluation of the changes that we have put in place, or that we are going to be putting in place, to determine whether or not these changes are helping us to reduce costs in medical travel. To those two things: an estimate of savings, is that at all possible from the department, and is the department doing an evaluation of the changes they’ve put in place to determine if they’re good or bad?

**HON. TOM BEAULIEU:** We will definitely be evaluating the systems that we employ. We think that an essential part of introducing new systems. We don’t have estimates but we are trying to move forward on these things. Some of our activities we’re trying to move forward on. We’re told to stop evaluating and move forward. If we don’t evaluate and move forward, we’re told we’re not evaluating. So here are some of the decisions that we’re making. We’re moving forward on this because we think that the system, without a thorough analysis on whether or not this system is going to save money and exactly how much money it’s going to save, we’re moving forward because common sense tells us this type of thing, keeping people close to home and not having to fly people to Yellowknife for a doctor to examine the individual for something that could be very minor, it may be painful but it could be minor, so this electronic… An example is even transferring digital images to the Stanton Hospital has seen a flattening or containment of some of the costs in medical travel. We suspect that this is something that is going to save money in the future. We’ll see as we move forward.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Beaulieu. Next on my list is Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. I want to ask the Minister somewhat in line with Ms. Bisaro’s question and earlier with Mr. Dolynny’s question. It has to do with medical travel and, specifically, I want to ask the Minister with regard to medevacs in our region.

I know there was some discussion about that with our regional people and the timing. I know the money is a real big issue. We’re always balancing the service of a saving a life versus what it costs for the medevac contracts. I know I’ve been speaking with the airline operator in Sahtu and looking at how we can best save a person’s life and looking at the medevac services with the Department of Health and Social Services, if they are looking at, soon, decentralization of the medevac services. It was done at one time, a report was done, it came back with the best service by the central, one location. I’m looking at the medevacs to see if that would be decentralized to the Inuvik, Sahtu, here and in the South Slave area, if that would make sense.

I don’t think it would take very much to get the operators of the airline companies to sit down and see how they could help each other out with a backup plan to their backup plan on aircrafts. We know that this issue is dear to our hearts and stuff, too, and I think something could be coming good out of this type of discussion. It’s something I want to ask the Minister if he’s willing to look at decentralizing the medevac services into our regions in the Northwest Territories.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Beaulieu.

**HON. TOM BEAULIEU:** We are going to be putting an RFP out for medevac services. This spring we are starting the evaluation of the service that we currently have. The detailed information we get from the current medevac services is going to give us the information that we need to draft an RFP that’s going to be able to provide the best service to the patients possible. The RFP would not indicate that we need a decentralized model, that you have to have a plane in Norman Wells or you have to have a plane in Inuvik. It’s not going to request that kind of detail. It’s going to request that the best service possible be provided within the call for RFP. The companies would then determine whether or not putting a plane in a place like Norman Wells or Inuvik or someplace outside of Yellowknife, assuming they have more than one plane, that if they would put a plane there they would be able to provide the safest, best medical service to patients in the NWT, period. So it would be based on that that we would evaluate the RFP.

There are companies that do believe that something closer to the centre of the Northwest Territories needs to be a plan on the ground. That way you can get into more communities that are further away from Yellowknife a lot quicker. When we look at the RFP we will be thinking that it’s going to provide the best service possible for the patients.

**MR. YAKELEYA:** Madam Chair, the Minister has highlighted a critical point for us in the Sahtu. As the Minister of ITI and I have noted, the activity in the Tulita and Norman Wells area is very busy with oil and gas activity, and more and more people are coming into our area. With the lifting of the unrestricted liquor sales, it just adds to the issue of services in health care.

Medevac is one that is dearly held to our hearts because that’s our lifeline outside to services in Yellowknife or in Edmonton. We don’t have the luxury of an all-weather road yet. Hopefully that will be some time down the future. That’s something that the Minister has spoken on, the reality. With the RFP coming out based on doing that evaluation of what is the best way to provide the best services for our patients, that’s key for me.

One of the things in the background is the dollar signs, the money. You gave us the numbers of what it costs to fly in to our communities and what it costs to fly out of our communities. I want to ask the Minister what times are we looking at when the evaluation will be done and then when the RFP would come out, roughly.

There are people within the airline companies that want to work together. They don’t have to compete; they can work together. I know that’s true. I heard them this morning say that we don’t have to compete against anyone. We can work together on this. That’s what we’re looking at because we just don’t want one company to have everything and the rest of the companies are saying, well, what about us. These airline companies want to work together, and I think we can do it. I think that’s what I’m looking for.

In the Sahtu we have some good companies, and in Inuvik and in Yellowknife here or in the Deh Cho. We have good companies that could help each other out here. That’s all I’m asking for, is to give us a fair chance and let’s work together in the North because there are not very much of us to get this work, and we’re all Northerners. We all live here, and pilots are one of the most respected professions in life because they fly in all types of weather.

The key here – I liked what the Minister said – is the best service for our patients. That’s key for us in the Sahtu where there is no other transportation. Other than our short period of winter roads and boats in the summer, we fly.

**HON. TOM BEAULIEU:** The evaluation process is very critical in the RFP. The evaluation is going to give us a very clear indication of where the medevacs are coming from. If the Member from the Sahtu is accurate in his thinking, then, yes, many of the issues resulting from perhaps unrestricted alcohol sales and many people, just many people, period, in the area as a result of resource development, then it is possible that many of the medevacs will originate out of the Sahtu communities. That would be in the evaluation.

When we put out the RFP, I think there’s an indication in the RFP as some background information, as the response is being made that this is background information that can be given to companies, that companies want to know where the majority of the medevacs are coming from, whether they’re coming out of Yellowknife because half the population is here, or the majority of them are coming from outside of Yellowknife.

The other point is it is not a tender, so it’s not based on cost. The cost implications in the RFP are weighted. There’s a weight to the cost, but it’s not the determining factor. It’s weighed just like anything else, and we’re trying to structure our RFP to try to provide the best, safest service to the patients.

**CHAIRPERSON (Ms. Bisaro):** Thank you, Mr. Beaulieu. Mr. Yakeleya, your time is up. I’ll put you back on the list, if you wish. Next on my list is Mr. Dolynny.

**MR. DOLYNNY:** Thank you, Madam Chair. Again, welcome to the Minister and the health team here.

I’ve got two broad topics within the area of the directorate here. I’ll start with the first one here. Just to set the lay of the land to the question, we’ve got three health boards that have been dissolved over the years that are run by public administrators. That’s Stanton, Hay River and Inuvik. What’s interesting is that through our budget dialogues, the back and forth that I have seen in the last 16 months, there have been many areas where we talked about barriers to accountability when it comes to the delivery of service to our health authorities. There have been issues in information sharing. There have been issues in risk management, efficiency, the consistency of the delivery of clinical practices, the consistency of delivery of patient care or the seamless patient care. We’ve even seen competition for professional staff within the NWT within all of these health authorities.

On top of that, it was clear and evident through the Auditor General’s report of 2011, which clearly indicated that we had contribution agreements to all these health authorities, we had very few performance agreements to the same tune, which caused a lot of issues for the Auditor General of Canada, and I think it caused a lot of concerns for the Standing Committee on Social Programs.

Given what I’ve just indicated, can the Minister indicate what the future long-term goal, the structure, the governance structure for the NWT health system is?

**CHAIRPERSON (Ms. Bisaro):** Thank you, Mr. Dolynny. Minister Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Madam Chair. The future long-term goal of the health structure, if we’re talking about structure as in personnel, physician services, other health services in the territory, we are hoping that we have a system that is where we have physicians that are available equally to all residents of the Northwest Territories. That’s ultimately our objective.

Now, we’re probably going to have a lot of difficulty providing medical services, as in physician services, on a full-time basis to all communities. That’s going to be something that we’re probably never going to achieve, and that is because of the lower populations in some of the communities. But we will use the Integrated Service Delivery Model to determine what type of service has to be on the ground in which community.

In order for us to do that, we need to look at the governance, and the governance of how we utilize the physicians in the Northwest Territories. The objective, again, is to try to provide physicians as close to the people as possible. That, at the end of the day, is going to save on things like medical travel.

Right now, our work has netted us some results, and we know that there are five new doctors in Inuvik, two new doctors in Fort Smith, and we’re continuing to work with the NWT Medical Association to do something about providing doctors into Hay River. In Hay River, it is an opportune time now, with a new health centre being built there. We are working with the new president of the NWT Medical Association to talk about putting, perhaps, some residents into Hay River that would be Hay River doctors. Whether they lived in Hay River or Yellowknife, that would be determined.

Essentially, at the end of the day, we hope to have a pool of territorial doctors, whether they be in Fort Smith, Norman Wells, Inuvik, Hay River or Yellowknife. An example is of the two doctors in Fort Smith, one of them comes to the Stanton Hospital and works here on a regular basis as well. We are not necessarily always saying that we’re going to put all the doctors here and they’re going to work everywhere else. It could be a variety of ways that we would look at providing physician services to communities. That being one of the key changes that I see in the future for the Territories, that we’re going to be able to provide physician services regionally that will go out to the communities on a scheduled basis, based on the Integrated Service Delivery Model. Thank you.

**MR. DOLYNNY:** Madam Chair, I appreciate the Minister sharing views regarding the physician services and a bit of a glimpse of a renewed Integrated Service Model. However, I believe my question was a bit more at a higher level of governance. If I can use the term loosely, board reform or the new landscape of how the delivery of our health care will look in the future, given the fact that we’ve had, as I indicated earlier, a lot of barriers to accountability. These were clearly notified by the Auditor General of Canada, to which I believe does deserve the right lens and the appropriate intervention to make sure that we are as efficient as possible, as the Minister said, with physician services.

I am going to leave that question because I’m assuming we’re going to probably get a very similar response if I ask the question again. So I’ll leave that for another rainy day.

My second component regarding the directorate in terms of governance, is the annual reporting. My question has to do with the timeliness of the reports. We’ve seen, in the past, reporting from the Department of Health and Social Services has been very sparse at times. We have even seen the fact that a lot of the health authorities have been noncompliant. Just for the record, the Financial Administration Act clearly indicates that health authorities are bound by the act to report on an annual basis to show what their performance is to the people of the Northwest Territories.

Can the Minister give the committee here some indication? Because they are part of the directorate, this falls under the responsibility of strategic direction of this area that we are in. Can we get some indication, has this been a focus with the Minister, and can we see improvements in this area this year and for the remainder of the 17th Assembly? Thank you.

**HON. TOM BEAULIEU:** Madam Chair, this response needs to have a lot of detail in it because of things that we’re doing. So I’m going to ask the deputy minister to provide a detailed response on this whole question, and perhaps the director of finance may also add to the response. I’ll ask the deputy minister to start off the response.

**CHAIRPERSON (Ms. Bisaro):** Thanks, Mr. Beaulieu. Ms. DeLancey.

**MS. DELANCEY:** Thank you, Madam Chair. For the most part, we believe that the health and social services authorities have met their legislative requirements for reporting. We have a number of legislative reporting requirements for the system. The department is required to table an annual report, under the Medical Care Act, which has been done most years except there were two years missed in the last 10 years, 2008-09 and 2010-11. The department has a strategic plan which commits to annual reporting and we did table a report last fall in the Legislative Assembly which provides a progress report on the status of every measure in the strategic plan.

Health and social services authorities are required to report to the Minister on an annual basis, which they do. As well, they have a number of financial reporting requirements to the department, including quarterly variance reports. Our contribution agreements with the health and social services authorities do include a fair amount of financial detail, in order to start complying with the recommendations from the Auditor General that we move towards broader performance agreements. For this year’s contribution agreements in 2012-13, we have requested authorities to provide a significant amount of additional details specifically on issues like number of ER visits, numbers of no-shows and numbers of medical travel events, which have not previously been reported. Again, in response to the Auditor General recommendations, we have, through a request for proposals process, retained consultants who are working right now on developing a set of system-wide performance indicators that every authority will be required to report on. We expect to have that work done by this August. Thank you, Madam Chair.

**CHAIRPERSON (Ms. Bisaro):** Thank you, Ms. DeLancey. Mr. Dolynny.

**MR. DOLYNNY:** Thank you, Madam Chair. I appreciate the response. It sounds like we are working towards that end goal. For the record, are we able to say with a degree of confidence that all of the performance agreements with the health authorities will be in place 100 percent within this fiscal year? Thank you.

**MS. DELANCEY:** The answer is no. We do not think that we can finalize the move towards complete broad-based performance agreements until we have finished the updating of the Integrated Service Delivery Model, which will then allow us to move to update our funding model.

Right now our funding model for authorities is based on historical precedent rather than some kind of a formula allocation basis. As we finish the updated Integrated Service Delivery Model, as we get the system-wide indicators recommendations from our consultants, which, as I said, won’t be until the middle of next fiscal year, we will draw that together and move towards full-fledged performance agreements.

As I said, for this fiscal year we’ve tried to expand the reporting requirements on the authorities. In the 2013-14 contribution agreements, we will cast a broader net and require some additional reporting, but we won’t have made the shift to full performance agreements until the 2014-15 fiscal year. Thank you.

**CHAIRPERSON (Ms. Bisaro):** Thanks, Ms. DeLancey. Noting the clock, Members, I will call a halt for today and I will rise and report progress. Sergeant-at-Arms, will you please escort the witnesses from the Chamber. Thank you, witnesses, for your attendance.

**MR. SPEAKER:** It’s good to see everybody happy.

**AN. HON MEMBER:** It’s good to see you.

**MR. SPEAKER:** I’m happy to see you, too.

---Laughter

# Report of Committee of the Whole

**MR. SPEAKER:**  Can I have the report of Committee of the Whole, please, Ms. Bisaro.

**MS. BISARO:** Thank you, Mr. Speaker. Mr. Speaker, your committee has been considering Tabled Document 9-17(4), NWT Main Estimates, 2013-2014, and would like to report progress. Mr. Speaker, I move that the report of Committee of the Whole be concurred with. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Ms. Bisaro. A motion is on the floor. Do we have a seconder? The seconder is Mr. Bromley.

---Carried

**MR. SPEAKER:** Item 22, third reading of bills. Mr. Clerk, orders of the day.

# Orders of the Day

**CLERK OF THE HOUSE (Mr. Mercer):** Orders of the day for Monday, February 25, 2013, 1:30 p.m.:

1. Prayer
2. Ministers’ Statements
3. Members’ Statements
4. Returns to Oral Questions
5. Recognition of Visitors in the Gallery
6. Acknowledgements
7. Oral Questions
8. Written Questions
9. Returns to Written Questions
10. Replies to Opening Address
11. Petitions
12. Report of Standing and Special Committees
13. Reports of Committees on the Review of Bills
14. Tabling of Documents
15. Notices of Motion
16. Notices of Motion for First Reading of Bills
17. Motions

* Motion 4-17(4), Federal Support for Sahtu Jobs and Economic Growth

1. First Reading of Bills

* Bill 2, An Act to Amend the Territorial Parks Act

1. Second Reading of Bills
2. Consideration in Committee of the Whole of Bills and Other Matters

* Tabled Document 9-17(4), NWT Main Estimates, 2013-2014
* Bill 1, Tlicho Statutes Amendment Act

1. Report of Committee of the Whole
2. Third Reading of Bills
3. Orders of the Day

**MR. SPEAKER:** Thank you, Mr. Clerk. Accordingly, this House stands adjourned until Monday, February 25th, at 1:30 p.m.

---ADJOURNMENT

The House adjourned at 2:03 p.m.