Legislative Assembly of the Northwest Territories

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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 10:00 a.m.

---Prayer

SPEAKER (Hon. Jackie Jacobson): Good morning, colleagues.

SPEAKER’S RULING
Colleagues, I will now give my ruling on the point of order raised by Mr. Hawkins on February 17, 2014, respecting comments made by Premier McLeod on February 13, 2014, in speaking to an earlier point of order.

Premier McLeod stated, on page 4 of the unedited Hansard for February 13th in reference to Mr. Hawkins, “…the Member has acknowledged the breach and he’s now trying to use process to not withdraw his remarks.”

In speaking to his point of order, Mr. Hawkins, at page 1 of the unedited Hansard for February 17th, stated that he was “personally offended by the Premier’s comments were an attempt to put words into my mouth which I did not say.” He also stated his concern that the Premier violated Rule 23(i) by imputing false or hidden motives to him with respect to his use of procedural arguments in response to the point of order.

Colleagues, I am not going to make a determination of whether the Premier mischaracterized Mr. Hawkins’ comments on February 13th. Every day in this House I hear Members on both sides paraphrasing and interpreting each other’s remarks during the course of debate. I am sure that the accuracy of those interpretations could often be called into question. If there was any doubt about Mr. Hawkins’ intended meaning after the February 13th exchange, Mr. Hawkins has since clarified his comments on the record in raising his point of order.

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Mr. Hawkins did make some procedural arguments in speaking to the point of order, as is his right. I do not find that the Premier violated Rule 23(i) by sharing his observations on comments made by Mr. Hawkins. I do not find that the Premier was imputing false or hidden motives to Mr. Hawkins.

There is no point of order.

I would, however, take this opportunity to make Members on both sides of the House aware that in considering points of order, I find it most helpful when your comments clearly outline your own views rather than critiquing those of others. I would ask you to keep that in mind as we conduct our affairs in this Chamber in a respectful fashion, on behalf of our constituents.

SPEAKER’S RULING
Colleagues, I will now also provide my ruling on the point of order raised by Mr. Miltenberger on Thursday, February 13, 2014, regarding comments made by Mr. Hawkins the previous day.

The question of whether a point of order has been raised at the earliest opportunity is decided on a case-by-case basis. In this instance, I find that it was reasonable for Minister Miltenberger to wait to consult the unedited Hansard prior to making his point of order, and that the point of order was, therefore, raised at the earliest opportunity. There are many precedents for this finding.

Minister Miltenberger’s point of order, at page 2 of the unedited Hansard for February 13th, is that in his comments on February 12th Mr. Hawkins “clearly accused deputy ministers of deliberate criminal behaviour.”

Freedom of speech in debates and proceedings is one of the cornerstones of parliamentary privilege. It is there to ensure that Members have the liberty to speak in this Chamber without, for example, the threat of being subject to legal proceedings under defamation laws. However, with that privilege comes a responsibility to govern ourselves in a way that befits the dignity of this House and respects the rights of others who do not have a direct voice in our proceedings.

This view is consistent with the rulings of Speaker Gargan and Speaker Delorey quoted by Mr. Miltenberger in speaking to his point of order. As stated in O’Brien and Bosc’s House of Commons Procedure and Practice at page 617: “Members have a responsibility to protect the innocent, not only from outright slander, but from any slur directly or indirectly implied.”

In speaking to the point of order, Mr. Hawkins quoted Beauchesne’s Parliamentary Rules and Forms at paragraph 75. I would draw your attention,
Mr. Hawkins, do you understand the consequences by not withdrawing your remarks as instructed? I will ask you again; do you wish to withdraw your remarks? Yes or no.

**MR. HAWKINS:** Mr. Speaker, I feel that this is a distraction and, as such, I cannot withdraw my remarks to my earlier comments because I felt they were made with honest intention.

**MR. SPEAKER:** In that case, Mr. Hawkins, in accordance to Rule 25(4), I must suspend you from this Assembly for the remainder of the sitting day and I ask you to leave the House.

Item 2, Ministers’ statements. The honourable Premier, Mr. McLeod.

**MINISTERS’ STATEMENTS**

**MINISTER’S STATEMENT 33-17(5): MILESTONES ACHIEVED AT ABORIGINAL RIGHTS NEGOTIATIONS**

**HON. BOB MCLEOD:** Mr. Speaker, concluding land, resources and self-government agreements is an essential element of the political evolution of the Northwest Territories and the foundation for our future economic and political stability.

The Government of the Northwest Territories is an active party to these negotiations as we support the settlement of all outstanding Aboriginal rights in the Northwest Territories. We know, from experience, that those who have settled agreements have the necessary tools to fully participate in the Northwest Territories and Canadian economies, to strengthen their communities and to create new business, investment and job opportunities. Strong relationships with Aboriginal governments are a priority for the 17th Assembly and a key part of building a strong, sustainable future for our territory.

Thirty years ago this June, the Inuvialuit Final Agreement became the first comprehensive land claim agreement settled in the Northwest Territories. This milestone was followed by the Gwich’in Comprehensive Land Claim Agreement, the Sahtu Dene and Metis Comprehensive Land Claim Agreement, the Tlicho Agreement and the

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Thirty years ago this June, the Inuvialuit Final Agreement became the first comprehensive land claim agreement settled in the Northwest Territories. This milestone was followed by the Gwich’in Comprehensive Land Claim Agreement, the Sahtu Dene and Metis Comprehensive Land Claim Agreement, the Tlicho Agreement and the Salt River First Nation Treaty Settlement Agreement. Collectively, these agreements have resulted in almost 200,000 square kilometres of land under direct Aboriginal ownership and financial settlements from Canada in excess of $650 million.

Today Aboriginal rights negotiations, including self-government, are underway in all regions of the Northwest Territories as we continue along the journey of shaping the framework for land and resource management and the future governance structure of communities and regions for decades to come. With several sets of negotiations nearing critical milestones, we are seeing firsthand how
partners working together can achieve significant results.

This includes the conclusion of a draft Deline Final Self-Government Agreement that was initiated by the parties this past December. The final agreement contains a wide range of powers that will give the Sahtu Dene and Metis of Deline more control over the decisions that affect their day-to-day lives, including how programs and services will be delivered. The Deline ratification vote is planned for March 10 to 12, 2014, in Deline and Yellowknife. When ratified, the Deline Self-Government Agreement would become the first self-government agreement to be negotiated in the Northwest Territories on a community basis.

Last week I had the pleasure of adding my signature to the Acho Dene Koe First Nation Agreement-in-Principle on a land and resources agreement on behalf of the Government of the Northwest Territories. When signed by all parties, negotiations will continue toward a final agreement that, once complete, will become the first community-based land and resources agreement in the Northwest Territories.

Our negotiators have also recently concluded a draft agreement-in-principle on self-government with the Inuvialuit and are close to finalizing an agreement-in-principle on land and resources with the Northwest Territory Metis Nation. Consultations with potentially affected Aboriginal governments are being conducted on both draft agreements. Once consultations are complete and the agreements are finalized by the parties, final agreement negotiations will begin.

Mr. Speaker, in addition to these significant milestones, I am pleased to report that we are continuing to see progress at all other Aboriginal rights negotiations throughout our territory.

I believe that partnership and mutual respect is the key to success. This is how we do things in the North and this is how we will continue to do things. This territory is built on partnerships and collaboration, and the Government of the Northwest Territories will continue to work effectively with its federal and Aboriginal partners to finalize and implement land, resources and self-government agreements in all regions of the Northwest Territories. Thank you, Mr. Speaker.

MR. SPEAKER: Thank you, Mr. McLeod. The honourable Minister of Education, Culture and Employment, Mr. Lafferty.

MINISTER’S STATEMENT 34-17(5):
A NEW APPROACH – PRESERVING AND REVITALIZING ABORIGINAL LANGUAGES AND CULTURE

HON. JACKSON LAFFERTY: Mr. Speaker, the Department of Education, Culture and Employment is working with our Aboriginal government partners on a new approach to strengthen Aboriginal languages.

As you know, this government has sponsored two Aboriginal languages symposia. We meet regularly with Aboriginal leaders and their delegates. We have excellent ongoing relationships with language coordinators and elders. We have heard from all of them that Aboriginal governments and their language communities are best placed to deliver programs aimed at revitalizing their languages.

Mr. Speaker, in recognition of this, I am pleased to announce that beginning in April, this government will be providing a total of almost $3.5 million dollars to regional Aboriginal governments, based on their individual five-year language plans and budgets they have submitted to us. This will enable each of them to fund their regional plans they have drafted for their language communities. Further, Mr. Speaker, this will be three-year block funding, something Aboriginal governments have been requesting for some time.

As well, being mindful of the public purse and without jeopardizing full accountability requirements, we are cutting the red tape around reporting. We will ask for reporting annually, not quarterly, and a staff member will work personally with Aboriginal governments to assist with their reporting as required.

Mr. Speaker, the work Aboriginal governments are planning to carry out over the next five years is impressive. It includes a range of well-thought-out, practical activities to strengthen Aboriginal languages and create more language speakers over the coming years. Plans include both traditional learning and the adoption of new technology; they include emphasis on the overlapping nature of culture and language; and, Mr. Speaker, they provide job opportunities for local people through the hiring of regional language coordinators.

Mr. Speaker, Aboriginal governments have indicated they are very pleased with this approach and welcome this new partnership with the GNWT. We believe it is only by working closely and cooperatively with our Aboriginal government partners that our territory will blossom and grow. I look forward to reporting on the success of this approach in the future.

As March is nearly upon us, I wish everyone a happy Aboriginal Languages Month. Please take this special chance to use, learn or share your language. Mahsi, Mr. Speaker.

MR. SPEAKER: Thank you, Mr. Lafferty. Item 3, Members’ statements. The honourable Member for Deh Cho, Mr. Nadli.
Members’ Statements

MEMBER’S STATEMENT ON
FEBRUARY HEART HEALTH MONTH

MR. NADLI: Mahsi, Mr. Speaker. I’d like to remind everyone again this year that February is Heart Month, an opportunity for all Canadians to learn about the risk of heart disease and stroke and for the Canadian Heart and Stroke Foundation to raise funds for life-giving research.

Heart disease describes many heart conditions. Coronary artery disease is the most common of these and occurs when blood vessels in your heart become blocked, preventing oxygen-rich blood from reaching your heart. It can cause chest pains or even a heart attack.

A stroke occurs when blood flow to the brain is interrupted. This can cause weakness, loss of speech and paralysis which can be permanent. Heart disease and stroke are the leading cause of hospitalization and two of the three leading causes of death in Canada.

The good news is, with the right lifestyle changes, up to 80 percent of premature heart disease and stroke is preventable. Since nine out of 10 Canadians have at least one risk factor for these serious illnesses, this means that almost all of us have a good reason to make a positive change in our lives.

Things that each of us can do include eating a healthy diet, follow the recommendations from Canada’s Food Guide, be physically active. Thirty minutes most days of the week is all it takes. Quit smoking, not only will you feel better, you’ll save money. Manage stress, identify what causes your stress. Talk to friends and family and take time for yourself. Limit alcohol consumption. Better yet, cut out alcohol altogether and lead a traditional lifestyle. The lifestyle of a Dene elder is a very healthy one and we can learn a lot from people who live that way. Stay active by hunting, cutting wood and being out on the land and eating more traditional foods and less pre-packaged junk food.

There are some health issues that we cannot control. When it comes to heart disease and stroke, however, we can make small changes that will keep us healthier and living longer.

I wish all my constituents and people across the NWT success with whatever changes they make to reduce the risk of heart disease and stroke and a healthy Heart Month. Thank you, Mr. Speaker.

MR. SPEAKER: Thank you, Mr. Nadli. Member for Frame Lake, Ms. Bisaro.

MEMBER’S STATEMENT ON
CONCERNS WITH BUDGET PROCESS

MS. BISARO: Thank you, Mr. Speaker. The deeper I delve into the 2014-15 budget, the more confused I become. Regular Members have been given huge amounts of information in the last two weeks and instead of clarity, it has only served to confuse. It didn’t have to be this way. The Finance Minister and Cabinet could have chosen to be fulsome, clear and concise in their meetings with Regular Members, but they have been anything but.

We’ve had briefings on the government’s fiscal strategy, on the budget before us, on the status of employee positions and each briefing obfuscates the financial picture a little further. Some of the numbers we have been given refer to the 2014-15 budget that we are now reviewing, some to the next budget, 2015-16. Sometimes we hear revenues are up. Sometimes we hear revenues are down. The Finance Minister, whether by accident or by design, has made communication from himself to Regular Members incomplete and vague. Again, it doesn’t have to be this way.

The Minister of Finance is a seasoned veteran of this legislative arena. He knows full well what information Regular Members want to hear, what we want to consider to fully understand the government financial position or situation. He knows full well how to present that information so it’s easily understood, yet he seems to choose to force us to draw it out of him one small piece at a time. The latest example was yesterday when Minister Miltenberger took my question as notice, effectively putting a lid on information that Members and the public should hear.

Mrs. Groenewegen spoke yesterday about what she considers to be our inefficient process. Any blame for that has to be laid at the feet of both Cabinet and Regular Members if it’s laid anywhere. A comprehensive and frank information sharing process would go a long way to creating efficiency. A little cooperation goes a long way.

I’m so frustrated with this latest budget information process that I am almost ready to give up my attempt at bringing some accountability to the budget review and to give in to Cabinet’s budget without a fight. If that’s the goal of the Finance Minister, then that goal has been achieved. The battle has been won, but the war is far from over. Thank you.

MR. SPEAKER: Thank you, Ms. Bisaro. Member for Range Lake, Mr. Dolynny.
MEMBER’S STATEMENT ON
2014 PARALYMPIAN ATHLETE
MICHHELLE SALT

MR. DOLYNNY: Thank you, Mr. Speaker. Last week I had the pleasure of accompanying and introducing a very special guest to the students of William MacDonald School, Mildred Hall School, Range Lake School, Sir John Franklin High School and St. Patrick High School. We also had the opportunity to present there on the business community at a luncheon held at the Explorer Hotel. It is important that I thank the sponsors of all that – Advanced Medical Solutions, Unico Contracting, Northern Safety Association and First Air – for making this all possible.

This special guest was a good old girl from Alberta, born and raised. She is a fitness model, a motivational speaker, a real estate agent and an accomplished athlete. She was here to tell her story and to share her journey, a journey that started in 2011 when our guest lost her right leg in a near death motorcycle accident. She shared her story of tragedy; a story of horror, but from all this she was able to share a story of opportunity and inspiration. Our guest was none other than the recently announced only female snowboard cross athlete to represent Canada at the upcoming 2014 Paralympic Games at Sochi, Russia, and her name is Michelle Salt.

Michelle was able to provide a heartfelt display of courage and determination while speaking in our city as she inspired all of us with a message of never giving up on your dream no matter what.

It’s rare to find those individuals who defy the odds and who master great things, so it was truly an honour to be part of this community event. I know Michelle truly enjoyed her brief tour in our capital city and, like Brendan, Jesse and Michael who are finishing up in Sochi, we now have the opportunity to cheer on and follow with support this incredible athletic ambassador from Canada in the upcoming Paralympic Games. I would ask you to please join me in congratulating Michelle Salt on her miraculous journey to the 2014 Paralympic Games in Sochi, Russia. Thank you.

MR. SPEAKER: Thank you, Mr. Dolynny. The honourable Member for Inuvik Boot Lake, Mr. Moses.

MEMBER’S STATEMENT ON
NWT SMOKING STATISTICS

MR. MOSES: Thank you, Mr. Speaker. The Minister of Health and Social Services tabled a document a few days ago entitled, “Health and Social Services Service System Annual Report, 2012-2013.” The title was “Measuring Success and Focusing on Results.” I believe in that. I encourage that and I promote that. I appreciate the information. There are a lot of good stats and results that were in there; however, if I can refer people that might look at the report to priority two, the prevalence of smoking in 15-year-olds and older.

In 2002 our smoking rates in the NWT were 46 percent, which is about half the population of the Northwest Territories. You can only imagine what the costs were for care and treatment and hospital visits and the health care costs associated with that. The report outlines that in 2012-13 those results are 34 percent. A great success, and I applaud the government and I applaud all the NGOs and workers who took this on as an initiative. However, even with the great success, it is still double the national average, which is 16 percent, and there is still some work to do.

Another thing that I wanted to report that was an even greater success was that the percentage of daily smokers who reported being counselled to quit smoking by their primary care provider, by doctors, 54 percent, and by nurses, 39 percent. I just want to congratulate our health professionals for taking that extra step to help people try to quit smoking. That’s a great success in itself.

What this report doesn’t show is the stats of the prevalence of those that are under the age of 15. However, I have great confidence with programs such as My Voice, My Choice, the Not Us! campaign, the tobacco curriculum that’s in the schools, Smoke Screening. They used to have a Blast conference, but the big one is the Don’t Be A Butthead campaign. I want to recognize all those, and I know those rates, if they haven’t risen, continue to decrease.

With the last little bit of time that I have left in my Member’s statement, I would like to encourage those who are trying to quit to continue, and if you can’t quit, try to cut down. I congratulate all those who have shown such great results in this report that have made that decision to quit. Great job.

Throughout the years there have been a lot of great advocates doing this job, and too many to thank at this time. But if there was one person I’d like to thank, it is Miriam Wideman, who was probably one of the strongest advocates and one of the greatest mentors I had the opportunity to work with.

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

MEMBER’S STATEMENT ON
MOOSE KERR SCHOOL

MR. BLAKE: Thank you, Mr. Speaker. Shortly after the fall session I was asked by a constituent to bring forward questions to the Minister and this government about Moose Kerr School. Moose Kerr School is now 45 years old this year. Moose Kerr School was built around the same time as Samuel
Mr. Speaker and all members, the Minister later today. I will have questions for the health of our students, and I believe a 45-year-old school has had its purpose and it's time to replace that piece of infrastructure. I will have questions for the Minister later today.

Mr. Blake. The Member for Nahendeh, Mr. Menicoche.

Member for Sahtu, Mr. Yakeleya.

The article reads:

"My boyfriend and I were living at the Ptarmigan Apartments with our son. He's now two and a half. Rent was $1,675 a month and we started getting behind. Only one of us was working because we couldn't afford daycare at $800 per month plus rent.

I heard about the Transitional Housing Program and called. They gave us the opportunity of living in an emergency unit for three months so we could catch up on bills. That did the trick, and then we moved into a one-bedroom transitional unit. That was lucky because they don't always have openings and you have to go somewhere else.

It's made a big difference being here. It allowed me to have the programs offered here, it's given us time to save up money because we're going"
to move south in a few months. Anything you need, anything you want to talk about, the staff is always there for us.

I learned how to cook, how to be a better parent, how to have more patience, how to take responsibility for money. I make a pretty mean meatloaf.

The staff work with you, how to budget, how to save money, show you crafts, cooking and computers. They'll help with resumes and looking for jobs.

We're starting over in Red Deer at the end of May. My boyfriend has some family there. We're going to find jobs and stay with a friend there for a couple of days.

I am way less stressed now. I used to be pretty stressed out all the time about money and bills, making sure everything was paid and making sure there was food on the table. It's hard if you are a young family."

Mr. Speaker, I brought this up to illustrate two points. I want to recognize the work of the YWCA and other non-government organizations that are working so hard to help families like this one. They are doing excellent work, often with shoestring budgets, low salaries and no forced-growth funding. Secondly, this story is a perfect example of what I was talking about yesterday and the day before as we were reviewing the Housing Corporation. Working people cannot make a decent living here and they are leaving. How would this story have been different if we had affordable daycare, or transitional housing actually transitioned into affordable housing?

I will have questions later today for the Minister. Mahsi.

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

MEMBER'S STATEMENT ON RECOGNITION OF CHAMBERS OF COMMERCE

MRS. GROENEWEGEN: Thank you, Mr. Speaker. I'd like to speak on a slightly lighter note today and send a shout out to those business owners in the Northwest Territories who involve themselves in their local chambers of commerce.

As we speak today, the NWT chamber executive is down in Hay River meeting with the Hay River Chamber of Commerce. Both of these organizations I'm very familiar with, having had the honour of serving as the president of the Hay River chamber for a number of years and president of the NWT chamber for a number of years. However, that does seem like a lifetime ago.

I'd like to congratulate the newly elected board of directors of the Hay River Chamber of Commerce. That organization has a very long and proud tradition in our community, and businesspeople, as everyone knows, are busy people, but I appreciate the fact that they take time out of their schedule to get together to come up with a unified and collective voice on behalf of the interests of the private sector and the business community and, indeed, do often offer input and insight on the private sector to this government as well.

So, later today I will be joining my colleague from Hay River North and thanking our Minister of Industry, Tourism and Investment for coming to join us and speak at our chamber gala event tonight in Hay River. We will be going down there to enjoy the company of some Hay River and some NWT Chamber of Commerce representatives.

I'd like to just again send commendation and a congratulation out to the business members who do work together to make these organizations very successful. Thank you, Mr. Speaker.

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

Recognition of Visitors in the Gallery

MR. SPEAKER: Before we start today, I'd like to start off first. I'd like to welcome Chief Ernest Betsina, chief of YK Dene First Nation and Ndilo, who is here in the gallery. Welcome today, Mr. Betsina. I'd also like to welcome Cathy Cockney, Ms. Agnes Kuptana, and my aunt, Evelyn Storr. Welcome to the House.

Mr. Lafferty.

HON. JACKSON LAFFERTY: Mahsi, Mr. Speaker. [Translation] I would like to recognize our guests. It is the language group. They've been working on language development for many years. Today they are having a meeting and they're here for a brief visit. I'll tell you their names. From the NWT Metis Nation, Vance Sanderson, Leah Desjarlais; and also for Akaitcho Territory, Chief Ernest Betsina is here to represent the Akaitcho, interpreter Mary Rose Sundberg is also with that group; and Betty Grandjambe from Sahtu; Deline First Nation’s Pauline Roach; and for the Deh Cho region we have Violet Jumbo; IRC is represented by Cathy Cockney and Evelyn Storr; for the Tlicho Government we have Wendy Mantla and Celine Zoe; and Laura Tutcho from ECE. I'd like to welcome all to the Legislative Assembly.

MR. SPEAKER: Thank you, Mr. Lafferty. Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Speaker. I'd also like to recognize a couple of Weledeh constituents, Chief Ernest Betsina and Mary Rose Sundberg. I'd
also like to recognize and thank all of the folks that are working on the language groups. That’s very important work that they’re doing and I very much appreciate that. Mahsi.

**MR. SPEAKER:** Thank you, Mr. Bromley. Mr. Blake.

**MR. BLAKE:** Thank you, Mr. Speaker. I would like to recognize one of my constituents, Evelyn Storr. I would also like to thank her for all the years that she has been the SAO in Aklavik. I wish her all the best in her new role at the Inuvialuit Regional Corporation. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Blake. Mr. Yakeleya.

**MR. YAKELEYA:** I would like to recognize two of our Sahtu Pages from Fort Good Hope, Melina Tobac and Taylor Kaskamin, and all the other Pages doing a wonderful job taking care of us. I would also like to recognize some of the constituents from the Sahtu, Pauline Roche and Betty Grandjambe; and also a resident now of Yellowknife, Laura Tutcho; and also the other language members who are doing our good work, specifically Agnes Kuptana and Samuel Hearne schoolmate Cathy Cockney and also the chief of Ndilo. Thank you.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. I, as well, would like to take an opportunity to recognize some constituents, an opportunity that doesn’t often befall out-of-Yellowknife MLAs, Vance Sanderson, Leah Desjarlais and Ria Coleman. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. I would like to welcome all the visitors here in the gallery today. Thank you for taking the time to come watch our daily proceedings.

Item 6, acknowledgements. Item 7, oral questions. Member for Weledeh, Mr. Bromley.

**Oral Questions**

**QUESTION 158-17(5):**

**TRANSITIONAL HOUSING**

**MR. BROMLEY:** Thank you, Mr. Speaker. I would like to follow up with my statement earlier today with questions to the Minister of the Housing Corporation. We are making some progress on transitional housing here in Yellowknife. We have the Bailey House, transitional housing run by the YWCA, and the Betty House is under construction.

Could the Minister remind us what the Housing Corporation’s understanding of the purpose of these transitional housing units is? Mahsi.

**MR. SPEAKER:** Thank you, Mr. Bromley. Minister of the Northwest Territories Housing Corporation, Mr. McLeod.

**HON. ROBERT MCLEOD:** Thank you, Mr. Speaker. The purpose of these transitional houses is to get people to transition, if they’re homeless or if they need a temporary place, to move into transitional housing, from there either to get into the public housing or market housing or homeownership. Thank you, Mr. Speaker.

**MR. BROMLEY:** Thanks to the Minister. That’s my understanding too. The clients that are accepted into transitional housing are generally not well off financially. They may have even been homeless in the recent past.

Given that situation, where does the Minister think that these people are going to transition to after just a few months? Mahsi.

**HON. ROBERT MCLEOD:** Mr. Speaker, the Member is correct. The people that are in these units, our hope is to see them transition, I think, in most cases, into the public housing. Thank you, Mr. Speaker.

**MR. BROMLEY:** Mr. Speaker, these people are trying to turn their lives around. They have taken the first steps, but then they find themselves at a dead end.

Could the Minister confirm that the Housing Corporation has integrated its programs with the Transitional Housing programs, and that clients in transitional housing will be prioritized for appropriate public housing above the clients who are homeless who could then be put into transitional housing? Mahsi.

**HON. ROBERT MCLEOD:** Mr. Speaker, as far as prioritizing them, we have a point rating system to get into public housing. There are a number of things that are taken into consideration: crowding of their current housing, the housing condition that they are living in now, affordability of their current housing. There are also some other factors that are taken into consideration like the income, the length of time that they’ve been on the waiting list and whether they are a victim of family violence or have a disability or any kind of health condition. There are a number of factors that are taken into consideration like the income, the length of time that they’ve been on the waiting list and whether they are a victim of family violence or have a disability or any kind of health condition. There are a number of factors that are taken into consideration when the local public housing authorities do the point rating system, and obviously being in a transitional home, they would be point rated like everyone else because we have to ensure that all factors are taken into consideration when public housing is being allocated. Thank you, Mr. Speaker.

**MR. BROMLEY:** The result is that those in transitional housing have to choose to be homeless
and put themselves in very risky situations in order to get on the public housing list.

The Housing Corporation has a new program to assist with rental payments, which is great, but I was surprised to learn that clients that pay $1,400 per month to live in the YWCA’s rental units are not eligible. It is hardly surprising that people end up leaving the territory.

Again, why is the Housing Corporation setting up barriers to people who are trying to transition to a better life?

HON. ROBERT MCLEOD: People have to realize that by making themselves homeless, I mean, they’re still given certain points, but I would encourage people not to make themselves homeless thinking that it gives them an opportunity to get to the top of the list because, as I’ve said before, there are many factors that we take into consideration.

I don’t believe that the Housing Corporation puts up barriers. I think, if anything, the Housing Corporation eliminates some of those barriers by having people more eligible for a lot of the programs that we have. With the Rent Supplement Program, it’s a fantastic program and we’re having good uptake on it across the Northwest Territories. It’s for market rental and the folks in some of these transition homes, the homes are already subsidized. We provide some assistance to these homes, so it’s more geared towards the market rental side of it.

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

 QUESTION 159-17(5):
 REGIONAL RECRUITMENT

MR. MENICOCHE: Mr. Speaker, I just want to follow up on my Member’s statement on Aboriginals and Northerners getting employment with our government. More specifically, constituents are contacting me. They’re telling me that a lot of the entry-level positions, they seem to be overqualified as well as they’re being screened out because they’re not being credited for their years of service. I understand, and perhaps the Minister of Human Resources can answer the question, when they have years of service it kind of qualifies for education equivalency. Maybe the Minister can explain that to me.

MR. SPEAKER: Thank you, Mr. Menicoche. The Minister of Human Resources, Mr. Beaulieu.

HON. TOM BEAULIEU: Thank you, Mr. Speaker. The departments across the GNWT use the Hay Plan system to evaluate jobs. Essentially when there is a job that is required and the department has put out a job description, that job is then matched with what type of qualifications would be needed in advance, before the job is ever advertised.

Our goal – and we are actively trying to develop that goal – is to try to match the individuals in the communities to these jobs as much as possible. It is unfortunate that so many people that feel they have qualifications and may be close to what they’re applying for are being screened out. We
would certainly like to hear specifically about those. We know we’ve heard of a couple that we’re working on now to determine exactly what has occurred, but the idea is exactly what the Member is requesting, that we would bring people that have qualifications that are close, not exactly matching, to train them, using regional recruitment to train them to bring them into those positions. Thank you.

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

MR. MENICOCHE: Thank you very much, Mr. Speaker. I guess another issue that’s directly related to this is that we have 570 job vacancies in our government, 21 of them in Fort Simpson alone, but it appears that there are three or four of them advertised. Those impacted employees who are going through the shared services reorganization certainly have first priority at those. The Aboriginals and Northerners in my communities want to apply on jobs but they’re limited. There are 21 positions in Simpson.

What are the Minister and this government doing about getting those jobs out in the public system and getting people to apply on them? Thank you.

HON. TOM BEAULIEU: Mr. Speaker, I’m working with the Department of HR to deal with all of the departments. We are taking a very close look at what’s happening with 575 positions that are to be filled.

As the Member can appreciate, we can’t put 571 jobs out there at some stage of vacancy. Some would be just recently vacant. Well, that was back in October, but when you take a snapshot, some have been recently vacant and not out for advertisement yet. Some are going through advertisement, some are being temporarily filled by a casual, a transfer assignment, or some are in the offer stage and some are waiting for an appeal. So there is a spectrum that we have to look at the 571 positions, but we are working with the departments and we are confident that departments are moving through all of those positions and trying to fill them. Thank you.

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

QUESTION 160-17(5):
MOOSE KERR SCHOOL

MR. BLAKE: Thank you, Mr. Speaker. Earlier today I was asking about Moose Kerr School, so I have questions for the Minister of Education. As I mentioned, the school is 45 years old and built around the time that asbestos was used in many of the buildings.

I’d like to ask the Minister, has the school been tested for asbestos? Thank you, Mr. Speaker.

MR. SPEAKER: Thank you, Mr. Blake. Minister of Education, Culture and Employment, Mr. Lafferty.

HON. JACKSON LAFFERTY: Mahsi, Mr. Speaker. We work closely with PWS when it comes to these assets in the communities such as schools. There is scheduled regular maintenance and upgrades to the educational facilities, so they remain in good standing. We have to be up to code on all schools. So if there is such an asbestos issue, then we would be proactive and work on it with PWS and put in mitigating measures to deal with that.

At this point, it hasn’t been brought to my attention if it is an issue, but those are just some of the areas we are working closely on with PWS. Mahsi.

MR. BLAKE: As I mentioned, the school is 45 years old. So I’d like to ask the Minister, at what point do these schools or any other buildings get replaced? Thank you.

HON. JACKSON LAFFERTY: This particular school was built and constructed in 1969. Again, there was a major, major retrofit in 1999 and since 2008, 2012 we’ve spent well over $2 million upgrading this facility. So we are on top of the renovation.

But at the same time, first on a typical capital planning cycle, Moose Kerr School will be scheduled for replacement or renovation in 2019. That is the overall plan and this is 20 years from the date of the last major renovation. Mahsi.

MR. BLAKE: I see that the Minister has said that this building is due for replacement in 2019. So I’d like to ask the Minister, is the school on the red flag list? Thank you.

HON. JACKSON LAFFERTY: As I mentioned earlier, it is scheduled for replacement or renovation in 2019. This is an area that we need to work on the Member. We’ll continue to work with the DEA pertaining to that.

When the time is close, we’ll definitely work towards that as part of the capital planning process. Mahsi.

MR. SPEAKER: Thank you, Mr. Lafferty. Final, short supplementary, Mr. Blake.

MR. BLAKE: It has been identified over the last couple of years here that we need to do things differently. One thing we’re lacking in our small communities is quality education like automotives and carpentry and welding, those kinds of facilities in our schools. I’d like to ask the Minister, will he ensure that that building is replaced and have those facilities at hand? Thank you.

HON. JACKSON LAFFERTY: Those are discussions that we will be having through the education renewal innovation. As you know, one of the pillars is to focus on small communities. The discussions we’re going to be having today until we develop the action plan with the work of the DEAs...
and the Aboriginal leadership, this is an area that will be targeted, the small community schools. By this summer we should have a clear idea of which communities we’ll be working closely with pertaining to these schools, what kind of programs should be delivered, upgrading and enhancing our programming. It will be part of the education renewal innovation process when we develop the action plan.

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

**QUESTION 161-17(5): RECOGNIZING COMMUNITY VOLUNTEERS**

**MR. YAKELEYA:** Thank you, Mr. Speaker. My question is to the Minister of MACA. I talked about the hard work and the efforts of the many volunteers in the Northwest Territories. Is there a register that lists the volunteers in the North?

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

**HON. ROBERT MCLEOD:** Thank you, Mr. Speaker. Our volunteers are a very important part of communities as the Member pointed out. Through my role as Minister of Municipal and Community Affairs we have an opportunity to recognize a lot of the hard work that the volunteers are doing through the award program we have every year and this year we’ll be having it during the NWTAC again. Nominations come in, people nominate a lot of their local volunteers and then we honour them at the NWTAC’s annual general meeting. Thank you, Mr. Speaker.

**MR. YAKELEYA:** Certainly, it’s a good thing that this government, through this department, does celebrate and recognize the many volunteers in the Northwest Territories.

Is there a registered list of volunteers per region or the Northwest Territories as a whole, so we know how many people are registered as a volunteer for the many events that they volunteer for throughout the Northwest Territories?

**HON. ROBERT MCLEOD:** As far as a territorial-wide volunteers list, not to my knowledge is there anything like that that exists; however, in every community for local events they do know within the community who is always volunteering for different events. As far as a territorial-wide list, I don’t know of one. Thank you.

**MR. YAKELEYA:** The reason why I’ve asked for a registered volunteer list is because we are so busy throughout the year with the hand games in Whati or Tulita or Fort Good Hope, or tournaments we have throughout the year in Inuvik, Norman Wells or Deline or Yellowknife or Hay River that at the end of the year we can see the number of volunteers that contributed to making these events successful. That way we can get a percentage of the number of volunteers that we have in our communities, regions and even the Northwest Territories.

I want to know if that is something the Minister would consider through his department as to a registered list of volunteers for NWT events.

**HON. ROBERT MCLEOD:** Again, that would be something that would be awfully difficult to do because if you got a territorial-wide volunteers list, I think a lot of people would have trouble putting their name on it because they do volunteer a lot in their community. Within the different regions across the Northwest Territories, they have volunteers that help out with all events that take place. Again, as I said before, everyone in the communities and regions know who the pool of volunteers is.

I must also point out – and I failed to mention it before – MACA just announced last year at the NWTAC AGM in Hay River, we support communities honouring their volunteers with $1,000 to help go towards some kind of a community event. I know there are some volunteers who take advantage of it and some communities that do an excellent job of honouring people in their community. I think that’s something we try to encourage as a department. Thank you, Mr. Speaker.

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

**MR. YAKELEYA:** Thank you, Mr. Speaker. I certainly have seen the contributions of $1,000 going into the Sahtu communities to honour their volunteers. I know in the small communities, we know who the volunteers are and we naturally show up and do things. Other ones don’t like to be recognized, but they will do their part in any type of event. For example, we had the hand games in Tulita with the young people, they had a lot of volunteers there. We had the Sahtu Cup in Norman Wells, a lot of volunteers in Norman Wells to host that.

I guess I wanted to see if there was a registered list of volunteers. People don’t really want to put their names on it, but just to show at the end of the year we have 600 or 700 volunteers in the Sahtu, or maybe more, just to show a number and show the importance of volunteers. I’m not too sure how far my request this morning will be pursued in the Department of MACA. Thank you.

**HON. ROBERT MCLEOD:** We’ve heard from the volunteers who get the awards at award ceremonies that the last thing they want is to draw any attention to themselves. That’s what makes it a pretty special group because they don’t do it for the recognition is what they always say. They just like helping out their communities.
As far as an official list goes, I suppose during the end of the year, a couple of phone calls to each region saying how many people did you have volunteer instead of putting an official list together, just some numbers. I think they will be quite high. Thank you, Mr. Speaker.

MR. SPEAKER: Thank you, Mr. McLeod. The honourable Member for Inuvik Boot Lake, Mr. Moses.

QUESTION 162-17(5):
SOUTHERN TREATMENT FACILITIES

MR. MOSES: Thank you, Mr. Speaker. I would like to ask some questions to the Minister of the Department of Health and Social Services today. It is with regard to some of our most vulnerable clientele who have low incomes and are probably not ready for when we send some of our residents down to out-of-jurisdiction treatment facilities. I’d like to ask the Minister, him personally as the Minister of Health and Social Services, is he familiar with the type of environment and atmosphere that our residents and people in care who get treatment, the physical environment, that our residents will be going into when we do send them down for treatment. Thank you, Mr. Speaker.

MR. SPEAKER: Thank you, Mr. Moses. The honourable Minister of Health, Mr. Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Speaker. I did have the opportunity to travel with some members of committee to one of the facilities we have a contract with, Poundmaker’s in Alberta, just outside of Edmonton. I am familiar with that facility. The other three facilities that were contracted, too, I haven’t had an opportunity to visit or tour. Thank you, Mr. Speaker.

MR. MOSES: The Minister hasn’t had that opportunity, so I’m assuming some of our physicians and counsellors probably didn’t have that opportunity as well. When we’re preparing our clients who are getting treatment for addictions counselling or some type of other issue, how does this government prepare our residents and our clientele that they’re housed with.

HON. GLEN ABERNETHY: Well, I know that the Department of Health and Social Services has had regular contact with the clients who go down for treatment. Before going down, they give the clients an opportunity to talk to one of our counsellors, to talk to their family, to talk to their physicians. When they come back, they give them that opportunity to talk with one of our counsellors as well. They do have follow-up appointments with the counselors.

MR. MOSES: But, does the government have a point of contact to follow up with these individuals? Thank you, Mr. Speaker.

HON. GLEN ABERNETHY: One of the things that we do know is that every individual is different and every individual has different needs and expectations. That’s why one of the reasons we put in a variety of different treatment options for individuals from on-the-land programs and hopefully we’ll be moving forward and have some success with mobile treatment options as well as facilities. The bottom line is supports will vary depending on the client’s individual needs and arrangement that have been made with that client prior to going down for treatment. So, individually we can have custom plans to have regular contact or, if it’s not necessary, more of a follow-up contact. Thank you, Mr. Speaker.

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

MR. MOSES: Thank you, Mr. Speaker. In some cases, our clientele and residents can’t really take the type of treatment or the facility or even the clientele that they’re housed with. In the worst-case scenario, if a person were to leave the residential treatment facility, does this government offer some type of support service to get them back home to their communities in a safe and timely manner?
HON. GLEN ABERNETHY: Arrangements for travel are made through the medical travel Stanton office. The Stanton Territorial Hospital and the Department of Health and Social Services pays for travel and accommodation costs for when individuals are going out for treatment referred by the government. Currently, the medical travel office has put in place guidelines that denies travel assistance home when an individual leaves treatment early. If they complete their training they would be covered. This was only recently brought to the department’s attention, and I have directed the department to ensure that this guideline is changed immediately to ensure that return airfare is paid by the Department of Health and Social Services whether or not the client has successfully concluded their treatment. We have recognized the challenge and we have fixed it, and we will make sure that people are aware.

MR. SPEAKER: Thank you, Mr. Abernethy. The Member for Frame Lake, Ms. Bisaro.

QUESTION 163-17(5):
IMPACT OF JUNIOR KINDERGARTEN
ON PUPIL-TEACHER RATIO

MS. BISARO: Thank you, Mr. Speaker. I have some questions for the Minister of Education, Culture and Employment. I listened with interest to his statement yesterday about the impact of funding reallocation for junior kindergarten on the pupil-teacher ratio. I’d like to follow up with a few questions to the Minister.

There is some good stuff in here. There’s some bad stuff in the statement, but the statement suggests to me that it’s okay to financially penalize bigger schools to protect the funding of schools with less than 120 students. I understand that, but I also want to say that I don’t necessarily agree with the Minister on that, but I do want to say that I very much appreciate the recognition on the part of the Minister and the department that Yellowknife education authorities will suffer significantly with the proposed funding reductions.

I’d like to know from the Minister, in terms of his commitment to make sure that Yellowknife education authorities don’t go over 16 to 1, I’d like to ask the Minister, first off, when will that commitment kick in? Will it be in the first year of reduced funding, the second year or the third year when junior kindergarten is introduced?

MR. SPEAKER: Thank you, Ms. Bisaro. The Minister of Education, Mr. Lafferty.

HON. JACKSON LAFFERTY: Mahsi, Mr. Speaker. When we’re rolling out the junior kindergarten, it’s for the whole Northwest Territories and the 33 communities that we service. There is phase one, phase two, phase three year approach, and obviously, Yellowknife will get the third year implementation of the junior kindergarten, so we’re making sure, and I made a commitment in the House yesterday, anything above and beyond the 16 to 1 level, that PTR level, my department will be subsidizing them. We’re going to be monitoring that, and it’s not only in Yellowknife, it’s all the educational authorities that could be on the verge of 16 to 1 in the later years. Those are areas that we’re going to be closely monitoring.

This is a great initiative from our department. We’re getting a lot of positive feedback and we need to move forward. That’s what we’ve been told by parents, and we are moving forward on this.

MS. BISARO: Thanks to the Minister. I do want to move forward, as well, but I don’t want to move forward at the expense of some education authorities. I appreciate that the department is monitoring, but I did ask the Minister when this commitment will start. If an education authority goes over the 16 to 1 PTR in the very first year that their funding is reduced, is that when the commitment kicks in?

The other part of this is I would like to know from the Minister if this commitment is ongoing, so once we get beyond the implementation of junior kindergarten and something changes so an education authority goes over the 16 to 1 PTR, is this commitment also going to kick in in the future?

HON. JACKSON LAFFERTY: This is an area that we have made a commitment to, that on average, none of the school boards will be over 16 to 1, on the average territorial. At the same time, those individual education authorities, as the Member indicated, year one, year two, year three, some will be just slightly over and those will be mitigated through the subsidy that I have highlighted.

The Member is also asking if it’s going to be on a continuous basis. When we roll out the junior kindergarten and start implementing that, then the funding will be based on their enrolment as well. The larger the student population, then they’ll be receiving additional funding, more funding from our department. At the territorial level, the 16 to 1 will be under, but we will continue to subsidize those individual school boards that may be over 16 to 1.

MS. BISARO: Thanks to the Minister for the clarification. I take from that that, yes, this is going to be ongoing. I still didn’t really hear when this commitment is going to start, but I think it’s going to start when the 16 to 1 is exceeded.

The Minister, in his statement, referred to pupil-teacher ratio for authorities, and in authorities that have a number of schools, pupil-teacher ratio can vary from school to school, so I’d like to ask the Minister, when they were deciding on this commitment to fund people beyond 16 to 1 ratio, did they consider evaluating pupil-teacher ratio by
school? Did they determine the impact on each school not necessarily on the authority alone?

HON. JACKSON LAFFERTY: To my understanding, the information that we have received within my department working with the school boards on compiling all the information, we work closely with the school boards so we can access their information, as well, so they can share the information with us, so we can compare. If it’s based on per school or per educational authority, those are areas that the education authorities need to work with us. The information that we have we’ve compiled based on the projected enrolment. Phase one, phase two, year three approach is all projected on the student enrolment over a three-year period, so based on that the pupil-teacher ratio has been formula funded.

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

MS. BISARO: Thank you, Mr. Speaker. I didn’t really hear an answer to my question, so I’d like to ask the Minister if he, with all this information that’s been compiled between the department and the education authorities, would he commit to providing to me and to other Members a school-by-school indication of pupil-teacher ratio as it stands now in each school in the territory?

HON. JACKSON LAFFERTY: I will commit to the Members that the information that we’ve compiled to date on the pupil-teacher ratio across the Northwest Territories will be shared with the Members.

MR. SPEAKER: Thank you, Mr. Lafferty. Item 8, written questions. Item 9, returns to written questions. Item 10, replies to opening address. Item 11, petitions. Item 12, reports of committees on the review of bills. The Minister of Finance, Mr. Miltenberger.

HON. MICHAEL MILTENBERGER: Mr. Speaker, I wish to table the following two documents, entitled "Supplementary Estimates (Infrastructure Expenditures), No. 4, 2013-14" and "Supplementary Estimates (Infrastructure Expenditures), No. 2, 2014-2015."

HON. BOB MCLEOD: Mr. Speaker, I give notice that on Monday, February 24, 2014, I will move that Bill 11, Petroleum Resources Act, be read for the first time.

MR. SPEAKER: Thank you, Mr. McLeod. Item 10, Northwest Territories Lands Act, has had first reading. ---Carried

Item 19, second reading of bills. Item 20, consideration in Committee of the Whole of bills and other matters, with Mr. Dolynny in the chair.

HON. BOB MCLEOD: Mr. Speaker, I move, seconded by the honourable Member for Monfwi, that Bill 10, Northwest Territories Lands Act, be read for the first time. Thank you, Mr. Speaker.

MR. SPEAKER: Bill 10, Northwest Territories Lands Act, has had first reading.

---Carried

Item 19, second reading of bills. Item 20, consideration in Committee of the Whole of bills and other matters, with Mr. Dolynny in the chair.

CHAIRMAN (Mr. Dolynny): I’d like to call Committee of the Whole to order. We have a
number of items to consider: Bill 5, An Act to Amend the Motor Vehicles Act; Tabled Document 4-17(5) and Tabled Document 22-17(5). What is the wish of the committee today? Ms. Bisaro.

MS. BISARO: Thank you, Mr. Chair. We wish to continue with Tabled Document 22-17(5), the Main Estimates for 2014-15, with the Department of Health and Social Services.

CHAIRMAN (Mr. Dolynny): Thank you, Ms. Bisaro. Is the committee agreed?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you. We will commence after a short break.

---SHORT RECESS

CHAIRPERSON (Mrs. Groenewegen): I will call Committee of the Whole back to order. Yesterday when we left off, we were on the Department of Health and Social Services main estimates on page 8-9. At this time I'd like to ask the Minister of Health and Social Services if he'd like to bring the witnesses into the Chamber.

HON. GLEN ABERNETHY: I would, Madam Chair.

CHAIRPERSON (Mrs. Groenewegen): Agreed? SOME HON. MEMBERS: Agreed. CHAIRPERSON (Mr. Dolynny): Thank you. We will commence after a short break.

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HON. GLEN ABERNETHY: I would, Madam Chair.

CHAIRPERSON (Mrs. Groenewegen): Agreed?

SOME HON. MEMBERS: Agreed.

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CHAIRPERSON (Mrs. Groenewegen): Agreed?

SOME HON. MEMBERS: Agreed.

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SOME HON. MEMBERS: Agreed.

CHAIRPERSON (Mr. Dolynny): Thank you. We will commence after a short break.
efforts and activities associated with that. Have there been perhaps some figures that have been determined on some fiscal strategies to ensure, indeed, there are enough revenues to address the expenditures of delivering programs and services? Mahsi.

**HON. GLEN ABERNETHY:** Currently all of our authorities are running deficits and this is something that’s been ongoing for a couple of years. We believe by sharing and collaborating on things like procurement and physician services, IT/IS/IM, some financial aspects, we’ll be able to coordinate efforts across the territory and have a more responsive, streamlined approach. But at the end of the day, as I said two days ago now, our focus is on the care that the patients receive and we want to make sure that our patients have a seamless flow through the system. We’ve all heard people talking about how frustrated they are coming from one authority and trying to gain services in another authority, so like from the Dehcho to Stanton. We’ve created these silos, these independent authorities and our patients can sort of bump up against the structures that we’ve created and we want to have a seamless approach.

Having said that, we absolutely recognize and we want to continue to have regional functions as far as advisory capacity at a regional level, so like an advisory board or something, advisory council. We’re still working out the details on those types of things. We are going to work with the current structures that exist. We’re going to work with Aboriginal governments, community governments, Members and everybody to try to find a solution for improving the health system to benefit all people of the Northwest Territories.

**MR. NADLI:** I’d like to thank the Minister for what’s in that outcome in terms of furthering my understanding of the process.

There has been some discussion of streamlining. It’s fairly obvious that the department is internally assessing its resources. At what point would there be a formal decision in terms of amalgamating boards? As you’ve indicated, departments and divisions, or divisions mainly are, or district offices are mainly working in silos and there needs to be linkages.

At what point would there be a formal decision point that the department will be undertaking to look at moving towards amalgamating boards? Thank you.

**HON. GLEN ABERNETHY:** Madam Chair, we’re not actually talking about amalgamating boards, we’re talking about creating a central approach, a unified approach to providing health and social services and having shared functions coordinated across all the entities, possibly with a central territorial body that would be more of a virtual organization. It doesn’t really need to be located in one particular area and it could have individuals from what are all the authorities now participating.

We’re not talking about amalgamation. We know and we believe, and I believe, that there still needs to be regional entities providing advice and guidance on the provision of services, but we do need to find a way to have a territorial approach to some of the back office stuff and standards so that we can set standards of care for all residents of the Northwest Territories, and our patients can have a seamless flow through the system and not experience barriers that we’ve created by design.

**MR. NADLI:** Initially my intent of asking questions is to seek some clarity. Again, if this streamlining effort is in the spirit of amalgamating, which the Minister says it’s not, then are we in fact in an exercise of centralizing the health authorities?

**HON. GLEN ABERNETHY:** Madam Chair, we need to do something different. We’re not providing services to the best results that we can. We do have to have a territorial approach to a number of functions that exist, things like IT/IS/IM, procurement, our physician services, some financial systems.

The Member asked about some financial reports. It’s incredibly difficult to get a real comprehensive financial analysis done at a territorial level because every authority runs on their own unique financial system, which complicates things. So it’s not about taking anything away from the communities or regions, but it’s creating a system whereby those regions maintain an ability to have advice and guidance on the delivery of programs in their area, but they’ll also have a territorial voice which they don’t have now.

I’d be happy to sit down with the Member and walk through some of this stuff. I’d be happy to sit down with committee and walk through some of the details, but no decisions have been made. We are trying to take care and work on some of the back office stuff while, at the same time, having discussions about how we can improve the system overall.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Abernethy. Next I have Mr. Yakeleya.

**MR. YAKELEYA:** Madam Chair, thank you. I’d like to ask the Minister the number of vacant positions in the Sahtu under the health and social services board and if there have been any type of changes to these vacant positions. Which ones haven’t been filled for a long time and are they still active in our system? Thank you.

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

**HON. GLEN ABERNETHY:** Thank you, Madam Chair. According to the report distributed previously, as of October 31, 2013, there were nine vacant positions in the Sahtu. Currently, of those nine positions, six have been filled, two are in
competition in progress and there's still one that needs to be advertised. We haven't gone out for staffing on that one, or, rather, the Sahtu Health and Social Services Authority is waiting to get that in the queue.

**MR. YAKELEYA:** Thank you, Minister. It does look promising to fill these positions. I wanted to ask the Minister if any of those positions are difficult to fill. The community of Tulita has been waiting for a social worker for some time and we put the suggestion forward some time ago to the previous Minister if they would be flexible enough to use that position in support of the community as a community wellness worker, some type of worker that would help out with the community issues if we're unable to fill that social worker. I've heard that some of the social workers are doing their jobs designated for one of the communities, but they have to go to another community to do more work there and they're getting tired. So, I want to know if that flexibility is available to the health boards and to the department to support them in that effort. Thank you.

**HON. GLEN ABERNETHY:** I do know that Norman Wells was providing some back fill to the community of Tulita with respect to the social workers, but I don't actually know the current status of the social worker position in Tulita.

We're constantly working with the authorities, trying to find solutions to their communities' challenges. We do have positions established for particular purposes, but if the community needs are such, we are always open to have some discussions as long as it's within the same area of mandate.

**MR. YAKELEYA:** I appreciate the Minister’s willingness to look at this. The community has actually been asking and there were several challenges to not allowing the social worker to come into the community. There's no blaming why that couldn't happen, we're just asking if that is happening for reasons we sometimes don't understand. The community is asking – and the previous Minister had that discussion with the community – if they can use that position to have a wellness worker to work with alcohol and drugs specifically to have that position. Today, as we sit, Tulita does not yet have a social worker. It is backfilled by workers out of Norman Wells, but that puts an additional load on them and they have to travel and spend a few days in Tulita and then get back to Norman Wells. They're getting somewhat tired and it can cause some burnout for our social workers. That's all I'm asking.

**HON. GLEN ABERNETHY:** I'll get the Member an update on the current status. I will say that obviously we want to fill these positions with the professionals identified in the job description to provide the services that we are committed to providing, so we will always want to fill that with a social worker. But you're right; some positions are proving hard to recruit and we need to be open to some creativity in order to find ways to continue to provide those services, regardless of our ability to staff or not staff positions.

**MR. YAKELEYA:** Certainly when the social worker left Tulita, it has been a couple years or longer and it's been almost over 700 days since we've had a social worker in our community. Even though we get back fills from the other communities to help out, it has been quite a challenge and that's why we ask if they'll be flexible enough. We certainly want to fill those positions for those workers coming into our community. Sometimes it doesn't work according to the plan, so I'm just asking for some flexibility if the community can work with the health and social services board to say it's going to be a challenge, we're unable to fill that position, as we all want to do, but this position is being vacant and we'd like to do something that would fit the needs of the community. Some flexibility within the department with the health boards to say, yes, we can do this. That's all I'm asking.

**HON. GLEN ABERNETHY:** I'm agreeing.

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

**MR. MENICOCHE:** Thank you very much, Madam Chair. Just for clarification, we're on 8-11?

---Interjection

**MR. MENICOCHE:** Thank you very much. Just with still a bit of position growth here and with the Stanton Territorial Health Authority and the Yellowknife Health and Social Services Authority, I'm presuming all these are Yellowknife jobs. There's an increase of 24 positions. Can the Minister explain what those are.

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

**HON. GLEN ABERNETHY:** We're just trying to dig the specific details out of the binder. We will provide the specific details to the Member so that they have a better accounting, but by way of example, at Stanton most of the positions are located in Yellowknife and a significant number of those or a couple of those are accounted for through the Med-Response unit that we're putting in as well as some other health professionals. Within Yellowknife Health and Social Services, the increase is about 13 and those are EMR. I'll go to Director Mathison because I don't understand.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Abernethy. Ms. Mathison.

**MS. MATHISON:** Thank you, Madam Chair. For details on the increases specifically to the Yellowknife Health and Social Services Authority between '13-14 and '14-15, the increase is 11 positions, four of them are related to the Healthy
Mr. Menicoche: Thank you very much. I didn’t think it added up to 24, but between Stanton and the Yellowknife Health and Social Services Authority, I guess, Madam Chair. I’m just trying to understand why there are increases, 20 more positions for Yellowknife. As we go along, I think I pointed it out in the previous department too, although it was there that things continue to grow and grow in Yellowknife. It looks like these authorities, of course, are specific to Yellowknife. So just two more questions, I guess. I think we were short a couple of positions. I didn’t that came to 24, what she was saying. The second one is, specifically, does that growth have to be in Yellowknife?

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

Ms. DeLancey: Thank you, Madam Chair. I believe the reason the number didn’t add up is because we have a net change of 49 new positions in the system in these main estimates, but there are more new positions and then some positions have been lost or sunset, so it’s not a straight exchange, and although there are a number of new positions in Yellowknife there are also 23 new positions in other communities as well. Every new position that’s added to the system, we make every effort to look at whether it needs to be in Yellowknife. For example, some of the back office functions like the coordinators for the electronic medical records and the coordinators for our new Information Systems Centre are located in Hay River. Unfortunately, when positions go to Stanton, as the Minister noted, that’s a territorial facility, they are located in Yellowknife.

Mr. Menicoche: Thank you very much. I think the deputy minister clarified that when there’s a net change, I can appreciate that answer.

Just referencing my Member’s statement about how difficult it is for somebody new trying to get into a system, I know that a lot of these are largely professional, but we’ve still got accounting clerks, front desk personnel, et cetera. I’m also presuming that there are just as many vacancies in this department on average as anybody else, so can the Minister designate a task team and look at those entry-level positions, because I’m concerned, once again, about over-qualifying entry positions and, of course, not giving enough credit for equivalencies, I guess, as the HR Minister had indicated earlier in the day. If the Minister can comment on that and review any of those vacancies. I don’t know if he gave the number to Mr. Dolynny, but I’d certainly like to know the number of vacancies.

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

Hon. Glen Abernethy: Thank you, Madam Chair. We do have a health and human resource strategic planning unit with the Department of Health and Social Services and the exact things that the Member was talking about are the types of things we’re trying to do. The Member is correct; we do have a large number of positions that are or do require statutory appointments, and we would have to staff for those accordingly. But at the same time, we have been very supportive of training local people for local jobs. The resident care aide program that is delivered by the college, we have worked with them to have those delivered so that people can get jobs in the communities. We recently worked with them to deliver one here in Yellowknife that is going to be where a lot of people from Behchoko are trained for the long-term care facility there, and as I mentioned to Mr. Yakeleya, there will be one up in the Sahtu, and we’ll be working with the people in the Sahtu to have that training delivered so local people there, so they can have access to those jobs.

But we will continue to work with our communities and our regions to identify training opportunities for health care professionals that can be done without statutory appointments. We will be coming forward with a strategic human resource plan. I will be sharing that with committee and we’ll have an opportunity to discuss things that we can do better to employ people from the North in the North.

The second part of the question, which I forgot to answer, is the vacancy rate in the department for funded positions is about 18 percent. Just for the record, in the Deh Cho, there are 95 positions in the ‘13-14 mains, and in that October 31st report there was 11 positions identified to be staffed in the immediate future. Of those, five have been filled, three are in competition right now, and three are in the queue to go for competition once there is capacity within the department to move forward with HR to staff those positions.

Mr. Menicoche: I’m glad the Minister was able to answer the questions on vacancies and specifically to the Dehcho, as it were, partly in my regional breakup. Social Services calls it Dehcho, but half of it, of course, is the Nahendeh. But certainly it addresses my issue of having job opportunities available for all residents as we move along.

Just with the vacancies alone, I think I spoke last budget in this House about Fort Liard and their need for consistent social work and mental health services. I just want to know if things have been
addressed in Fort Liard. There was a high turnover of social workers. It happened again this year and there’s another turnover of social workers, and the concern about having consistent mental health services. What it is about is that people feel more comfortable and more trustworthy when they’ve got someone that’s long term, somebody’s there that developed a working relationship with them certainly helps with the community wellness and community health and the ability for clients to access treatment services if they are working with someone they trust and can develop a good working relationship. I would just like to know about the efforts to have consistent social work and mental health services in Fort Liard. Thank you.

HON. GLEN ABERNETHY: I agree with everything the Member has just said with respect to the provision of services and how consistency is certainly the more preferred approach. We continue to have challenges hiring health professionals in the Northwest Territories, especially in some of the smaller communities. We are doing better in some areas than others, but we are still having challenges. This is true for mental health and addictions counsellors as well as community health nurses. I don’t have the exact status of Fort Liard, but I’d be happy to get that for the Member and share that with the Member.

As we move forward with the strategic plan, I’m looking forward to coming to committee and having discussions and stealing your good ideas on how we can improve the recruitment and retention of health care professionals. Obviously, I’d love to have more conversation about what we can do in the communities to encourage our youth to pursue things like nursing and other health related professions.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Minister Abernethy. We are on page 8-11, information item, active positions, health and social services authorities. Next I have Mr. Moses, followed by Mr. Bouchard. Mr. Moses.

MR. MOSES: Thank you, Madam Chair. Just a quick question here. I know the Minister is familiar with some of the e-mails that have been going back and forth between the Members from the Inuvik region. I see that there are two indeterminate part-time positions that we are losing, but we’re also gaining four intermediate full-time positions. Does the Minister know what those two indeterminate part-time positions are and whether those indeterminate positions are possibly being moved over to full-time positions. Thank you, Madam Chair.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Moses. Ms. Mathison.

MS. MATHISON: Thank you, Madam Chair. I don’t have the details on the exact position title. They were internal reallocations done within the authority.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Ms. Mathison. Next I have Mr. Bouchard.

MR. BOUCHARD: Thank you, Madam Chair. A couple of quick questions about the Hay River Health Authority and the positions there. If the department could give me a little more detail and discussion on the union there. They are obviously not a union of ours, but they are highly interested. Have we been having discussions with them about including them in our union? It seems like it’s difficult and inconsistent with this authority versus all the other ones.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bouchard. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. The Hay River Health and Social Services Authority is actually outside of the public service, so the employees and the management in that authority are not GNWT employees in any capacity. We do provide funding to them as we do with other authorities. I believe it was in 2005 I pushed to bring the Hay River Health and Social Services Authority into the public service and the price tag at that time was about $2 million to bring in the pensions and whatnot. We continue to have discussions with the authority. We continue to explore possibilities to bring them in. The price tag has increased we believe significantly and we are doing some analysis on that to figure out what the actual cost to bring them into the public service would be. We will continue to have those conversations, but there is no immediate plan to bring them into the public service. Thank you, Madam Chair.

MR. BOUCHARD: It’s not getting any cheaper. It is something we were interested in seeing, I guess. Is the department going to continue to analyze it? When do you think you will have that analysis complete? When would we be able to look at what the net costs are of doing that?

HON. GLEN ABERNETHY: It’s not an easy task, unfortunately. Because we’re talking about pensions and every authority is running on a… Sorry, that authority is running on a different pension system. We’re pretty much going to have to do a manual calculation on every employee to figure out what those costs would be and what it would cost to bring over. We should be able to get it done by the end of the upcoming fiscal year, but it is going to take a bit of time to do a thorough, comprehensive analysis. Thank you.

MR. BOUCHARD: I am just wondering if we’ve used any professionals such as an actuary to look at those actual costs.

HON. GLEN ABERNETHY: That was done in the past when we did the assessment previously in
2005. I am pretty sure that’s accurate, I might be off a little bit. We would have to do the same to make sure that if we move forward and it is reasonable to move forward based on cost, that we are basing it on fully understood numbers.

MR. BOUCHARD: I wonder what the other barriers are, I guess. Is it all financial? What are the complications of not having them in the GNWT system?

HON. GLEN ABERNETHY: I remember this because I was involved in it the last time. The last time we were pursuing it, in 2005, we had to write all new job descriptions to make them consistent with the GNWT format. We had to get them all evaluated and consistent with our form of evaluation, the Hay method of evaluation. Then we were getting ready to move forward with the next step, which would be to terminate their employment with the Hay River authority and offer them employment with the new GNWT Hay River authority. Then we’d have to make sure that all of them would have the opportunity to go through the process where they were protected where they had first right of refusal on jobs. We protected them. So there was a significant amount of work making that happen. On top of that, there is the cost of bringing over the pension and making sure their futures are protected. It’s a significant amount of work.

MR. BOUCHARD: I wonder what the impediments are having an authority like this outside of the GNWT. What difficulties are we experiencing? There is a cost to that pension, but there is also maybe a cost or a difficulty in operating one authority that is stand-alone and the remainder of them under the GNWT umbrella.

HON. GLEN ABERNETHY: It does complicate some of the work we’re doing now moving to a shared services model because with that particular authority, we’re going to have to have separate contracts to allow us to have those types of discussions and work together on those particular arrangements. So it does create some complications from having territory-wide shared service and guaranteeing everyone the same standard of shared service as well as shared products, shared purchasing, shared finance, shared IT. It does complicate all of those things.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Abernethy. Mr. Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. Other than those positions we already discussed, I believe it’s the same. We will confirm and get that information for the Member. Thank you.

MR. MOSES: I appreciate that. I know when we’re looking at these numbers, we’re not just looking at numbers and positions but there are people behind these positions and jobs are lost. There’s a chance we’re affecting families. We talk about increasing the population if jobs are lost within the authority. Specifically on the next page when we go into shared services, that’s potentially three families leaving the Beaufort-Delta Health Authority in Inuvik, so it’s really difficult while we approve the numbers fully, that possibly there are some numbers in there that can be affected. I just want to state that for the record. Yes, it would be hard to prove when it can possibly affect families in the region. Thank you.

HON. GLEN ABERNETHY: As the director of finance pointed out, there’s no job loss with these things; some things have been re-profiled. The authorities have a mandate or requirement to provide services to meet the needs of their residents in their particular region and they do, from time to time, have to describe some of their work and change some of their positions and they would come through the normal process to do that to meet their mandate that we approve through this process.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Minister Abernethy. Next I have Mr. Bromley.

MR. BROMLEY: Thank you, Madam Chair. I just want to follow up a little bit on active positions versus inactive positions and how that might affect active positions. It’s my understanding that departments can shift positions from inactive to active status, unfunded inactive to active and funded and vice versa.

Can the Minister tell me, has that been done with any of the positions listed on this page for this fiscal year, and is there a plan to do that at all during the fiscal year that’s not described here? Mahsi.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bromley, Minister Abernethy.

HON. GLEN ABERNETHY: Thanks, Madam Chair. There are many reasons why a position might be declared inactive. By way of example, there was some structural… I’m talking about the
established funded positions. The authorities 1,392 positions in the authorities. Those are all.

HON. GLEN ABERNETHY: '14-15 fiscal year. Thank you.

versa and whether you expect to do that during the make inactive positions into active positions or vice these are actually inactive positions proposed to ask, with respect to the '14-15 year, if any of think we have some appreciation for all that. I'm just do have that information. We've had briefings ad that we already have the information on. Yes, we

reasons why positions would be made inactive.

As of October 31st and the information that was provided to the Members previously, there were 33 positions that were flagged to be inactive. Of those, 18 are still inactive, none of which are funded. Fifteen positions are now actually active, four of them are actually filled, one is filled with a casual, seven are relief positions, one is held while an incumbent is on a transfer assignment, and two are in the process of staffing. So, there are a number of reasons positions would be made inactive. I'm not sure that I gave you everything that you're looking for.

MR. BROMLEY: I'm trying not to ask questions that we already have the information on. Yes, we do have that information. We've had briefings ad infinitum with the Minister of Human Resources and so on, Minister of Finance, about the reasons, so I think we have some appreciation for all that. I'm just asking, with respect to the '14-15 year, if any of these are actually inactive positions proposed to make inactive positions into active positions or vice versa and whether you expect to do that during the '14-15 fiscal year. Thank you.

HON. GLEN ABERNETHY: On page 8-11 it shows 1,392 positions in the authorities. Those are all established funded positions. The authorities manage their budgets, manage their staff to provide the services that are outlined and they believe they need these positions to do them. I'm not aware of the authorities planning to make any of these positions inactive or to reactivate any other positions, but they may, but that is not the expectation. The expectation is they'll fill positions and provide the services that are required.

MR. BROMLEY: Thanks. That does answer the second part. The first part, I guess, maybe I'll just leave it with the Minister. If he thinks he could provide more information, that would be great.

The positions specific to these and the question specific to these '14-15 positions, are any of them representing jobs that will be moved from inactive to active status in any way? That may not be something he can provide off the top, but I think that's the sort of thing that we're interested in knowing about. Thank you.

HON. GLEN ABERNETHY: The answer is no, because these 1,392 positions are active. They're not inactive, so there's no plan to move them from something they aren't to something that they currently are.

MR. BROMLEY: I'll leave it at that. I'm not sure that's entirely accurate, but I will take the Minister's word here. Thank you.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bromley. Page 8-11, information item, active positions, health and social services authorities. Agreed?

SOME HON. MEMBERS: Agreed.

CHAIRPERSON (Mrs. Groenewegen): Agreed, thank you. Page 8-13, activity summary, directorate, operations expenditure summary, $10.016 million. Mr. Bromley.

MR. BROMLEY: Thank you, Madam Chair. I just have a couple questions here. I mentioned during general remarks that it seems that compensation benefits are going up quickly but I realize that there is forced growth in this area plus some new positions. I'm a little bit concerned about new positions in the directorate. I'm not positive there has been new ones, but it seems like a 20 percent increase over two years is quite a bit if there have not been new positions.

My first question is: Has the directorate been put on notice that a policy of passive restraint is to be implemented for the department in 2014-15? Thank you.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. There are a couple new positions within this unit. The anti-poverty coordinator position is in this unit. I'm going to go to the deputy minister for the specific details.


MS. DELANCEY: Thank you, Madam Chair. As the Minister noted, there are several new positions in the directorate. The Anti-Poverty Policy advisor is located here, as well there is a federal/provincial/territorial policy advisor position that was previously funded under THSSI that is now funded in here. We have two new forced growth positions to implement the Health Information Act, and in addition, part of the increase you see is two positions that have been moved from another division in the department into the directorate to join with the Health Information Act position. That explains the growth. Thank you, Madam Chair.


MS. DELANCEY: Thank you, Madam Chair. I did not address the passive restraint, but, yes, the directorate is well aware, as is in the entire
department, of the passive restraint direction. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Ms. DeLancey. Mr. Bromley.

MR. BROMLEY: Thank you, Madam Chair. Thank you very much for that information, both questions. On the first one, I guess I would now have to ask why it isn’t up a lot more. That’s a lot of positions to add for the amount that this department has gone up, a $600,000 increase, roughly, from last year, a little bit less, and I think I counted two, four, five, six positions there. That seems pretty efficient. Just a comment there.

My last question on this page is also related to 8-14, so I’ll be ahead of everybody else by covering two pages at once here. The grants and contributions, $685,000, the second line there. I recognize that $35,000 is for the Tlicho cultural coordinator. Could I get a breakdown by amounts for the $650,000 Anti-Poverty Strategy Framework amount?

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. The deputy did describe some of the growth, and some of those areas that are growing in the directorate are in direct response to committee and government priorities such as the anti-poverty. A number of positions, as the deputy indicated, are to address moving forward with the Health Information Act and making sure that people understand and that we have the people in positions. It’s about six positions in the directorate. On average, positions are about $100,000-plus, though $600,000 is pretty much the exact growth in this particular area so I think it correlates nicely.

With respect to the Anti-Poverty Strategy and Framework, the $650,000 is broken out into two different pots: $150,000 to day shelters, and for now it’s $75,000 going to Yellowknife, $75,000 going to Inuvik, and then there’s $500,000, which is a fund available for NGOs, community governments, Aboriginal governments to help them address the five pillars outlined in the Anti-Poverty Framework to reduce poverty in the Northwest Territories. We’re currently working on a process with our stakeholders group, and we’ll certainly be having those discussions with committee on the criteria and how we planned to distribute those dollars in a fair process to combat poverty in the North.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Abernethy. In this process in Committee of the Whole here in the House, this is our process, this is about getting our questions asked and getting proper answers. I just want to mention that if the Minister needs to find a document or have something referred to them, please don’t feel under any pressure. There is no big time constraint here. I just think we just need to relax and make sure we find the right answers. Sometimes when we’re waiting for the microphone to switch on to the Minister, I’m going to wait until the Minister is ready to answer, because definitely in a department this size and this complex and not knowing where the questions are going to come from, if it takes a moment to locate a document, please don’t feel any stress about that.

Next on my list, I have Mr. Moses.

MR. MOSES: Thank you, Madam Chair. Just following up to some of the positions within the, I guess, authorities in general, we have in this part of the department here shared services. We did receive some concerns from some of the, I guess you could say, some of the computer divisions within the authority that there was a presentation given that would amalgamate all the local computer supports from across the Northwest Territories with the TSC, and although there was talk that no positions would be lost, especially full-time positions, the Department of Human Resources said otherwise. I’m just wondering if we can get confirmation today that when we go through the shared services project that no positions are lost within the regional authorities.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Moses. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. With respect to the shared services around IT, we made a commitment that there would be no job loss in the communities and regions. They would likely, and will be, changing reporting relationships in who they report to, so we are not losing the number of positions. Some of them will likely change slightly and have new reporting relationships, but we also made a commitment to working with our staff to make sure that they are accommodated as well.

MR. MOSES: I know there was a lot of miscommunication within a certain area within the Beaufort-Delta region there, and moving forward, as we go through the shared services and innovation planned strategies, that when we have the Department of Health and Social Services and possibly the Department of Human Resources that are giving this information out, that it’s on the same level of input and the same level of message being sent, because it has caused some stress and caused some insecurities within our employees of the GNWT. Thank you, Madam Chair.

HON. GLEN ABERNETHY: With changes there are often glitches, if you will, and we are aware of the concerns the Member is bringing up. We remain committed to our original commitment, which is no loss of the number of jobs in the regions and communities. There would obviously be some changes in reporting relationships and maybe some
functions within individual jobs. Recognizing this, the CEOs are meeting next week to talk about their change management process on this to bring back some clarity to something that should have been fairly simple.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Minister Abernethy. Next I have Mr. Dolynny.

MR. DOLYNNY: Thank you, Madam Chair. As we all are aware, the directorate is really the strategic think-tank and the overall coordinator of pretty much the Department of Health, and so with that I expect a certain level of, I guess, leadership. We know that the management of drinking water is a shared responsibility with a number of other departments here in the Northwest Territories. However, because we share this responsibility, no lead department takes that active role as being the leader, and that's the concern that I think a lot of Members have and have expressed many, many times. Unfortunately, with all the emphasis, especially as of late with the Obed spill and potential tainted water in our waterways as we know today, you would think that the testing of water would be a high priority because this is what we've been hearing time and time again.

Now, if one goes on the MACA website, which really is the only website that we have at our disposal publicly to show what our water quality is like – are we doing the proper chemical testing and the bacteriological testing – if one goes on this website you would think that there would be testing which is, under our guidelines – there are national guides on testing – once a month in all our communities across the Northwest Territories on both chemical and bacteriological testing. This is not happening. This is not, indeed, the case. In fact, in lots of communities, based on the data that we have on the database on-line, which is our only public document of the availability of this information, some of this information is from 2011, some of it is from 2012, and we have some from 2013. In some cases we have one test in that year, and clearly we have to do monthly testing. That is our obligation.

Can the Minister tell the House, tell the people of the Northwest Territories if water testing is so important why are we not putting it publicly on record?

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Dolynny. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. Water quality tests are required under the Water Supply System Regulations and the chief public health officer requires that the following water quality testing for treated water, so we do test drinking water on a regular basis. As far as public waters, we work with I believe it’s MACA who has the lead on sampling rivers and lakes. ENR. Sorry, ENR has the lead on that.

MR. DOLYNNY: Again, this department shares a responsibility with other departments in this government to make sure that that information is readily available. On top of that, if you look in that same database, again, Department of Health has a shared responsibility. The last annual report on drinking water was tabled in 2011. In 2011. That's quite a long time ago. Again, what is this department going to do to make sure that that information is readily public?

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

MS. DELANCEY: Thank you, Madam Chair. There is an interdepartmental drinking water quality committee that is responsible for coordinating and producing these reports and I recognize that there is expectation that the 2012 report will be done shortly and be publicly available. I don't have the timelines here today.

MR. DOLYNNY: I appreciate the deputy minister's response to that. I'm looking forward to that report. Under the same title, strategic leadership, and basically as a coordinator, I will take the liberty, an opportunity to talk a little bit more about the Anti-Poverty Initiative, which really falls under, because this is a social envelope committee lead here, can the Minister indicate what new monies, total new monies, are being involved with this new initiative? Thank you.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Dolynny. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. We're just pulling out the exact details. We have it. It's on one of my sheets here, I know that. But to start off, we have the $650,000 that was identified on the previous page, 8-14, that I already answered Mr. Bromley on. We've got some money in for a senior advisor position, which is $163,000. We've got money in for the anti-poverty roundtable meetings, research and communications. This is the development and working towards the development of the territorial action plan, $60,000. I actually have a sheet that has all this on it, I just don't know where it is. Can we just get a second, Madam Chair?

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Minister. We'll just take moment to find that information. While we're waiting I wanted to congratulate the men’s Olympic hockey team on their win.

---Applause

We got a chance to watch it together in the Member’s lounge and there was a lot of adrenaline there and that wasn’t so long ago and, of course, we were all looking for a break anyway. So let's carry that forward into our meeting today. Minister Abernethy.
HON. GLEN ABERNETHY: Thank you, Madam Chair. I didn’t have that memorized off the top of my head, but I conveniently had that information available, but I’ve got eight binders here so it was a little hard to find it.

The Health and Social Services department has $1.073 million dedicated to anti-poverty funding. In total the government has $2.6 million going towards anti-poverty. Within the Department of Health and Social Services, we have $200,000 under the Healthy Food for children and youth. We’re providing food vouchers for families in need through the Healthy Family and Collective Kitchens Program. So that’s $200,000. The remaining $800,000 in this area is coming through Education, Culture and Employment. We’ve got $500,000 as I’ve previously indicated for NGO and Aboriginal government initiatives that is falling under the Department of Health and Social Services. We have the $60,000 that I’ve already mentioned for the annual multi-stakeholder meetings and the work towards the development of a territorial action plan. We have $163,000 that’s in the Department of Health and Social Services for the anti-poverty coordinator, who is supporting the group and doing research in administration. We’ve got $75,000 going to the Beaufort-Delta Health and Social Services Authority to fund for the day programs, and in this case for 2013-14 they’re using it for a wet shelter, and we’ve got $75,000 for the Day Shelter in Yellowknife. So in the Department of Health and Social Services, $1.073 million.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Minister Abernethy. Mr. Dolynny.

MR. DOLYNNY: Thank you, Madam Chair. I’m just doing some quick math here. So in essence I think the Minister said overall new money initiative, if my math is correct, is two million six-some thousand dollars. With this new money, is this something that’s in this current budget, that there might be a force of growth factor in that we’ll look forward to seeing on an annual basis as we build future budgets? I mean, are we seeing this grow, is there a force of growth factor in that number or is that just a starting figure for the 2014-2015 budget? Thank you.

HON. GLEN ABERNETHY: Thank you. The $1.073 million in Health and Social Services and the $1.53 million in the other departments totaling $2.603 million are additions to the base.

MR. DOLYNNY: Thank you. I appreciate the Minister giving me that number. With the overall and daunting task of the Anti-Poverty Action Plan, what percent of this new money of the overall $2.6 million – let’s round it off – are we really putting towards the overall plan and what percentage of funding is left that is still left to be paid within the plan? Thank you.

HON. GLEN ABERNETHY: Thank you. We have put these dollars in based on the actions in the plan. There aren’t any additional dollars at this point for ’14-15 and any dollars that come in the future will certainly be discussed and debated through the business planning process and future budgets.

MR. DOLYNNY: Maybe I’ll rephrase my question a bit better here. We are definitely putting a dent into poverty with this current budget, I’m not going to deny that. I applaud the government for at least putting that small amount in, I’ll use small, but I think poverty is going to be a lot more than just $2.6 million.

Again, we’re talking about strategy, we’re talking about overall coordination and forward thinking here. What is missing in terms of hitting those highest points possible within the strategy? Are we just tackling 15 percent of the overall plan in this budget? How much more is entitled to the overall success of the plan? Thank you.

HON. GLEN ABERNETHY: Thank you. Currently everything in the GNWT’s response to the framework is funded and identified to be funded within the plan. We hope to, with partners, leverage for more dollars to combat poverty here in the Northwest Territories, but I must remind everybody that this $2.6 million we’re talking about is new investment into the combat against poverty. There are a number of actions within the action plan that already have dollars associated with them and a bunch of the work being done by departments like the Housing Corp are part of the strategy to combat poverty in the Northwest Territories but don’t necessarily have any dollars allocated towards them.

As we move forward and we hear from the stakeholders group on the development of the territorial action plan it will help us to continue to evolve and mold our response, our GNWT response, which may indeed include future activities, but we have to do that all recognizing our fiscal limitations as a territorial government.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Abernethy. Next I have Ms. Bisaro.

MS. BISARO: Thank you, Madam Chair. I have a couple of questions here, but I’ll first ask a question following up on Mr. Dolynny’s question about the Anti-Poverty Strategy funding. The action plan for the Anti-Poverty Strategy hasn’t yet been finalized. That’s going to happen sometime in the next number of months and I certainly look forward to that, but somewhere in the back of my mind I thought that I had been advised that once the action plan was done, in addition to the money that’s in this current budget, that there might be a supp coming forward to fund the actions in the action plan. So I’d like to ask the Minister, once the action plan is done and there are actions determined that we need to act on, is it potentially possible for the government to come forward with a supplementary appropriation to fund some of those actions in the Anti-Poverty Action Plan? Thank you.
CHAIRPERSON (Mrs. Groenewegen): Thank you, Ms. Bisaro. Minister Abernethy.

HON. GLEN ABERNETHY: Thanks, Madam Chair. The GNWT’s response to the Anti-Poverty Framework is what is before us today and we have a response based on activities that we can do that fall under our mandate to combat poverty here in the Northwest Territories. So, things related to Health and Social Services, Education, Culture and Employment, Housing and the other departments that are participating. The next step is to develop the territorial action plan where all partners will identify the types of things they’re going to be doing to combat poverty. To support the work that other organizations and governments are doing, we do have the $500,000 available for them to utilize and hopefully to leverage for additional funds from other groups to help combat poverty in the Northwest Territories. In that we are going to see a territorial action plan and our GNWT action plan will certainly form a part of that. If there are requests for additional money or if there are requests for additional action within the territorial action plan, we will certainly bring those through the business planning process to make sure that those that we can support, we do and those that we can’t, we don’t.

MS. BISARO: Thanks to the Minister. So I heard the Minister say there’s not going to be an ask for more money for anti-poverty in the ’14-15 year. You can correct me if my understanding is incorrect.

I wanted to ask a question – I think it belongs here – under the directorate. I don’t remember if it was last year or if it was a little further back than that, but my understanding is we now have I’m going to call it – it came from the French secretariat, I believe – a French position within the Department of Health and Social Services. I believe it was a pilot. I would just like to know from the Minister if I’m correct in my remembering and how that pilot is working. Is it beneficial and is it likely to be continued on a permanent basis? Thank you.


MS. DELANCEY: Thank you, Madam Chair. The Member is correct; we do have a position that’s been in place for a couple of years funded through the federal languages funding, a manager of French language. It was not a pilot so much as it was a first step towards working with the Department of Education, Culture and Employment and other departments on developing our French language services plan for the GNWT. So that position has been working with ECE, with the Federation Franco-Tenoise and we are now close to finalizing a French language services plan. It’s not a pilot, we will retain that position, but there may be other positions added once the plan is finalized and resourced. Thank you, Madam Chair.

MS. BISARO: Thanks to the deputy minister. The French language services plan that the deputy minister references, is that just for the Department of Health and Social Services or is she referencing a plan across the government?

MS. DELANCEY: It is a GNWT-wide plan being developed under the coordination by the Francophone affairs secretariat in the Department of Education, Culture and Employment.

MS. BISARO: Thanks to the deputy minister. My other question has to do with insured services and things that are not covered under insured services. I mentioned one the other day when I talked about naturopathic doctors, but the other service, I guess, that I think and I believe there was a commitment from the previous Health Minister to consider bringing this in under our insured services, and it’s bariatric surgery. I’d like to know from the Minister, first, has bariatric surgery had any work done on it to bring it in under insured services and where does the department sit and the Minister sit in terms of bringing naturopathic doctors in as an insured service. Thank you.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Ms. Bisaro. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. There are a large number of services that have become available over the years that are not currently covered under our insured services. Our insured services coverage is fairly dated and it hasn’t really had a very comprehensive review in some time, which is one of the reasons why we’ve created the chief clinical advisor position to help us actually do this analysis to make sure that the types of things that are covered under insured services are really keeping with the times, and the fact that the health system does change and evolve and new programs and services come in.

We’ve had the chief clinical advisor on for a while. One of his primary tasks is to provide clinic guidance around clinical practice guidelines but also to provide advice and guidance on what we have and currently cover under insured services.

One of the things we are looking at, as well as many others, is bariatric surgery. It’s going to take a bit of time to make sure that we’re doing the comprehensive analysis on that and then we bring those forward for discussion.

At this point in time, there is no discussion about including naturopathic doctors under insured services.

MS. BISARO: Thanks to the Minister. So, my usual question, I guess, is in terms of timing. When might we expect this revision of the list to be done? I’m hoping that maybe there would be some communication with Regular Members as to what the department has decided on, and as part of that, is there a willingness on the part of the department
to look at including naturopathic doctors at some point and when might that be? Thank you.

HON. GLEN ABERNETHY: Madam Chair, the chief clinical advisor is going to be working on this over the next year to look at different procedures that haven't been covered, including things like bariatric surgery. That will be done over the next year and hopefully we'll be in a position to have some discussions about what may or may not be added or included in the future.

At this point in time, there is no intention to include naturopathic doctors and the services they provide under insured services. I do have a meeting with the naturopathic doctors here in the near future, where we'll have an opportunity to hear from them and hear what their interests are as far as providing services. We have indicated that we will make them our fourth priority for regulation for licensing purposes here in the Northwest Territories. So we are moving forward with a number of things with them, but at this point in time there's no intention to make them an insured service. I'm looking forward to the discussions though.


MS. BISARO: Thank you, Madam Chair. I'm sorry, I lied, I do have another question that was hiding under a piece of paper.

In compensation and benefits there's quite an increase, six and a half thousand dollars, six-hundred-whatever, from $7.8 million to $7.1 million. I have a note here, three PYs and I don't know quite where I got that from, but can I get an explanation as to why the major increase in compensation and benefits? Thank you.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Ms. Bisaro. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. It seems vaguely familiar. I'm pretty sure that's exactly the same question that Mr. Bromley asked earlier. It's six positions. If you average them out to about $100,000 per, it's about $600,000 and we can provide the detail to the Member. We'll print off Hansard.

MS. BISARO: Madam Chair, I just wanted to apologize. I must have gapped out when Mr. Bromley asked his question, so I'm very sorry for wasting everybody's time. I'll read it when we get it. Thanks.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bromley. Ms. Bisaro. Page 8-13, activity summary, directorate, operations expenditure summary, $10.016 million. Agreed?

SOME HON. MEMBERS: Agreed.

CHAIRPERSON (Mrs. Groenewegen): Page 8-14, activity summary, directorate, grants and contributions, $685,000.

SOME HON. MEMBERS: Agreed.

CHAIRPERSON (Mrs. Groenewegen): Page 8-15, information item, directorate, active positions. Mr. Bromley.

MR. BROMLEY: Thank you, Madam Chair. This is where the Minister's explanation kind of falls apart, given that there are a total of two new positions for the department plus one indeterminate part-time, which makes, again, the increase in compensation and benefits quite high. Thank you.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. There are some ins and outs in this particular area. The anti-poverty position is one in; the Health Information Act is two in; there are some financial shared services positions being transferred out, three; there's the full part-time senior policy advisor position in; and there are two Health Information Act positions in. So there are some ins and outs in this particular area. Thank you, Madam Chair.

MR. BROMLEY: That's obvious, I would say, given that we're only up two here net, but we've heard about six new positions. It suggests that two of those new positions must be paid in the order of $300,000 or something like that. Again, the math is fuzzy. I note that the other divisions do manage their compensation and benefits in just about every case. Just in the directorate we seem to have this issue. Thank you.

HON. GLEN ABERNETHY: There are O and M dollars associated in some of these program areas; salary is a portion. But for some of the specifics to help explain the accounting behind some of this, I'll go to Ms. Mathison.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Abernethy. Ms. Mathison.

MS. MATHISON: Thank you, Madam Chair. The numbers on page 8-15 in 2013-14 have been restated to show comparable numbers between the two years, so in 2013-14, for example, the two positions related to the Health Information Act that already existed in the department were previously presented under the program delivery support division, and so we've restated the actuals here so it's more comparable to show the net increase, but the impact on the compensation and benefits dollars is the full impact of all the positions that have moved into the directorate.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Ms. Mathison. Mr. Bromley.

MR. BROMLEY: Thank you, Madam Chair, and thank you for that information. I think I understood that and it explains why some of the other divisions
are doing so well. Just on the Minister’s comment that these have O and M dollars associated with them, I would assume those dollars would not be reported under compensation and benefits.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: No, they wouldn’t.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Minister Abernethy. Information item, directorate, active positions, page 8-15. Agreed?

SOME HON. MEMBERS: Agreed.

CHAIRPERSON (Mrs. Groenewegen): Thank you. Moving on to page 8-17, activity summary, program delivery support, operations expenditure summary, $46.490 million. Ms. Bisaro.

MS. BISARO: Thank you, Madam Chair. I have a number of comments I want to make here, or questions, I guess. The first one has to do with the system human resource planning division. It’s been a while now since the recruitment of health professionals has been moved back to the Department of Health and Social Services. I’d like to hear from the Minister or from the department whether or not they’ve done an evaluation of how well it’s working to have that function back within the department.

CHAIRPERSON (Mrs. Groenewegen): Thank you, Ms. Bisaro. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Madam Chair. One of the priorities of this unit has been since we’ve brought them over from the Department of Human Resources is to review the existing programs and services they are providing and start putting together a long-term strategic human resource plan for health professionals within the Northwest Territories. That work is still underway and we’re hoping to have a draft strategic human resource plan that we can bring to committee to have a discussion about things that we need to do and things we need to change. There are a number of areas in programs that we have delivered in the past that don’t appear to be providing much value as far as recruitment and retention and it’s time we make some improvements, and I look forward to an opportunity to have further discussion in this particular area and our strategic plan, our human resource strategic plan as we move forward. This unit has been very busy and there’s been a lot of work on what was there and where we need to go and it’s been less than a year.

MS. BISARO: Thanks to the Minister. I have a comment with regard to health card renewals. Some months ago, over a year ago I guess, it was a huge issue and there were major problems with health card renewals. Interestingly enough, I haven’t heard many comments from my constituents, certainly within the last six or eight months, but just recently I had somebody who phoned and left me a message, didn’t really want any action but wanted me to know – and I’m sharing this with you, Minister – that his health care card, he had just discovered it had been expired for a year and he had no knowledge. Now, I thought we were sending out notices, so where are things at in terms of health care card renewals? Do you figure that we’ve gotten over most of the hiccups? Obviously not this one, but is the system working better than it certainly was when it switched over?

HON. GLEN ABERNETHY: Clearly, we had some growing pains as we rolled out this new approach on renewing health care cards. We do provide notification to people. We are limited in providing it to known addresses and if people move or they change their post office boxes, we may occasionally miss an individual. I don’t know the situation you’re describing and if you want to share the details with me, please, so that we can insert it into our quality assurance process to make sure that we learn from it and make sure that that type of thing doesn’t happen again. I would say that we have experienced improvement since our initial rollout and we are getting health care cards turned around in a more timely and reasonable manner.

MS. BISARO: Thanks to the Minister. I’m not sure I can give you the info. It was pretty much I want you to know this, but I don’t think I’ve got enough detail that I can share with you to help you figure out what went wrong.

There is money in the budget for midwifery. I didn’t know if that was the Minister who said that or if that was in the budget address, and I’m very glad to hear that. My understanding is that it’s going to put, at least I’m thinking it’s one midwife, but one or two midwives in Inuvik in the 2014-15 budget year. If I could get confirmation on that, and if I could hear from the Minister where we’re going next after Inuvik.

HON. GLEN ABERNETHY: In my response to some of the opening comments I talked a little bit about the midwifery services. We are doing a minor renovation to the existing Hay River Health and Social Services Authority, which we believe will allow us to move forward with the Midwifery Program sooner than anticipated. We had some limitations given that the current facility doesn’t meet the needs, and we are expecting the new facility to meet the needs, but we’ve now got a coordinator hired in the department who is doing the work for us, so we’re actually anticipating we’re going to move forward more quickly with the Hay River position, the two positions here, right away. We actually have gone out for staffing on those midwifery positions in Hay River. We’re hoping to do some interviews in the immediate
future, so hopefully, we can get that up and running pretty quick.

The work on Inuvik is more around sort of setting up the system in Inuvik to make sure that all the stakeholders are aware we’re moving forward with that. We plan to fill positions in Inuvik, should everything move according to plan, in the ‘15-16 fiscal year.

**MS. BISARO:** Staffing Inuvik is ‘15-16 is what I thought I heard. My other question was where are we going after Inuvik? Where is the next area that a Midwifery Program is going to be put in place?

**HON. GLEN ABERNETHY:** According to the territorial plan, Hay River, Inuvik, Yellowknife as a territorial program.

**MS. BISARO:** Thanks to the Minister for that confirmation. I wanted to make a comment to the loss in this year’s budget of the money for oral health care. It was $468,000, I believe. I know that this was federal money, but I think the Minister heard from the Social Programs committee that this is something which the committee considers to be really important, a basic prevention program for young children. I know that the Minister has said in I think it was in his response to people’s comments that there is a plan for oral health, that we’re studying what we’re doing and we’re going to have a plan sometime within this next year. I do have a problem with that. I think that the $468,000 that we have been using for oral health has been but a drop in the bucket of what we need to do with regard to our young people’s oral health. There was a very telling comment from one of the department staff at a briefing, which stated that, I think... I wish I could remember the percentage, but it was that something like 80 or 85 percent of children under the age of five have at least five cavities. That’s huge, and we know very well that dental health is part of whole body health, and a child with poor dental health is going to be a child in poor health in other areas as well.

**COMMITTEE MOTION 7-17(5):**
**PROGRAM DELIVERY SUPPORT – ORAL HEALTH CARE FOR NWT CHILDREN,**
**DEFEATED**

I move that this committee recommends that the government commit to continued funding in the 2014-15 fiscal year for oral health care for NWT children, allocating $468,000 from the anticipated funding for territorial health services announced in the 2014 federal budget. Thank you.

**CHAIRMAN (Mr. Dolynny):** Thank you, Ms. Bisaro, I will circulate the motion. The motion is in order. To the motion. Ms. Bisaro.

**MS. BISARO:** Thank you, Mr. Chair. I kind of shot the wad previously before I introduced the motion. I would just like to state, in terms of where the money can come from, I know the department is consistently strapped for money and I know the Minister said, as well, that we don’t know what the federal money is going to be eligible for, but I suspect we can make oral health care fit into something that the federal government is going to require us to use for this $7 million a year.

I really feel this is a minimal amount of money and I feel it’s basic to the health of our children. It’s a very basic prevention tool we can use. I would urge everybody to really think about what this is going to do for us, the amount of money that it is and the fact that we do have “$7 million of new money” coming to us this year some time. Thank you.

**CHAIRMAN (Mr. Dolynny):** Thank you, Ms. Bisaro. To the motion. Mr. Bromley.

**MR. BROMLEY:** Thank you. Very briefly...

**---Technical difficulties**

**CHAIRMAN (Mr. Dolynny):** Thank you, committee. Welcome back. Sorry for the technical delay. Noting the clock, I know we have a motion on the floor, but we are going to defer it by noting the clock. We will get back to it. I will rise and report progress.

**MR. SPEAKER:** I call the House back to order. Before I call for the report of Committee of the Whole, I am informed you would like some more time to consider the matters before you in Committee of the Whole.

By the authority given to me by Motion 10-17(5), I hereby place you back into Committee of the Whole to consider the business before the House until such time as you are ready to report, with Mr. Dolynny in the chair.

**Consideration in Committee of the Whole of Bills and Other Matters (Reversion)**

**CHAIRMAN (Mr. Dolynny):** I’d like to call Committee of the Whole back to order. Committee, we last left off with a committee motion on the floor. To the motion. I have Mr. Bromley.

**MR. BROMLEY:** Thank you, Mr. Chair. Very briefly, I support this motion. I’d also like to note that it’s not really just prevention we’re talking about. We have a situation now, so we obviously need a lot of on-the-ground action right now while we are conducting or planning and putting in place a good comprehensive program of both prevention and treatment.

I’d also like to mention that we really should be promoting a dental therapist training program at Aurora College, so I’m hoping that the Minister of ECE is listening and will start to give some serious attention to developing that program, as well, if indeed we don’t have it yet.
I will be supporting the motion. Mahsi.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. To the motion. Mr. Moses.

MR. MOSES: Thank you, Mr. Chair. Committee did some hard work going through the business planning session and I feel that bringing motions forward for recommendations that, as chair of the standing committee, I do stand behind the hard work of the committee members, the staff, and the departments that came and presented before us and gave us some of their concerns and issues as well.

As this is a recommendation, I will be supporting the motion. Thank you, Mr. Chair.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Moses. To the motion. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. Just for some clarity, there is a reference to this, in this motion, to $468,000 which I believe is the $468,000 that was identified in 8-39. Just for clarity purposes, the dollars that are there came from the federal government, and not the entire $468,000 were actually NWT dollars.

We had, out of that $498,000, when you combine the $468,000 and the $30,000 the year before, we had $198,000 of that and then $50,000 of that available to the Northwest Territories. Of that amount, $144,000 had to go to Nunavut and $105,000 had to go to the Yukon. One of the reasons the federal government gave these dollars to us is for the exact reasons that the Member is talking about, in addition to the fact that we know in Canada we have lost the one training institution that does train dental therapists and the federal government wanted the three territories to try to come up with some solutions on how to improve oral health in the Northwest Territories and also to start having some discussions on how we can facilitate some training for them.

The dollars are used and are being used as part of the Pan-Territorial Oral Health Initiative which has been going on for the two years, and from that they're going to come up with a report that's going to help inform decision making as we go forward on how to improve dental therapy services but also just oral health services in the Northwest Territories as well as the other two territories.

We already do a number of things. We have $366,000 dedicated to dental therapy positions in the Northwest Territories, who are an incredibly important position who do treatment as well as public health and oral health for prevention and promotion. We do a number of things on top of that.

Dental and oral health is promoted at regional and community levels through the authorities, and programs such as Lift the Lip and Little Teeth are big campaigns that focus on teaching parents the importance of good oral care for children zero to five, or Healthy Family programs have oral health and promotion sections, dental therapists are doing incredible work out there, community health representatives and wellness workers are involved in dental oral health prevention, regional nutritionists are doing much of this work as well. Campaigns linked to healthy eating such as Drop the Pop, promotional breastfeeding and early childhood programs are also contributing in this area. Does that mean we're doing enough? No. We need to do more and we've heard that clearly.

But part of the problem with this motion that's in front of us today is it seems to be suggesting that this $468,000 is something we should duplicate when, in fact, these dollars were not for the provision of these services but was to do an analysis and research, which concludes at the end of this fiscal year.

It is referenced in here that we should use these federal dollars that are coming as part of the $7 million. But as I indicated yesterday, the federal government put really tight limitations on how we can spend those dollars, and at this time we don't know what those criteria are, but we do know that the three territories did put forward a recommendation for more money, of which we did not get the full funding, for health system improvement, access to specialized tertiary care and pan-territorial innovation. We don't know that this will fit under there, so this motion might be a little on the premature side.

What we can say is, when we know what these dollars are available for, we will certainly have discussion with committee to help set our priorities. But at this time, to suggest we put $468,000 in, recognizing these tight fiscal times, also recognizing that we are doing things and that we want to do things better and we will work with the three territories to ensure that dental therapists have training available to northern residents, we are going to be voting against this motion at this time.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. To the motion.

SOME HON. MEMBERS: Question.

CHAIRMAN (Mr. Dolynny): Question has been called. The motion is defeated.

---Defeated

Committee, we are on 8-17, activity summary. Sorry, before we do so, Minister Abernethy, do you have witnesses that you'd like to bring into the House?

HON. GLEN ABERNETHY: Yes, please.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Sergeant-at-Arms, if you would escort the witnesses into the House, please.
I would like to welcome Ms. DeLancey and Ms. Mathison back, and the Minister here for returning. Committee, we are on 8-17, activity summary, program delivery support, operations expenditure summary. Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. I’d like to speak just briefly to population health and particularly oral health. I understand that there’s $366,000, three positions with GNWT focused on particularly oral health. I understand that there’s an informational discussion about these positions. I appreciate that. Is the dental surgery facility still operational in Hay River? Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley, Mr. Abernethy.

HON. GLEN ABERNETHY: Yes, it is.

MR. BROMLEY: Is that part of what the Minister was talking about with these three positions? Thank you.

HON. GLEN ABERNETHY: No, Mr. Chair. We have dental therapist positions throughout the Northwest Territories and those dollars that I refer to are for the dental therapist positions.

About 50 percent of our positions at this point are vacant. What I was talking about previously in the motion is there’s nowhere to train new dental therapists and this is a problem, and the three territories are trying to come up with a solution that will allow us to provide training to individuals to fill these roles. This isn’t a problem unique to the Northwest Territories, this is the three territories that are suffering from this.

Our dental services for our residents are actually contracted out by the authorities with private dentists who come to the communities who provide dental services. The dental therapists enhance what can be done in communities.

MR. BROMLEY: Thanks to the Minister for that additional information. We’ve heard from departmental staff that 85 percent of children under the age of five have cavities in five teeth, very serious dental issues. I got the sense that the Minister is happy to put his additional efforts into planning and that that’s just a situation we have to live with.

Is that the position of the Minister, that he’s willing to accept that statistic and go with the resources we have and hope that we can get resources in the future? Eighty-five percent of Aboriginal children under the age of five. Thank you.

HON. GLEN ABERNETHY: The provision of dental services for Aboriginal children is actually the responsibility of the federal government and we’re looking at finding ways to encourage the federal government to invest more money in this particular area. We do care very much about our youth. We recognize, without question, that oral health impacts overall health and we will continue to do things to address those issues. But we need to plan and we need to figure out what the best programs to put in place are, and we will continue to move forward to develop a plan that will help us address oral health across the Northwest Territories.

I don’t think the status quo was good enough, but I would rather have an informed plan than no plan.

MR. BROMLEY: Mr. Chair, I would point out that this is not a new situation. This hasn’t just appeared or anything like that.

Moving on, the health and social services authorities administration I see has made a substantial leap this year from the last two years when it’s been almost identical. I’m wondering: is there a particular reason for that? Does that have to do with maybe the shift of shared services staff or something like that? Is there an obvious and apparent reason for that increase? Thank you.

CHAIRMAN (Mr. Dolynny): We’ll go to Deputy Minister DeLancey.

MS. DELANCEY: Thank you very much, Mr. Chair. The increase in funding to health service authorities administration is due mainly to funding for a number of new initiatives which includes positions associated with the rollout of the electronic medical records — there are two positions in Hay River and two positions at the Yellowknife authority — funding to Stanton to roll out the Med-Response system; some portion of the new early childhood development funding that is going to the authorities for direct program delivery; some funding that’s going to the authorities that we’re bringing into the TSC because they will now need to cover their chargeback costs; a significant amount of one-time funding to cover the implementation of moving authorities into the TSC; and some new positions to support implementing our shared services for information technology and information systems. Thank you.

MR. BROMLEY: Thank you for that explanation. Just in terms of our work with the authorities to come up with a new line of authority and clarity and continuity in the delivery of our health systems across the NWT, where are we at in that? I know we’ve talked about that for many years. Is that something that the Minister has been talking to health authorities about and is there any kind of a time frame in front of us on how we might proceed there? Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley, Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair.

As I’ve mentioned several times, we are working and moving forward on this initiative. We are currently doing a number of back office functions. We’re working on shared procurement, shared IT/IS/IM, we’re looking at the territorial physician pool or the territorial physician model. A number of
these things are well in progress and well on the way.

We have been having discussions with committee. We have been having discussions with our Aboriginal government partners, with the JLC, which is the Joint Leadership Committee, which is the chairs and public administrators of all the authorities, as well as the CEOs on how and what needs to be done to bring us into a territorial system that will meet the needs of our residents.

We will be going to communities and having discussions over the next fiscal year. We will be meeting with leadership across the territory over the next fiscal year and we will be figuring out and working closely with committee, as well, on the direction we will take. But many parts are well in progress for the back office and we will continue to move forward, with support of committee.

**MR. BROMLEY:** Thanks for the details there from the Minister and the duplication, apparently. Is there a target date in mind to complete this work?

**HON. GLEN ABERNETHY:** I just want to add one piece that I forgot to mention, and it’s basically the Hospital Insurance and Health and Social Services Administration Act is going to be coming forward with a legislative proposal. That is being drafted now, so we will be coming to committee to have some discussions around that.

Many of the back office stuff is well underway and we hope to make significant progress in the IT/IS/IM sections with Stanton and a few of the other authorities bringing them into a central back office function this fiscal year. Procurement we intend to make progress on. There are a number of the other ones, and I can provide the committee with more detail in writing about where we are with some of these back office functions.

As far as the next steps, we want to make sure we get it right, and it’s going to involve lots of discussion with committee and with residents of the Northwest Territories. We don’t have a real defined timeline, but we would like to make as much progress as we can in the life of this government.

We have committed to putting some structure back in those communities and those regions where there are public administrators within the life of this government. Those things are directly correlated and directly related so we’ve got a lot of work to do.

**CHAIRMAN (Mr. Dolynny):** Thank you, Minister Abernethy. Moving on with questions on this page 8-17, I have Mr. Moses.

**MR. MOSES:** Thank you, Mr. Chair. Just a quick comment but then I do have one question in particular. The Minister did release this document Measuring Success, the annual report for NWT Health and Social Services. It has a lot of good stats in it, and it just kind of goes to show when we do put money into prevention, promotion and education that we do get results from our territorial statistics.

Specifically I want to talk to something that came out of this report. In priority 3 it mentions that the number of clients receiving home care in their home community is at 2,071. That’s 168 more than in 2011-2012, and if you average that out to each community in the Northwest Territories, it’s about 62 clients in each community.

My first question is: Does the Minister know how many home care workers we have in the communities and whether or not each community does, in fact, have home care?

**CHAIRMAN (Mr. Dolynny):** Thank you, Mr. Moses. Minister Abernethy.

**HON. GLEN ABERNETHY:** I’d like to thank the Member for the question. Home care is an incredibly important service that we provide in the Northwest Territories through our individual authorities, and we anticipate the demand on home care services is going to grow as we have an aging population and we’re supporting them to age in place.

The Member has averaged out the demand based on a by-community total, which may not be a fair way of splitting or rationalizing how many home support workers are in each community because every community is different, every community has got a different aging population and different people with different needs. I can tell you that we have, by authority, 29.03 positions in Yellowknife Health and Social Services Authority, home support workers, and that includes home support workers, home care nurses and other positions. I’m going to break it down and that should make it a little easier.

In Yellowknife Health and Social Services, we have 6.5 home support workers, we have homemakers rehab aides, we have registered nurses, so home care nurses, 5.6, and then there are some other related types of positions, rehab aides and whatnot. In Fort Smith we have 1.5 home care nurses, 1.5 home care LPNs, 2.75 support workers, and a medical social worker as well. In the Tlicho we have a lot: 12.5 home support workers, home care nurses, related type positions.

There is a lot of detail. It might be better if I just provide the Member with a written breakdown because it’s going to take a long time to go through. If the Member is alright with that, that’s what I’ll commit to do.

**MR. MOSES:** I know the importance of home care in the community and I know I did break it down on average just to see what it was in places like Yellowknife and some of the smaller communities that have a lot of our elderly senior citizens who don’t want to leave home and want to live that independent lifestyle in their community. Those are where we see some of the higher per capita
numbers, and I just want to make sure that we do have the services to support them.

Moving forward, I know I had some questions in the House, and it brought me on to seniors, which also deals with home care, but when I was looking at some of the policies and procedures under Seniors Action Plan, since it's dealing under the territorial health services, the action plan hasn't been updated. I'm not sure if there has been a report since 2003 on the action plan. A lot has changed since then. That's been about 11 years. I just wanted to know if the Minister has any indication of when we'll have a renewed action plan or if we're going to get a report on some of the things that were outlined in the action plan. As we are getting into a higher senior population, I just want to make sure that's addressed and we're taking care of that moving forward and not trying to catch up after the fact.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Moses. Minister Abernethy, the audio did not pick it up, but I think the Member did want a copy of those statistics you offered earlier. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair, and we will certainly provide that.

The strategy that the Member is talking about is an old strategy, and moving forward we are going to be coming forward with a new strategy. It's going to be informed by the continuing care report that was released just a couple of days ago to Members. That's going to help inform the direction we take. We will be coming forward with an Aging in Place Strategy. We're hoping to have that done by March 31st of this year, so that we can share it with committee. That will help inform how we move forward to deal with the aging population, the number of the individuals that need different levels of support and what types of things we're going to need to do over the coming years to help people age in place as much as possible. It won't be just about staying in homes. It will be about the full continuum from staying at home for as long as you can and is reasonable to moving into maybe independent or assisted living and then to more of a long-term care and extended care into dementia, if necessary. We will be coming forward to have those discussions with committee.

At the same time, I would like to say that in partnership with different departments we have updated the Seniors' Handbook, which identifies different programs and services available to seniors and elders in the Northwest Territories. That's been updated as recently as 2012.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Committee, we are on activity summary 8-17. Health and Social Services, activity summary, program delivery support, operations expenditure summary, $46,490 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Page 8-18 and 8-19 are together. Activity summary, program delivery support, grants and contributions, $24,416 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you. Page 8-20, information item, program delivery support, active positions. Any questions?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Seeing none, 8-23, activity summary, health services programs, operations expenditure summary, $209,007 million. Does committee agree? Ms. Bisaro.

MS. BISARO: Thank you, Mr. Chair. A couple of questions here. There is a large increase in grants and contributions and a fairly large increase in fees and payments. Could I get an explanation of what those increases are for, from, to, et cetera?

CHAIRMAN (Mr. Dolynny): Thank you, Ms. Bisaro. Mr. Abernethy.

HON. GLEN ABERNETHY: Hold on one second.

CHAIRMAN (Mr. Dolynny): Page 8-23. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. With respect to grants and contributions, there have been about six-ish million dollars in increases. I can just walk through some of those. We've had some Collective Agreement increases for both the authorities, including Hay River. That's about $1.9-plus million. We've got some initiatives we are working on that are priorities of the Legislature, which is the Midwifery Program expansion, that's $470,000. We have the Northern Alberta Renal Program, a much smaller amount, $1,000 it looks like in direct program delivery. This is the one-time funding that we've talked about to replace the THSSI funding. An allocation of $1.6 million for Healthy Pregnancies, $180,000 there. We've got some forced growth as well, contracts with the NWT Med Association for family practitioners. It's about $789,000. Some additional forced growth around dietary, laundry, housekeeping contract with Stanton, $93,000. Some northern allowance increases, $112,000; Economic Evergreen Plan for program vehicles, $405,000; release of costs of essential services, $306,000; professional fees, $119,000; supplies, $104,000; chemotherapy drugs have gone up $132,000; and then callback and stand-by pay, $1 million.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Ms. Bisaro.

MS. BISARO: Thanks for all that detail, maybe a bit too much. I'm trying to understand. This is an increase to grants and contributions and fees and
Thank you, Mr. Chair.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. A little follow-up here. For this one-time funding, I believe we are responsible, then, for coming up with our own dollars for these services subsequently. What is the plan for that? Obviously the planning would have to take place during 2014-15 if it disappears at the end of that year. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. A little activity summary, Mr. Bromley.

MS. BISARO: That's good. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you. Page 8-23, activity summary, Mr. Bromley.

HON. GLEN ABERNETHY: Yes, these are grants and contributions going to the health authorities. Then under fees and payments, insured services for non-NWT residents went up $4 million.

HON. GLEN ABERNETHY: Thank you. A little follow-up here. For this one-time funding, I believe we are responsible, then, for coming up with our own dollars for these services subsequently. What is the plan for that? Obviously the planning would have to take place during 2014-15 if it disappears at the end of that year. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. A number of these items were covered in the THSSI funding that I described yesterday. We've put it in 2014-15 and the Department of Finance has agreed to cover these on a one-time basis. The original plan with the THSSI funding, we were always supposed to have an exit strategy. That exit strategy was never fully developed and/or implemented. If we had cut many of these programs that are in place now without having some sort of transition plan, we would have adversely affected these services going to all NWT residents. So we were able to put money in for this year and we have to come up with some sort of plan to move forward on those for upcoming fiscal years.

MR. BROMLEY: I believe the THSSI money is not necessarily meant to cover these things. They will be starting again in one form or another. Has THSSI been approved at some point?

HON. GLEN ABERNETHY: We're not sure what the federal government is going to call this $70 million, but THSSI, as we know it, no longer exists. They have given us some broad statements that we were able to get out of their budget statement about what these dollars are intended for, but it doesn't seem to directly correlate to things THSSI funding in the past. It may, some of it might, but at this point in time we're not 100 percent sure. When we know and we're in a position to pursue those dollars, we will certainly be having discussions with committee. I can say they have been very clear up front that no money will flow unless there's a clear strategy. These dollars are not intended to be put into ongoing programming, but are designed to give us the dollars we need to build a system that will meet needs. So it's more short-term funding. It's not permanent funding in any capacity.

MR. BROMLEY: I know some of that was repetitive. I hadn't got the full picture on that before. Again, there's nothing new here. The Minister said himself we were to plan this out of our base levels in the past. We failed in every instance. The Minister says we've got the same expectations again, but I haven't heard anything that tells me how we're going to do that or that we are. It sounds like we're just going to ignore it again. We're obviously not thinking about it. I'm looking for something that says, federal government, we're hearing you. We'll do the work and this is how we're going to do it, or we're going to hang our hat again on the hopes that new money will come forward. We need to know that. What model are we doing here?

HON. GLEN ABERNETHY: The Member is correct. We need to make sure we have a plan that includes an exit strategy and that we use these dollars to help improve the system and put structures in place that will control things that the federal government will require. As I said, in the budget address by the federal government, they identified the $7 million over three years for new targeted and time-limited fund to increase health services in the three territories in priority health areas and to reduce reliance on outside health care systems and medical travel. These are the parameters. We will get more detail and as we get more detail, we will sit down with the Finance Minister to figure out how we put in a plan and what programs we move forward with that will meet the targets that they have recognizing that anything we do cannot become part of the base.

It is time limited with the purpose of improving our services in the long term. We need to have a plan, otherwise they won't give us the money. We need to make sure there's an exit strategy or they won't give us the money. I'm confident that we can do this.

This THSSI funding seemed to drag out from the THAF days to the THSSI days and they always said you need an exit strategy. A lot of work was done, but as far as having a comprehensive exit strategy to get away from those dollars, it wasn't done to the degree that maybe would have been appropriate.

MR. BROMLEY: I think it would be great if these dollars continued to come, obviously, but in the meantime it makes me very nervous. We've been through this before. We were all in the panic when it happened in the 16th because we are using this temporary money for basic service delivery. I think we have made some progress. I'm hoping midwifery, for example, is no longer in that one-off funding.

I will leave it at that. I don't need any more information right now, but perhaps the Minister can
recommit, if he hasn’t already, to work with committee on this as soon as he has information. I would think committee could play a role in contributing towards decision-making on this. Thank you.

HON. GLEN ABERNETHY: I have already committed to doing that and I agree with what the Member says, we clearly need to have a plan.

CHAIRMAN (Mr. Dolynny): Committee, we’re on Member says, we clearly need to have a plan. Committed to doing that and I agree with what the Hon. Abernethy.

HON. GLEN ABERNETHY: I have already committed to doing that and I agree with what the Member says, we clearly need to have a plan.

CHAIRMAN (Mr. Dolynny): Committee, we’re on page 8-23, activity summary, health services programs, operations expenditure summary, $209.007 million. Mr. Bromley.

MR. BROMLEY: Sorry, just one more question. As Stanton gets more and more cooped up and people are stumbling on each other and working out of closet space and so on, are we finding that we’re using other facilities more? Are people being sent south more and so on? How are we staying on top of the impacts and trying to mitigate this situation at Stanton Territorial? Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. Mr. Bromley.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. We do prefer to keep our residents in the Northwest Territories and we do have a territorial bed management program that helps us, where possible, keep our residents here in the Northwest Territories. We continue to use services in the South – MRIs, other things – and where load is there, we will send our residents south for programming, but we do our best to keep everybody in the North as much as possible. We don’t offer every service that’s offered in the South, so from time to time our residents do have to go down.

MR. BROMLEY: Really the point is here that we only hear about the challenges and kerfuffles when we visit the hospital as committee. I think it would be useful to hear from the Minister some objective assessment of this situation so that we can help him make sure that situation is managed. I’ll leave it at that. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. I’ll take that as a comment. Page 8-23, activity summary, health services programs, operations expenditure summary, $209.007 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Page 8-24, activity summary, health services programs, grants and contributions, $158.361 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you. Page 8-27, activity summary, supplementary health programs, operations expenditure summary, $27.3 million. Ms. Bisaro.

MS. BISARO: Thanks, Mr. Chair. I just have one question here. During the 16th I know the Minister was well aware and the deputy minister, as well, well aware that we had a protracted investigation into supplementary health benefits and potentially looking at charging residents a certain amount to access our supplementary health programs.

I’ve certainly heard from some of my constituents, maybe not a lot of them, but I’ve certainly heard from constituents that it’s time that we start not means testing necessarily but charging a small fee for the extra services that we provide as a government.

I’d like to know whether or not the department has any kind of work that they’re doing, or perhaps work that they are considering doing in the future, to look at either charging a service fee for access to services and even pharmaceuticals and/or means testing. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Ms. Bisaro. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. This was certainly a big issue in the 16th Assembly and it’s something that needs to be done. What I have committed to is we will do work on this, but we need to complete a few of our other priorities and make some human resource room to actually conduct the work. If everything is being done on the side of a desk, nothing gets done, and there is a significant amount of good work that we’re doing in the department to improve services to our residents. This does need to be done, but it’s a lower priority for us at this time. But we will continue to research and gather data so that when we’re ready we can make informed decisions on moving forward.

MS. BISARO: Thanks to the Minister. I can appreciate that you can’t do everything. I would like to know where it’s at. In terms of a time frame, is it something that you’ll get to before the end of the 17th Assembly or not? Thank you.

HON. GLEN ABERNETHY: It’s not in the strategic plan for the 17th Assembly, but it doesn’t mean that we don’t continue to do analysis and collect data that will help us be informed when the department does move forward with reviewing this more thoroughly. We do have a significant number of projects on the go that are going to improve the health and the care and the future of residents, and those need to be our priority for the remainder of this term.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Continuing on with questions on 8-27, I have Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. Just one quick follow-up on that. I suppose the biggest recommendation to come out of the exercise from the 16th to me was the realization that we really
want everybody to have other coverage and that that could be tapped into to help protect our resources.

What proportion of the NWT residents have additional coverage and what are we doing to make sure that those that don’t somehow get it to the extent that that’s possible? Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. Based on numbers that we’ve had in the past, we know that it is estimated that about 10 percent of NWT residents have no access to supplementary health benefit coverage. So that means the rest – 90 percent – have coverage of some capacity, whether it’s through private insurance, extended health benefits, NIHB, but about 10 percent don’t have this type of coverage.

MR. BROMLEY: Thank you. Is territorial coverage, GNWT coverage, included in the 90 percent?

HON. GLEN ABERNETHY: Yes.

MR. BROMLEY: So I guess what we want to see is those residents get additional coverage that will help protect the territorial resources.

CHAIRMAN (Mr. Dolynny): Mr. Bromley, I’ll get you to rephrase that question a little differently. Thank you.

MR. BROMLEY: Thank you, Mr. Chairman. My understanding was we wanted to make sure that people had additional supplementary benefits and health benefits coverage beyond the territorial GNWT coverage in order to protect GNWT resources, essentially third-party, and that we were going to promote that. That’s the statistic that I’m looking for.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley, for doing that. Minister Abernethy.

HON. GLEN ABERNETHY: So, just so I’m clear, what you’re asking is: How many residents of the Northwest Territories do not have third-party employer-provided types of insurance or other supplementary insurances like NIHB? Am I correct?

MR. BROMLEY: That’s correct.

HON. GLEN ABERNETHY: I don’t believe we have that detail. I do remember in the last government when the supplementary health debate occurred in the House, there was some recognition by the department that we would find ways to encourage people to obtain some sort of third-party insurance, whether it’s through employers or other things. I’m not currently aware of the status of that, but I will talk to the department, I will get an update and I’ll provide that to committee.

MR. BROMLEY: To me, again, that was the biggest recommendation that came out of all the work on this in the 16th Assembly, so I’m surprised that it’s not higher on the agenda here, because I don’t think there’s much cost to that but the benefits are potentially substantial. I appreciate the Minister committing himself to look into it and I hope that it gets some action as well as looking into it. Thank you.

HON. GLEN ABERNETHY: I’ve committed to having the department look at this and we’ll get back to the Members with some additional detail.

CHAIRMAN (Mr. Dolynny): Okay, committee, we are on 8-27, activity summary, supplementary health programs, operations expenditure summary, $27.3 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Committee, 8-28, activity summary, supplementary health programs, grants and contributions, $16.829 million. Does committee agree?

SOME HON. MEMBERS: Agreed.


MS. BISARO: Thanks, Mr. Chair. I have two questions here and I mentioned it in my general comments, opening comments on this department and I don’t think I got an answer from the Minister. I’m not surprised; there were lots of comments for him to respond to. But I did want to know, I did want to get an update on the efforts to establish child and family service committees. I know the department worked very hard on it over the last two years or so and I know they were struggling to get any kind of uptake from communities. I would like to know from the Minister, do we still have somebody that’s working on establishing those committees or is it something that has fallen by the wayside and maybe try a different tack at a different time. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Ms. Bisaro. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. This was an issue that came up in the 16th Assembly and I think additional money was put in so that it established committees throughout the Northwest Territories. I know the department has been eager to establish these starting late in the 16th Assembly and certainly into the beginning of the 17th Assembly, but at the end of the day we don’t have any and there seems to be very little interest or uptake at the community level.

In principle, by intent, the reason these committees were put into the act is absolutely sound, but there’s obviously a disconnect somewhere in our inability to convince or encourage people to be involved. We have heard from some of the communities what some of the barriers are. Chief, council members and community members are
concerned about the financial legal requirements that communities may have to undertake. Many people are related in smaller communities and potential conflicts of interest exist. We have continual turnover in electoral leadership impacting communities’ priority areas and investments, limited personal and community knowledge and understanding of the current child and family services system. People are nervous and that seems to be the feedback that we’re getting.

I think people believe in the intent but don’t necessarily believe in the structure. I think it’s time that all of us sat down and had a conversation about how do we get back to the intent – maybe the model we’ve chosen is not appropriate – and how do we get back to where we wanted to be, which is that communities have involvement in ensuring that children from their communities stay in their communities as far as is reasonable and safe to do so. Maybe we should start looking at interagency committees as one option.

I think it’s time that we need to rethink this particular structure that we’ve created by legislation because it does not seem to be meeting the need, although the intent is sound. I’d like to get back to the intent and find a new model that works.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. I’d just like to advise witnesses if they could just tighten up their responses just a little bit. Thank you. Ms. Bisaro.

MS. BISARO: Thanks, Mr. Chair. I want to thank the Minister for that open response. I was asking because that’s where I kind of thought we were. I think the Standing Committee on Social Programs would be quite open to trying to get together and figure out what will work, because we have to do something.

My other question has to do with the increase in contract services on this page. It’s about $6 million, $5.5 million. Could I get an explanation as to what increases in contracts we’re talking about? Thank you.

HON. GLEN ABERNETHY: I believe I mentioned these in my response to opening comments. Every year we come forward with significant supps for adult and children southern placements. In fact, this year again the Minister of Finance just tabled the supps and those supps include significant asks for actual costs related to adult and children placements. So we are asking for, in this budget, $2.8 million to be added to the budget for adult southern placements and $2.4 million for children southern placements. We recognize that the cost of southern placements is incredibly high and the director of social services has initiated a client-by-client audit so we could start digging into what are the needs of these people that are going south, if there’s a like contingent of individuals, is there an opportunity to find a way to repatriate them, a block of individuals with similar needs. A person-by-person audit is well over 100 files and it’s going to take a bit of time, but this is an expensive area and if we can find any way to repatriate some of those dollars and people, we’d be better off in doing that review.

In the mean… [Microphone turned off]

CHAIRMAN (Mr. Dolynny): Sorry, Mr. Abernethy. I’ll let you finish up for the record. I don’t think they caught you. Go ahead.

HON. GLEN ABERNETHY: I don’t remember what I said.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Abernethy. Moving on with questions on activity 8-31, I have Mr. Moses.

MR. MOSES: Thank you, Mr. Chair. I do have a few issues within the community programs here, but rather than get into back and forth questioning, I think what I’ll do is begin with reading in a motion regarding the child and family resources programs and services, please.

CHAIRMAN (Mr. Dolynny): Go ahead, Mr. Moses.

COMMITTEE MOTION 8-17(5):
CHILD AND FAMILY RESOURCE PROGRAMS AND SERVICES,
DEFEATED

MR. MOSES: Mr. Chair, I move that this committee recommends that the government allocate an additional $1.2 million to extend the child and family resource programs and services to at least six small communities in the 2014-15 fiscal year; and further, that the Department of Health and Social Services collaborate with the Department of Education, Culture and Employment to utilize school facilities for the child and family resource programs. Thank you, Mr. Chair.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Moses. Just give us a second and we’ll circulate that motion.

Committee, the motion is in order. To the motion.

MR. MOSES: Thank you, Mr. Chair. The committee recommends this amount of money specifically for child and family resource programs and services to be rolled out in at least six small communities, building on the success of the pilots in Tulita and Ndilo. Members favour these programs and services because it will provide meaningful support to at-risk families. We also strongly believe that the Department of Health should work with the Department of ECE.

Furthermore, as mentioned earlier, the Minister did table a good report earlier this week and I just want to refer to some statistics that were brought out of that, one of them being percentage of children
receiving services in their home community under the Child and Family Services Act. They set a baseline for 80 percent and they did a lot better than that, they had 87.5 percent, which is great, but looking at those numbers it also tells me that we're putting more stress and more pressure and more workload on our social service workers and those that provide similar work.

Just below that they talk about the percentage of children receiving services in their home or with a relative under the Child and Family Services Act, and that number is 59 percent. I know we all come from small communities that we talk about, and we see this firsthand where grandparents could be in the statistics where we're putting stress on grandparents who are taking care of their grandchildren, or siblings or aunts and uncles who take care of children on behalf of families who can't, that the number of communities with a child and family services committee initiated.

In 2012-13 the department set a target for six. The actual numbers that they had were zero, and the Minister alluded to that earlier. The number of foster families in the NWT that comes from this report is 132, and we do know that there is a shortage of foster families in the Northwest Territories. As a result, the committee does recommend that this money goes towards programs and services that would affect the child and family resources in the communities.

I just want to make note, as well, that come March, I believe March 5th it is, the Government of the Northwest Territories and the department are going to receive a report back from the Office of the Auditor General specifically on the Child and Family Services Act and it's going to have a lot of recommendations, it's going to have a lot of concerns that were brought up that were audited. I believe this committee wants to take an approach in addressing some of these concerns and how they can be addressed sooner than later. Although we don't have the Auditor General's report in front of us with any of the actions that need to be taking place, committee recognizes that there's going to be some dollars that are needed to address these concerns and try to deal with it in a fashion where we can address it at a sooner date.

Mr. Chair, that's all the comments I have for this, but I believe there is some strong content in there. Speaking with some of the social workers back home and throughout the Beaufort-Delta and Sahtu regions, I do know there is a need for added resources to address some of the needs with child and family resources that we have in the communities and, in some cases, lack.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Moses. To the motion. Ms. Bisaro.

MS. BISARO: Thanks, Mr. Chair. I just want to highlight the second part of the motion that encourages the Department of Health and Social Services to work with the Department of Education, Culture and Employment to house child and family resource centres in the schools.

Interestingly enough, some Members attended a presentation the other morning by a couple of early childhood development experts and one of the points that they raised was that putting early childhood development programs in a school encourages the family to accept school as a good place to be, encourages kids to accept school as a good place to be. They learn from an early age that the school is a good place, that it's a safe place, that it's a fun place, and it may help us in terms of our attendance.

That's the second part of the motion that wasn't referenced by Mr. Moses, and I think it's really important that this can be a really valid program particularly for our small communities, any community, but the motion references small communities in particular. I think the initial results from the pilot programs from this year for the child and family resource centres was that they were pretty positive, so committee felt very strongly that this is something that needs to be expanded, and I think it fits in with the goals of the Assembly in terms of early childhood and also prevention and promotion.

CHAIRMAN (Mr. Dolynny): Thank you, Ms. Bisaro. To the motion. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair, and thanks to committee for putting forward this motion. The particular pilots that were mentioned are actually pilots that are being run by the Department of Education, Culture and Employment, but recognizing that there's a lot of similarity in some of the things that we're trying to do with respect to early childhood development and the communities. We do have our Healthy Family programs, and we do have those currently in 15 communities throughout the Northwest Territories, and some of those communities are providing supports to other communities. We have put money in the budget this year to enhance and provide some stabilization funding for those Healthy Family programs so that we can continue to be effective, but until we finish those pilots and we have an idea of what those programs are doing, it might be premature to identify a $1.2 million ask in this particular area. Also, we have a fiscal strategy and we do have some limited funds moving forward and we have to find $30 million over the next two budgets in order to continue to meet our fiscal framework, so there are certainly some challenges.

With respect to the second part of the budget, absolutely, the two departments need to continue to work together, and we will continue to work together. There is clearly some overlap around the
early childhood development and we are partnering significantly in moving forward on the ECD.

We will not be supporting this motion at this time even though we will continue to do the second part of this motion.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Aberethy. To the motion.

AN HON. MEMBER: Question.

CHAIRMAN (Mr. Dolynny): Question has been called. The motion is defeated.

---Defeated

Committee, we're on 8-31. I can go back to Mr. Moses.

MR. MOSES: Thank you, Mr. Chair. As I said, there are some concerns that I have with this section of the budget and rather than get into detail I would like to just come right out and I'd just like to read another motion into the House.

COMMITTEE MOTION 9-17(5):
MENTAL HEALTH AND ADDICTIONS
ACTION PLAN,
DEFEATED

I move that this committee recommends an additional allocation in 2014-2015 fiscal year of $2 million to address the priorities in the Mental Health and Addictions Action Plan including, but not limited to, detoxification facilities, after-care and enhanced mental health services.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Moses. We're just going to circulate that motion.

Committee, the motion is in order. To the motion. Mr. Moses.

MR. MOSES: Thank you, Mr. Chairman. The committee is in strong support of the Mental Health and Addictions Action Plan; however, Members do feel that the portion allocated to this initiative and recommended the additional allocation of funding for the priorities in the action plan, and as I mentioned earlier, including but not limited to the detox facilities, after-care and enhanced mental health services. Also, to gain the judiciary's confidence in the wellness courts, enhancements to existing mental health services will likely be required. Furthermore, this has been a big initiative of mine since joining the Assembly, and I've worked on it down to the point where we're looking at addressing the Mental Health Act.

In the updated action plan for the addictions on mental health, 2014-2016, this committee, once again, is in strong support. We just want to make sure that there are sufficient funds available to address some of the needs of our mental health issues that we see in our communities across the Northwest Territories, and that is strongly supported by me and some of the committee members.

At this time, I would also just like to thank Members here for listening to recommendations made from the Standing Committee on Social Programs. We've been working on this ever since the beginning of the 17th Legislative Assembly, and we've always looked at supporting initiatives and supporting work that government has done through motions and through questions and how we deal with things in the House. I'd just like to thank the Members here today for at least acknowledging that committee is making recommendations for allocations within this budget to some of our biggest issues across the Northwest Territories. I just want to say thank you to all the Members for allowing us to bring these up in the House today. I'm not sure if any other Members will speak to the motion.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Moses. To the motion. I have Mr. Yakeleya.

MR. YAKELEYA: Thank you, Mr. Chair. I do want to thank Mr. Moses for bringing this motion up, and I also wanted to say to government, you have come a long way in the different areas of how we deal with mental health, addictions, drugs and alcohol and moving away from the residential treatment programs and now to listening to people on-the-land treatment programs, mobile treatment and just new initiatives that we're taking on. It's been a while since we've had this type of new shift in the making of healthy communities as to our priorities and goals. This motion here speaks to support this. We're looking for money inside.

Last year the Northwest Territories Liquor Commission made $24 million profit off of liquor in the Northwest Territories. They bought about $47 million, $45 million worth of booze, and after all the expenses they have a profit sitting there of $24 million. We have, through Bill 24, had some quite intensive, emotional, strong statements of people in the Sahtu just on the effects of alcohol and the things that they needed to do in the community to deal with the evils of alcohol abuse. The motion speaks to maybe looking at the Liquor Commission. I know there's money that goes into general revenue and then goes to all the departments. We passed a motion last year to have a percentage of the profits from the liquor sales go directly to a program in the communities to fight alcohol abuse, and that motion hasn't even been acknowledged or been responded to looking at what we want on this side here. I would say that if the government could look at finding the additional dollars using the Liquor Revolving Fund as a means to say yes, we could look at something like this, other than to say, well, it goes into general revenues and it cuts right across the whole board.

Let's do something symbolic, something that says we're buying $47 million of liquor. We could at least put some money, 10 percent of that percentage directly into the communities and in support of
community members. Let’s change some things. Let’s do things differently. Otherwise, you’re going to hear we had money, $86 million. This is a specific area of profit we want to go into even though alcohol touches many other areas. I would strongly urge Cabinet to think about this and to look at this and really consider when you’re looking at this motion, give us a good reason why you’re going to be voting against this and not supporting this motion. If you’re not going to support this, give us a good reason as to why you’re not supporting this motion of $2 million. We buy $47 million worth of booze for the Northwest Territories people. We make a profit of $24 million. At least a percentage should go back to the communities. We have heard from the Sahtu, five communities, through Social Programs. We know of the pain they spoke of and the alcohol abuse and addiction. I do applaud them on the new direction we’re going in, but we need to ensure that this type of funding gets into the communities. We’ve lost enough young ones and enough people through this addiction and we’re looking for something challenging.

I want to thank Mr. Moses for bringing this up and for the Members for listening to our people in the Sahtu on the recommendations we had on Bill 24, which is outside the legislation we’re going through. I want to leave it at that, Mr. Chair.

**CHAIRMAN (Mr. Dolynny):** Thank you, Mr. Yakeleya. Mr. Menicoche.

**MR. MENICOCHE:** Thank you very much, Mr. Chair. Regretfully, I can’t support this motion on the addition to our budget. We all heard on this side of the House how we’ll be faced with up to a $30 million reduction in our budget and we have to work hard after we pass this budget to do it.

I’m concerned because these reductions are coming and we want to add more money to the budget. I would like to say that sometimes the MLAs’ jobs are not about what we’re getting or what we’re adding, it’s what we hang on to. That exercise is coming, Mr. Chair.

For example, the reduction of half a position, point five of a position, or the reduction of programming dollars as small as $10,000 has serious effects in small and remote communities. Those resources are very, very hard to come by. Even though they’re small, they have a big impact in the small communities and I represent six of them.

Members spoke about the lack of strategy, but there is a new Aboriginal Wellness Strategy in office that is going to be established in this upcoming budget.

With that alone, I can’t support any addition to the budget knowing we have cutbacks coming up. I will be voting against the motion. Thank you.

**CHAIRMAN (Mr. Dolynny):** Thank you, Mr. Yakeleya. Ms. Bisaro.

**MS. BISARO:** Thank you, Mr. Chair. I just want to suggest that the motion can be read in a different manner than what Mr. Menicoche has interpreted it as. It recommends an additional allocation in the fiscal year of $2 million; however, it does not say it has to be new money. The committee is simply suggesting that we need to put a larger focus on mental health and addictions priorities and on actions that address mental health and addictions. It doesn’t necessarily have to be new money. There are lots of things that the department wants to do, but if the department so chooses, they can take money from within and allocate more money to mental health and addictions than what is already established in the 2014-15 budget. Thank you.

**CHAIRMAN (Mr. Dolynny):** Thank you, Ms. Bisaro. Minister Abernethy.

**HON. GLEN ABERNETHY:** Thank you, Mr. Chair. I’ll start off with the financial bit. We do have a $30 million reduction exercise coming in front of us the next couple of years to make up some of the financial shortfalls that we are aware of. We can never ignore that there are those challenges in front of us.

Having said that, this government, with support of committee, has done a significant amount of work on mental health and addictions. We have options in front of our residents today that did not exist previously. A resident who requires detox can go to one of our hospitals and receive detox. Withdrawal management is an issue but we try to find ways to address that. Right now, if somebody needs a medical detox, they can go to one of our hospitals and get that detox.

We have the wellness courts. It’s in the Justice budget. The integrated case management around putting in wellness courts is in that budget. We are moving forward with wellness courts and we have support from the judiciary who are actively involved and engaged. This program will need to be grown over time as we enhance and expand the services that are available, but we have to start somewhere and we have to manage that growth as opposed to jump in without being ready. It will build over time.

In 2013-14 we put in an additional $1.145 million into mental health and addictions for youth addictions, prevention and promotion, service promotion, some case management, some pre-feasibility work for on-the-land programs, youth on-the-land programs. We are running free pilots this year. Development of youth and detox models, which are underway; Stanton Dalhousie psychiatry telehealth and stronger standards of quality assurance.

One of the Members said why not support, we need a good reason why Cabinet will not support this. The reason is we are investing a significant amount of money, but we could do better with the dollars that we have. We need to enhance our programs
and redesign our programs so they meet the needs of our residents. To that end, we have done things already that are making a big difference like streamlining a referral process. An individual now needs treatment in the Northwest Territories can go through a referral process that is 24 hours. We are doing more with less. In this case, more with the same. We can continue to find improvements in our system that will allow us to get maximum benefit for the dollars we have. Throwing dollars at it won’t necessarily solve the problem if we know what we’re trying to fix, and in the department we have lots of opportunity to enhance our programing without dollars by streamlining and rethinking how we do business.

In this budget we’re adding $900,000 for on-the-land programming, which is something new this government hasn’t done before. We are doing good work, and together with the Regular Members, we continue to do more good work.

So there are a number of reasons why throwing $2 million at a problem is not necessarily the best way to go when we already have $6 billion that we’re spending on programs and services for the Government of the Northwest Territories. It’s more important that we do better with the dollars we have to serve the needs of our residents.

Also, we’re engaging communities in way that we haven’t in the past. We have an Aboriginal health and community wellness division that has worked with every community to develop community wellness plans where communities are leading in their wellness. Money is coming from the federal government through us to them so that they can take actions and initiatives. Every one of the communities has identified priorities for work that they want to do.

So there’s a lot happening. Will it be successful? Some of it will take years for sure to know whether it’s successful, but good things are happening and I think we are better positioned, recognizing our fiscal realities, to use the dollars we have and make sure we’re getting maximum benefit as opposed to piling new dollars on top and expecting that throwing money at the problem is going to solve the problem. Redesign, rethinking, working hard, that’s going to solve the problem in the long term. We won’t be supporting this motion.

The intent of the motion is not one anyone argues with. The need is one that we know there are still challenges, but we also have to live within our fiscal means. We are in a choice business. It is too easy for some Members to say if we choose, we can just move $2 million somewhere else in a budget that is fully subscribed to, in a process that has been before this House for seven months when we know in cases where we have done that or are suggesting that. For example, even tapping into some of the surpluses that education bodies have, there are concerns being voiced that we shouldn’t be doing that. So we have a budget that’s fully subscribed to and I want to remind folks that we have to make choices and this is one of those choices. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Miltenberger. To the motion. Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. That’s, frankly, gobbledegook that this Cabinet has the power to move around money and reallocate it. We’ve asked a number of times for the Minister of Finance to give us clarity on where that’s possible from his perspective. So, yes, I think committee members are certainly well aligned with reasonableness with this proposal. They may not agree with it, but totally in line. Mahsi.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. To the motion.

SOME HON. MEMBERS: Question.

CHAIRMAN (Mr. Dolynny): Question has been called. The motion is defeated.

---Defeated

Committee we are in 8-31 and continuing on with questions on page 8-31, I have Mr. Blake.

MR. BLAKE: Finally, Mr. Chair, thank you. I have some questions for the Minister from a while back, but I just wanted to raise a concern from the communities that long-term care is a huge need in the communities of Aklavik, Fort McPherson and Tsiigehtchic. I realize that we do have a facility in Inuvik, but as I mentioned a number of times, it only holds a small amount of people, roughly 20 people at the most, and with over 350 people alone in my riding, not to mention Nunakput and the Sahtu – there are members that stay there from those regions – it’s quite clear that that facility can’t take all who need full-time care. As we move forward in this government, it’s time to put back those facilities into those communities and offer those services. Whether it’s a partnership with the communities to provide long-term care, I suggest that we need to move into that area and I’d like to hear what the Minister has to say. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Blake. Minister Abernethy.
HON. GLEN ABERNETHY: Thank you, Mr. Chair. Long-term care would be under territorial services as opposed to community services, but I understand the Member's point. Obviously, with an aging population, this is something that we all need to be conscious and aware of, especially how that’s going to roll out and affect communities in the long-term.

We have the continuing care report that was distributed to Members early this week highlighting where we are now and where we need to go. That’s going to help us inform our Aging in Place Strategy. So, as we move forward with this Aging in Place Strategy we’ll start to identify what we can do better, where to help individuals in their communities, in their regions and within the Territories as they age.

I do know that the NWT Housing Corp has, in their plan, some independent living facilities for elders throughout the Northwest Territories and they’re redoing the Joe Greenland in Aklavik. I think there might be another one in the region, but you really need to confirm that with the Minister of the NWT Housing Corp.

So I hear you, we are doing work, we will be able to have informed discussions once we get this report out and start having discussions around the Aging in Place to make sure that your residents have the services they need in the regions, in the communities where they’re needed. Thank you.

MR. BLAKE: I know last year we had a commitment that the Minister would work with NWT Housing to provide services, whether it’s someone coming in during the day to work with the elders to do exercising programs or make sure that they all have meals. Is the Minister going to follow through? Thank you.

HON. GLEN ABERNETHY: The two departments have been working together. The new facilities have been designed so there’s a day program room area where different programs can be delivered in the communities where those independent or assisted living homes are going to be located. As those programs roll out, authorities will work with the communities to make sure that our staff are able to provide the services and if it means increased staff, we’ll certainly have to have those discussions at that time.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Abernethy. Committee, we’re on 8-31 and continuing with questions, I have Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. I wanted to follow up a little bit on the mental health and addictions, obviously a big priority for us and I know it’s a priority for the Minister. Specifically with respect to the wellness court efforts, I think I’ve said before that I think this is possibly the best single effort or opportunity we have to make progress in the mental health areas. So I’m wondering if the Minister can point out what expenditures here, what dollars here are going towards ensuring the mental health services are there for the mental health court time.

I might point out that we’ve been dabbling and dithering in this area for years while every other jurisdiction in Canada has moved forward with this. I think it was years ago the Minister visited the Yukon and now we’re talking about some tiny little pilot project that just is underfunded and clearly not meeting the opportunity that we have here. So I’d appreciate at least knowing what modest dollars the Minister is committing on this page to the wellness court preparations. Mahsi.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. I and the Department of Health and Social Services are clearly supporters of the concept of a wellness court and Health and Social Services has been an active supporter of the concept of a wellness court and it remains a priority as we move forward, and it’s also important to helping address things like the addictions and mental health in the Northwest Territories. The role of the health and social services system is to ensure that mental health services are available. With respect to the wellness court, which will give confidence to the judiciary in the effectiveness of a wellness court and I do know that the judiciary are actively involved in the wellness court as we move forward.

The Member keeps asking what money have we put in, what money have we put into this. I think a 0.5 PY, but that really doesn’t do what the department is providing around this service as Justice. We do have social workers who will be involved, we do have other professionals who will be involved, and it doesn’t necessarily require creating a whole bunch of new positions or dumping a whole bunch of money. The biggest part of the budget for the wellness court is actually coming from the Department of Justice, but Health and Social Services will continue to be an active partner utilizing the resources that we have today. Once again, it’s about doing better with what we have and making sure that the services we’re providing meet the needs, including the needs of a wellness court.

MR. BROMLEY: For years we’ve heard how we have to bump up our mental health services and resources in order to get that wellness court and now we’re saying no, no, it’s all up to Justice to come up with the bucks for it. It just makes sense to me that the major part needs to be mental health services. So I guess I heard 0.5, a half a person here is what the Minister is committing to this wellness court business at some point in time perhaps. I mean, this is shameful after years of
discussions and the passing of motions in this House. When will this mental health and wellness court actually happen on a pilot basis, and can the Minister describe the role Health and Social Services will play in it?

HON. GLEN ABERNETHY: I appreciate the Member’s passion for wellness courts and it’s something that I obviously support as well. But at the end of the day, a wellness court is dependent on the support of the judiciary, so we obviously have to make sure that the judiciary are comfortable with the programs and services that we provide.

There is significant money going into the wellness court in ’14-15. Eight hundred seven thousand dollars has been identified within the Department of Justice budget. It is in the Department of Justice budget but it is a collaborative effort and it’s taking the activities and the work of many departments to make this a reality, but the dollars did need to be located somewhere. So I don’t necessarily agree with the Member’s assessment of the situation that this department isn’t contributing, because we do have our people on the ground participating and meeting with the committee that’s put together.

I do know that the Department of Justice will be approaching the Members of the House to provide a comprehensive presentation on the wellness court and the services that are available under that, and it may be beneficial to maybe go to Mr. Ramsay to have him talk a little bit about the wellness court and what’s happening and the steps we’re taking. But we are making progress and we will see a wellness court in this fiscal year, providing that the judiciary does support.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. We’ll go to Minister Ramsay.

HON. DAVID RAMSAY: Thank you, Mr. Chairman. We’re moving forward with the plans for wellness court. We will be in front of committee for a detailed presentation on Monday, February 24th. So on Monday we’ll be in front of the Standing Committee on Social Programs. I look forward to Members’ input on our plans thus far. Our anticipation is to have the wellness court up and running this year. It will happen. We’ve got some funding to see that happen and we want to get Members’ feedback on Monday on our progress to date. Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Ramsay. Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. Thanks for that update and I’ll look forward to approving those dollars when we get to Justice.

We’ve always heard how this has to be an integrated program between Health and Social Services and Justice, so I would hope and assume that both Ministers will be at that briefing on the 24th. That’s departing from the budget here. I’ll just throw that out as a comment. Thank you. That’s all I have, Mr. Chair.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. We’ll treat that as a comment. Thank you. Page 8-31, activity summary, community programs, operations expenditure summary, $99.116 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Pages 8-32 and 8-33 are combined. Ms. Bisaro.

MS. BISARO: Thanks, Mr. Chair. I just have a question here on 8-33 under family violence funding. The Family Violence Coalition a while ago put forward 19 recommendations. I know the Minister has said that the Health department is working on them.

Is the Family Violence Coalition money in this budget or is it in another department? I can never remember quite where it is. If it is in here, is there a focus on the 19 recommendations from the Family Violence Coalition? Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Ms. Bisaro. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. The dollars identified here are the dollars that are provided to the authorities to provide services in regions and communities.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Committee, we are on 8-32 and 8-33. Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. I see a number of supports here in the area of child and family services. I know the Minister is firm in support of the principle of keeping children in the homes with their families to the extent possible within the obvious guidelines of safety and whatnot. Can he tell me what progress we’re making? What proportion of children are we putting in care these days outside the homes versus figuring out a way to keep them in the homes? Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. The dollars identified here are the dollars that are provided to the authorities to provide services in regions and communities.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Committee, we are on 8-32 and 8-33. Mr. Bromley.

MR. BROMLEY: Thank you, Mr. Chair. I see a number of supports here in the area of child and family services. I know the Minister is firm in support of the principle of keeping children in the homes with their families to the extent possible within the obvious guidelines of safety and whatnot. Can he tell me what progress we’re making? What proportion of children are we putting in care these days outside the homes versus figuring out a way to keep them in the homes? Thank you.

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Bromley. Minister Abernethy.

HON. GLEN ABERNETHY: Mr. Chair, there are some statistics in the annual report. On page 29 it actually refers to the percentage of children receiving services in their home community under the Child and Family Services Act, and the baseline on that is 80 percent. For 2012-13 we had set a target of 83 percent, but in that same fiscal year we actually succeeded to hit levels of 87.5 percent. That information is in the annual report.

MR. BROMLEY: That sounds like good progress to me. I’ll try to score a few minutes to look at that report.
Just on page 33, the non-government organizations residential care programs and services related to addictions, mental health, disabilities and chronic illnesses, quite a decline over the last few years. Does the Minister know why this is happening? I noticed quite a difference between the main estimates and the revised estimate last year or this fiscal year. Is there not an uptake from our community organizations here? If that’s the case, $2.9 million approved, $835,000 in expenditures. This is quite a drop and I’m wondering if there is less uptake because of capacity. Is that something the Minister is looking into or would look into to try and give these organizations the support they need to deliver these sorts of programs? Thank you.

HON. GLEN ABERNETHY: One of the main reasons for the reduction here is the dollars from here, some of these dollars were the dollars that went to Nats’ejee K’eh and we’re not providing that in the same way. Those dollars have now been reverted into the department. We’re using them to fund the four facilities, or portions of the four facilities that we’re contracting with in the South plus the mobile treatment program that we’re exploring with Poundmaker’s and some of the other programs related to mental health and addictions.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Committee, we’re on 8-32 and 8-33, activity summary, community programs, grants and contributions, $73.704 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Page 8-34, information item, community programs, active positions. Any questions?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Page 8-35, information item, details of funding allocated to health and social service authorities. Any questions?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Page 8-36, information item, lease commitments – infrastructure. Any questions?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Page 8-37, information item, work performed on behalf of others. Actually, committee, we’re going to 8-37, 8-38 and 8-39 collectively. Actually, 8-40, 8-41, so 8-37 to 8-41. Any questions? Mr. Yakeleya.

MR. YAKELEYA: I just wanted to ask the Minister, on page 8-40 there with the diabetes. I know we did have money in 2013-14, and working in the small communities, I know the funding ends on March 31, 2014, and that in the information health book that I’m looking at, just for the seniors information handbook there, that there is approximately 200 new cases of diabetes diagnosed each year in the Northwest Territories. About one in five people age 60 and over have diabetes. Now we don’t have any money associated. What are we doing to deal with this factual information, if it’s factual information that 200 new cases of diabetes are diagnosed each year? We know what it costs our health care system to treat diabetes and yet we still don’t have any money scheduled for it. Is there a plan to go to Ottawa to ask for money with Health Canada so that we can deal with these 200 cases of diabetes that are diagnosed each year?

CHAIRMAN (Mr. Dolynny): Thank you, Mr. Yakeleya. Minister Abernethy.

HON. GLEN ABERNETHY: Thank you, Mr. Chair. These are federal dollars that have clearly sunsetting, but it doesn’t mean that we’re not doing anything with respect to diabetes education, health promotion. We are working on a chronic disease management study to help us have better information on how to educate and keep people healthy in the Northwest Territories. We have diabetes educators. We have nutritionists in the Northwest Territories. We’ve got different programs that are being delivered by different staff throughout the Northwest Territories as far as healthy eating, exercise, diet. There are a significant number of things that we are doing. We’re always looking for opportunities to enhance and improve the way we’re doing business to get better results.
This is another one of those areas where if we can work together as a system rather than working in silos we can probably have better results across the Territories by providing back fill when people do leave. For instance, if we had a diabetes nurse educator or something in one authority and she happened to be sick, that service wouldn’t be delivered there. If we were in a territorial system it would be really easy to make sure that coverage could continue. A lot of work is happening on this, and I would be happy to provide the Member with a bit of a breakdown of where those services are and the types of things we are doing, and any ideas he has or his communities might have to help enhance that, we’re certainly listening.

MR. YAKELEYA: When you see a statement like this in one of our government’s official documents, that 200 new cases of diabetes are diagnosed each year, I certainly look forward to the Minister’s plan of action how to deal with the diabetes that is diagnosed each year and what’s the case that we have dealt so far, because you don’t see anything in here. I have to look for it. That’s scary in our small communities. If I can get some information, documents, what it costs our system each year to treat a person with diabetes.

What are we doing in the small communities to screen for diabetes? Some people just walk in sometimes. What are we doing with the stores to help with people who have diabetes in their shopping? I know in Norman Wells they have a strong diabetes program. They used to have one. We need to look at this seriously. Seriously. I know the federal dollars have lapsed, and you are correct, Mr. Minister, we are doing things. I just need to know what the diabetic program is based on this year and how we’re doing this year. That’s all I want to know.

HON. GLEN ABERNETHY: This process we go through with all these pages, there is certainly a lot of information but it certainly can’t break down for the specific detail for each condition in the Northwest Territories. We are, as the Member said, doing a significant amount and I’ve committed to doing a bit of a walk-through of this to try to highlight the different areas, so I can provide the Member and committee with a bit of a highlight on some of the things we are doing overall. The Member is right; this is certainly an area that’s affecting us adversely across the territory.

CHAIRMAN (Mr. Dolynny): Thank you, Minister Abernethy. Committee, we have been dealing with 8-37 to 8-41 inclusively. Information item, work performed on behalf of others.

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. I am going to ask you to return to page 8-7, operations expenditure summary for Department of Health. Department summary, operations expenditure summary, $391.929 million. Does committee agree?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. Does committee agree that we’ve considered and concluded the Department of Health and Social Services as a whole?

SOME HON. MEMBERS: Agreed.

CHAIRMAN (Mr. Dolynny): Thank you, committee. I’d like to thank our guests, Ms. DeLancey and Ms. Mathison, for joining us today. Sergeant-at-Arms, please escort our witnesses out of the Chamber. Thanks to the Minister.

I will ask Ms. Bisaro, what is the wish of committee?

MS. BISARO: I move that we report progress. Thank you, Mr. Chair.

---Carried

CHAIRMAN (Mr. Dolynny): I will now rise and report progress. Thank you, committee.

Report of Committee of the Whole

MR. SPEAKER: Can I have the report of Committee of the Whole, Mr. Dolynny.

MR. DOLYNNY: Thank you, Mr. Speaker. Your committee has been considering Tabled Document 22-17(5), Northwest Territories Main Estimates 2014-2015, 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: Thank you, Mr. Dolynny. Do I have a seconder? Mr. Miltenberger.

---Carried

Item 22, third reading of bills. Madam Clerk, orders of the day.

Orders of the Day

CLERK OF THE HOUSE (Ms. Langlois): Orders of the day for Monday, February 24, 2014, at 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. Reports 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
18. First Reading of Bills
   - Bill 11, Petroleum Resources Act
19. Second Reading of Bills
   - Bill 10, Northwest Territories Lands Act
20. Consideration in Committee of the Whole of Bills and Other Matters
   - Tabled Document 4-17(5), Northwest Territories Electoral Boundaries Commission 2013 Final Report
   - Bill 5, An Act to Amend the Motor Vehicles Act
21. Report of Committee of the Whole
22. Third Reading of Bills
23. Orders of the Day

MR. SPEAKER: Thank you, Madam Clerk. Accordingly, this House stands adjourned until Monday, February 24th, at 1:30 p.m.

---ADJOURNMENT

The House adjourned at 4:10 p.m.