



Nunavut Canada

LEGISLATIVE ASSEMBLY OF NUNAVUT

2nd Session

5th Assembly

HANSARD

Official Report

DAY 75

Thursday, February 20, 2020

Pages 4701 – 4761

Iqaluit

Speaker: The Honourable Simeon Mikkungwak, M.L.A.

Legislative Assembly of Nunavut

Speaker

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(Quttiktuq)

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Table of Contents

Opening Prayer.....	4701
Ministers' Statements	4701
Members' Statements	4705
Oral Questions.....	4710
Notices of Motions for First Reading of Bills	4726
Motions.....	4727
Consideration in Committee of the Whole of Bills and Other Matters	4727
Report of the Committee of the Whole	4760
Orders of the Day	4761

A.

Daily References

Thursday, February 20, 2020.....4701

B.

Ministers' Statements

356 – 5(2): Nunavut and Protected Areas (Savikataaq)4701

357 – 5(2): Coronavirus (Hickes).....4702

358 – 5(2): Educational Leadership Certificate Completed in Inuktitut (Joanasie)4703

359 – 5(2): Low-barrier Shelter in Iqaluit (Sheutiapik)4704

360 – 5(2): Task Force on Transportation in Northern and Remote Regions (Akeeagok)4705

C.

Members' Statements

557 – 5(2): Addressing Violence in Our Communities (Qamaniq).....4705

558 – 5(2): Kivalliq Hydro-Fibre Link (Main).....4706

559 – 5(2): Marine Protection (Towtongie)4707

560 – 5(2): Staff Housing Policies (Lightstone).....4707

561 – 5(2): Constituency Office Relocation (Ehaloak)4708

562 – 5(2): The Edmonton Eskimos (Kusugak).....4708

563 – 5(2): Recognition of Aksakjuk Ningiuk (Akeeagok)4709

D.

Oral Questions

761 – 5(2): Sanikiluaq Water Supply (Rumbolt).....4710

762 – 5(2): Unlicensed Lotteries (Angnakak)4711

763 – 5(2): Addressing Violence in Our Communities (Qamaniq).....4713

764 – 5(2): Community Name Change (Kaermerk).....4714

765 – 5(2): Kivalliq Hydro-Fibre Link (Main).....	4716
766 – 5(2): Competition Update on Six Positions for Qikiqtani General Hospital (Lightstone)	4717
767 – 5(2): Local Housing Organization Managers (Quassa).....	4719
768 – 5(2): Lead Floats in Water Tanks (Qirngnuq).....	4720
769 – 5(2): Marine Protection (Towtongie)	4721
770 – 5(2): Fuel Delivery Contracts (Keyootak).....	4724
771 – 5(2): Pangnirtung Airport (Nakashuk)	4725

E.

Motions

063 – 5(2): Extended Sitting Hours and Days (Rumbolt)	4727
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F.

Bills

Bill 40 – Supplementary Appropriation (Operations & Maintenance) Act, No. 3, 2019-2020 – Notice.....	4726
Bill 42 – An Act to Amend the Cannabis Act – Notice	4727
Bill 41 – An Act to Amend the Guardianship and Trusteeship Act – Notice	4727
Bill 39 – Appropriation (Operations & Maintenance) Act, 2020-2021 – Health – Consideration in Committee.....	4728

**Iqaluit, Nunavut
Thursday, February 20, 2020**

Members Present:

Hon. David Akeeagok, Ms. Pat Angnakak, Hon. Jeannie Ehaloak, Hon. George Hickes, Hon. David Joanasié, Mr. Joëlie Kaerner, Ms. Mila Kamingoak, Mr. Pauloosie Keyootak, Hon. Lorne Kusugak, Mr. Adam Lightstone, Mr. John Main, Hon. Simeon Mikkungwak, Ms. Margaret Nakashuk, Hon. Patterk Netser, Mr. David Qamaniq, Mr. Emiliano Qirngnuq, Mr. Paul Quassa, Mr. Allan Rumbolt, Hon. Joe Savikataaq, Hon. Elisapee Sheutiapik, Ms. Cathy Towtongie.

>> *House commenced at 13:30*

Item 1: Opening Prayer

Speaker (Hon. Simeon Mikkungwak) (interpretation): Before we proceed, I ask Member Quassa to say the opening prayer, please.

>> *Prayer*

Speaker (interpretation): Thank you very much, Member Quassa. To the people of Baker Lake and Nunavut who are following the proceedings, welcome to the Legislative Assembly's sitting. Also, those who are listening to the radio broadcast, please feel welcome as the Legislative Assembly proceeds.

I again remind Nunavummiut that when the Legislative Assembly is in session, you are always welcome here in the Legislative Assembly to observe from the visitors' gallery. The seats right behind the members' seats are designated for our elders in Nunavut, but all Nunavummiut are always welcome

when the members are in session.

Also, before we proceed, I wish to advise members that the Member for Gjoa Haven will be absent from the House today due to personal reasons.

Continuing on. Ministers' Statements. Hon. Premier of Nunavut, Hon. Savikataaq.

Item 2: Ministers' Statements**Minister's Statement 356 – 5(2):
Nunavut and Protected Areas**

Hon. Joe Savikataaq (interpretation): Thank you, Mr. Speaker. To the people of Arviat, I say "good day" to you.

(interpretation ends) Mr. Speaker, as my fellow members are aware, the Government of Canada has committed to designating 10 percent of Canada's marine and coastal areas as protected areas by 2020, a commitment that has been exceeded in large part because of Nunavut's Tallurutiup Imanga National Marine Conservation Area and Tuvaijuittuq Marine Protected Area.

The Government of Canada is currently establishing new targets for the 2020-30 period. Knowing the extent of Nunavut's coastline and the limited opportunities to create new marine conservation areas elsewhere in Canada, we are concerned that the federal government may once again turn to Nunavut to meet their goals.

Mr. Speaker, members are also aware that Nunavut's Devolution Agreement in Principle was signed on August 15, 2019. It sets out a timeline for a final agreement by the end of 2022, with the

transfer of authorities by 2025. There is also a commitment to start negotiations for an offshore oil and gas management agreement for Nunavut. The creation of any new conservation and protected areas in Nunavut would have a significant impact on our ability to manage our lands and resources and carry out negotiations for decision-making, leading to potentially very serious consequences.

Mr. Speaker, while other provinces and territories in Canada have protected-areas strategies, until devolution is finalized, Nunavut does not. These strategies provide context and direction for resource exploration and development. We believe that new protected areas in Nunavut should only be considered once devolution of jurisdiction over lands and waters to the Government of Nunavut is completed, and an appropriate strategy can be drafted with complete information and proper consultation with Nunavummiut.

Mr. Speaker, as such, until the conclusion of the final devolution negotiations and an offshore oil and gas agreement, the GN cannot support future marine protected areas or other federal conservation and protected areas within our territory. It is vital that we set the foundation for future generations and ensure that we do not inadvertently miss critical, sustainable economic opportunities for our communities.

Our government is committed to working with Nunavut Tunngavik Incorporated, our regional Inuit associations, and the federal government in a way that is collaborative and respectful of our mutual interests and concerns. We must all look to create

long-term opportunities and foster responsible development to benefit Nunavut well into the future. Thank you, Mr. Speaker.

>> *Applause*

Speaker (interpretation): Ministers' Statements. Hon. Minister of Health, Minister Hicke.

Minister's Statement 357 – 5(2): Coronavirus

Hon. George Hicke: Thank you, Mr. Speaker. I would like to take this opportunity to follow up on the questions from the member from Aggu the other day.

Mr. Speaker, since January there has been significant coverage and concern over the novel coronavirus that has been identified from Wuhan, China. In response to the spread of the virus, the World Health Organization has declared a public health emergency of international concern.

Despite this troubling news, I would like to assure Nunavummiut that federal and territorial staff are working to ensure that the risk to individuals remains as low as possible. The country has multiple systems activated and in place to prepare for, prevent, detect, and respond to any potential instances of novel coronavirus. This includes standard border measures in place to mitigate the potential risk of introduction and spread of communicable disease, and additional screening measures implemented in a number of international airports throughout the country. The Government of Canada maintains continual preparedness for public health

emergencies.

Mr. Speaker and members, here in Nunavut the Department of Health is collaborating closely with the Public Health Agency of Canada and with other provinces and territories to share information, coordinate response efforts, and support informed vigilance as the situation evolves. Mr. Speaker and members, a special advisory committee of Canada's chief medical officers of health and senior public health officials meets regularly to focus on the coordination of federal, provincial and territorial preparedness and response from Canada's health system. A travel advisory is also in effect, and it is recommended that all Canadians avoid non-essential travel to China.

At this point there are no confirmed cases of novel coronavirus in Nunavut. Even so, Nunavummiut are encouraged to do their part to stay healthy and prevent the spread of any kind of infection by washing their hands frequently, covering their mouths with their sleeves when they cough or sneeze, and staying home to rest when they are feeling unwell.

Health is actively monitoring and assessing this evolving situation and working with the Government of Canada to ensure that we are appropriately prepared. As always, preserving and promoting the well-being of Nunavummiut remains the department's highest priority. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Ministers' Statements.

Minister of Education, Hon. Joanasia.

**Minister's Statement 358 – 5(2):
Educational Leadership
Certificate Completed in Inuktitut**

Hon. David Joanasia (interpretation): Thank you, Mr. Speaker. Good day, Nunavummiut and members.

Mr. Speaker, fellow members, providing high-quality education in Nunavut goes beyond just the students in our classrooms. This is why the Department of Education is committed to providing professional development for Nunavut's current and aspiring school leaders that will enhance their instructional and leadership skills.

This week from February 15 to 21, more than 60 educators from across the territory will be in Iqaluit to attend courses as part of the Certificate in Educational Leadership in Nunavut program.

Mr. Speaker, this leadership certificate program has been offered for many years. What is significant about this week's training is that it is the first time that all five of the required courses will have been delivered at least once in Inuktitut. This means that after this week there will be educators receiving their Certificate in Educational Leadership in Nunavut who have completed their courses entirely in Inuktitut. This morning I was able to go visit the educators who are here to attend the courses. I thank them while they are here. My deputy minister participated and it was good to speak with them.

(interpretation ends) Mr. Speaker, in partnership with the University of Prince

Edward Island, the Certificate in Educational Leadership in Nunavut is a university-accredited program that provides education leaders with the knowledge and skills to lead their schools by balancing leadership history and theory with practical skills.

This leadership certificate program provides our school teachers and educators with culturally-based, effective and responsive leadership skills that will guide our students and staff toward a promising future.
(interpretation) Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Ministers' Statements. Minister of Family Services, Hon. Sheutiapik.

Minister's Statement 359 – 5(2): Low-barrier Shelter in Iqaluit

Hon. Elisapee Sheutiapik

(interpretation): Thank you, Mr. Speaker. Good afternoon.

Mr. Speaker, (interpretation ends) I am pleased to update my fellow members on the reopening of Iqaluit's damp shelter this past January.

The damp shelter, known as the low-barrier shelter, reopened on January 27. The term "low-barrier shelter" is intended to reduce the stigma associated with accessing the shelter. Many individuals who accessed the shelter last fiscal year were not intoxicated, rather they faced other barriers that made it challenging to access existing shelter services.

The shelter operates out of the same location, building 534. It is open from 8 p.m. to 8 a.m. and can accommodate both men and women.

As many of you are aware, this initiative builds upon the pilot project the Department of Family Services and the Inukshuk Guardian Society initiated in early 2019. During the pilot project, 211 individuals accessed the shelter, demonstrating a need for additional community supports beyond existing services.

This shelter model serves as an access and referral point for those most at risk, who face various challenges, including chronic homelessness, family violence, and addictions. The model decreases the involvement of emergency and police services and acts as a preventative tool, providing safe alternatives to individuals who would otherwise find themselves in vulnerable and risky situations.

Uqaqtitsijii, I would like to take this opportunity to thank the Uquutaq Society for managing the low-barrier shelter. The society continues to play an integral role in providing emergency supports for Nunavummiut facing homelessness in Iqaluit.

It is only through the hard work and tireless efforts of community organizations like Uquutaq that we can contribute to Inuusivut, strengthening the well-being of our people and our communities. (interpretation) Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Ministers' Statements. Minister of Economic

Development and Transportation, Hon. Akeeagok.

Minister's Statement 360 – 5(2): Task Force on Transportation in Northern and Remote Regions

Hon. David Akeeagok (interpretation): Thank you, Mr. Speaker. Last week I met with the federal, provincial and territorial counterparts at the Council of Ministers Responsible for Transportation and Highway Safety.

(interpretation ends) These meetings are always informative and engaging, but the agenda is typically focused on issues the larger jurisdictions are facing: southern highway connections, mass transit, harmonization with the United States, and border crossings. It has sometimes been difficult to create discussions around the issues the smaller jurisdictions face.

I am pleased to say that the council, at the urging of Nunavut, has formed a task force to examine issues around transportation in the northern and remote regions.

>>Applause

The task force will be chaired by Nunavut and vice-chaired by the Northwest Territories. It will include members from the federal government, from all territories, and from six provinces that have communities with similar challenges to ours.

Over the course of next year this task force will be examining the unique challenges faced by remote Canadian communities, including indigenous communities. It will be looking at the

policies, programs, initiatives, regulations, and market forces that can either improve our situation or make it worse. When the work is complete, the task force will be bringing recommendations forward to the council of ministers for consideration.

Mr. Speaker, I was very pleased with the strong support my counterparts expressed for this initiative, and I look forward to the work this task force will be completing over the coming months. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): I have no more names on my list. Continuing on with the orders of the day. Before we proceed to Members' Statements, I would like to remind members to be cognizant of the time allotted for members' statements and be mindful of our interpreters.

Members' Statements. Member for Tununiq, Member Qamaniq.

Item 3: Members' Statements

Member's Statement 557 – 5(2): Addressing Violence in Our Communities

Mr. Qamaniq (interpretation): Thank you, Mr. Speaker. Good afternoon, my constituents, my fellow residents of Tununiq, and my colleagues.

I'll be speaking in English as I was also taught how to speak and read in English.

(interpretation ends) Thank you, Mr. Speaker. I rise today to acknowledge the important words spoken by members on both sides of this House stating that

“violence in any form is unacceptable.” Mr. Speaker, I agree with that notion. I, too, stand against violence and I, too, agree that it is an ongoing struggle to put an end to this kind of negative behaviour.

Mr. Speaker, violent behaviour can appear in many situations and contexts. Factors like despair, stress, anger, and fear can influence how we react, but no matter what we do, we must be accountable for our actions. It is for this reason that I have been speaking in favour of methods and technologies which can safeguard us against acts of violence.

Mr. Speaker, I have asked our government whether any consideration can be given to Nunavut’s police force using vehicle or body cameras. The government’s reply indicates that “the RCMP has determined that this equipment was not suited to the needs of the police force.” However, the use of body cameras or dash cameras by police may suit the needs of the people of Nunavut.

Concerns have been raised about violent interactions between police and Nunavummiut. We have read about it in newspapers and seen video clips posted on social media. The concerns are real.

I urge our government to work with Nunavut RCMP to reconsider and re-evaluate the option of body cameras for police working in our territory. At the appropriate time I will be asking questions on this issue. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Members’ Statements. Member for Arviat North-Whale Cove, Member Main.

**Member’s Statement 558 – 5(2):
Kivalliq Hydro-Fibre Link**

Mr. Main (interpretation): Thank you, Mr. Speaker. Good day, my colleagues, Premier, and ministers.

I heard good news in the media on February 5 about major infrastructure in the Kivalliq. I appreciate the Kivalliq Inuit Association, the federal government, and the private sector that are involved in this project, (interpretation ends) the Kivalliq Hydro-Fibre Link. (interpretation) It is very good to see the work proceed and we expect that it will benefit many Nunavummiut. The Government of Nunavut is not mentioned in the news release, but I am confident that our government will continue to support this project.

However, I’ll read this in English. (interpretation ends) “The proposed Kivalliq Hydro-Fibre Link involves the construction of a new 1,200-kilometre, 150-megawatt transmission line between Nunavut and Manitoba. The project would deliver renewable, sustainable and reliable hydroelectricity energy to the region.” It also says “Fibreoptic cabling is also included in the project.”

Later in the news release, the newly elected President (interpretation) of the Kivalliq Inuit Association, Kono Tattuinee, stated and I’ll say it in English, (interpretation ends) and the quote says “Inuit are proud to be driving this transformative, national infrastructure project. Together we are

creating something that will bring lasting economic and environmental benefits to Nunavut and all of Canada.”

Mr. Speaker, this is an incredibly exciting project and I hope to see it come to reality. I will point out at this point in time, despite some reports in the media, there is no federal funding that has been secured, to my understanding, for this project. However, this memorandum of understanding that was signed with the Canada Infrastructure Bank is very exciting, and I will have questions for the Premier at the appropriate time regarding the Government of Nunavut’s role in this project. (interpretation) Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Members’ Statements. Member for Rankin Inlet North-Chesterfield Inlet, Member Towtongie.

**Member’s Statement 559 – 5(2):
Marine Protection**

Ms. Towtongie (interpretation): Thank you, Mr. Speaker, for recognizing me. At the appropriate time I will have questions on marine protection around Chesterfield Inlet and Southampton Island. I appreciated it when our Premier said that the Government of Nunavut is not in support of this through negotiations. Unfortunately I will be voicing my concern in English.

(interpretation ends) All partners in any co-management system face some difficulties in fulfilling their mandate and sometimes it is because of human resource capacity and financial. Despite these challenges, in Nunavut,

collaboration partners continue to find ways to advance important issues. One of the problems that Nunavut is facing in overcoming the obstacles is that IQ and science are incompatible or that scientific studies attempt to replace or supplement IQ.

I believe that as Nunavummiut we need to decide because of these national obligations, such as marine protected areas, and local interests and acceptance outside of Nunavut is not acceptable, such as the area of the marine protected areas around all of Southampton Island and all of Chesterfield Inlet waters.

At the appropriate time I will be asking the Premier these questions. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Members’ Statements. Member for Iqaluit-Manirajak, Member Lightstone.

**Member’s Statement 560 – 5(2): Staff
Housing Policies**

Mr. Lightstone: Thank you, Mr. Speaker. Sitting on this side of the Assembly, we are quite often required to criticize the government, but today I would like to stand to applaud our government’s efforts, and particularly the Department of Human Resources, the Department of Finance, and the Nunavut Housing Corporation on their collaborated effort in amending the staff housing policies.

Mr. Speaker, I fully understand the need and the importance of staff housing with recruitment and retention of hard-to-fill positions, but it is also unfortunate that the staff housing subsidy is highly concentrated among the professional,

middle management, all the way up to the executive-level positions. In fact two-thirds of the highest paid positions are in staff housing, and not to mention the fact that only 25 percent of staff housing is allocated to Inuit employees.

Regardless, I appreciate the revision of the staff housing policies and particularly the policy which will allow departments to prioritize staff allocations in the interest of reaching Inuit employment goals. I hope that this new policy will allow more Inuit to receive the generous staff housing subsidy as well as a more equitable distribution between employees that need it the most. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Members' Statements. Member for Cambridge Bay, Member Ehaloak.

**Member's Statement 561 – 5(2):
Constituency Office Relocation**

Hon. Jeannie Ehaloak (interpretation): Thank you, Mr. Speaker. (interpretation ends) Good afternoon, Nunavummiut and good afternoon to my fellow MLAs.

Just some information for my constituents in Cambridge Bay, the constituency office, my MLA office has now been moved from the NCC building, which was on No. 1 Kamotik Road to the Ikaluktutiak Co-op on 20 Omingmak Street. We are in the process of setting up our office right now. We have no email, but we do have phones, so please bear with us. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Members' Statements. Member for Rankin Inlet South, Member Kusugak.

**Member's Statement 562 – 5(2): The
Edmonton Eskimos**

Hon. Lorne Kusugak (interpretation): Good day, my fellow Inuit. Mr. Speaker, I am proud to rise today as an Eskimo. (interpretation ends) I am proud today to be able to stand up as a true Eskimo.

>>Applause

Mr. Speaker, let me give you a bit of history. In the early '70s, not going that far back, Rankin Inlet had its first television set that you could watch, and one time we had the TV on in the house and I was cheering away. My mother came. It was small house, but she came to see the front of the TV and she was asking what I was watching.

I said I was watching this game called football, not knowing what a first down was, not knowing the difference between first and ten and third and five. Nonetheless, I was watching football. I couldn't explain the game to her and she said, "Well, why are you cheering?" I said, "I'm watching the Edmonton Eskimos play the Saskatchewan Roughriders." She said, "The Eskimos?" Knowing as much about football as I did, she sat down and started cheering with me.

>>Laughter

I asked her, "Who are you cheering for?" She said, "The Eskimos because I'm an Eskimo too."

>>Laughter

Mr. Speaker, there was absolutely no offence taken to the word “Eskimos” in the ‘70s, and I assure you the meaning of the Eskimo hasn’t changed from the ‘70s to today. Everybody just needs to slow down and take a breather, Mr. Speaker.

Mr. Speaker, I found out recently that the Edmonton Eskimos have decided to keep the name Eskimos.

An Hon. Member: Hear, hear!

Hon. Lorne Kusugak: I was proud of that, Mr. Speaker.

>>*Applause*

Mr. Speaker, today I know what a first and ten looks like, I know what a third down is, and I know losing the Grey Cup is not fun.

>>*Laughter*

But the Eskimos have won more than their share of the Grey Cup over the years.

An Hon. Member: Like the Habs.

Hon. Lorne Kusugak: Like the Habs.

Mr. Speaker, I’m proud that the Edmonton Eskimos will keep the name. Everybody else who thinks it is offensive, settle down, take a Valium, and don’t be so sensitive.

Mr. Speaker, the game lives on. I am hoping this summer will be the summer I actually get to go watch the Eskimos play live at the Commonwealth Stadium. Thank you, Mr. Speaker.

>>*Applause*

Speaker (interpretation): Thank you for making that play of words. Continuing on. Members’ Statements. Member for Quttiktuq, Member Akeeagok.

**Member’s Statement 563 – 5(2):
Recognition of Aksakjuk Ningiuk**

Hon. David Akeeagok (interpretation): Thank you, Mr. Speaker. Nunavut’s elders are recognized biennially by the Inuit Heritage Trust. I am very pleased that Aksakjuk Ningiuk from Grise Fiord was recognized. He’s our elder in Grise Fiord and he can only speak in Inuktitut.

He grew up in Tununiq. His father worked as an RCMP member on Devon Island at a detachment in Craig Harbour and retired in Grise Fiord in 1959. When he was a young man, Grise Fiord was not widely known as it was not a traditional settlement. They had to look for good hunting areas for fish and other food. He discovered a lake that we still use for fishing.

When he was older, he started working for the Government of the Northwest Territories as a housing maintainer and he also became a layperson. He has been a layperson from 1964 to today. That was his calling. Although he doesn’t speak English, when heavy equipment broke down, he would observe it carefully and then fix it. Now that he is an elder, he spends most of his time at home.

I would like to congratulate and thank him very much for the huge contributions he has made to our community of Grise Fiord. Grise Fiord would have been a very different place if Aksakjuk Ningiuk wasn’t there. I thank him for being our elder up there and I

also thank the individuals who nominated him to be recognized. Thank you, Mr. Speaker.

>>*Applause*

Speaker (interpretation): We congratulate Aksakjuk Ningiuk, and we are also proud of our elders in Nunavut, every single one of them.

Continuing on with the orders of the day. Returns to Oral Questions. There are none. Continuing on. Recognition of Visitors in the Gallery. There are none. Continuing on. Oral Questions. Member for Hudson Bay, Member Rumbolt.

Item 6: Oral Questions

Question 761 – 5(2): Sanikiluaq Water Supply

Mr. Rumbolt: Thank you, Mr. Speaker. Good afternoon to the people of Sanikiluaq.

Mr. Speaker, my questions today are for the Minister of Community and Government Services.

Mr. Speaker, the minister took some questions the other day about the water situation in Nunavut's most northerly community. I'm sure he's not surprised that I would have some questions concerning the water in its most southern community.

>>*Laughter*

When I last raised the issue of Sanikiluaq's water supply during our fall sitting, the minister indicated that work was continuing to determine the best options for water treatment in the

community. Can the minister update me today on where this work now stands? Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Community and Government Services, Minister Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. I thank my colleague for the question. Mr. Speaker, I was anticipating a question from my colleague in Sanikiluaq in terms of the water issues there. Mr. Speaker, the work continues throughout Nunavut in trying to improve water services. Mr. Speaker, I had spoken with my colleague, I believe, at the last session. I was talking to him about finalizing the business case for that community. I'm glad to report that the business case is now complete and we're just looking to share that document with the Municipality of Sanikiluaq, Mr. Speaker. Thank you.

Speaker (interpretation): Your first supplementary question, Member Rumbolt.

Mr. Rumbolt: Thank you, Mr. Speaker. I thank the minister for that information. I think I should note that the effects of the bad water in our community go far beyond the human consumption. There's also the issue of the hot water heaters in our houses lasting probably half the lifespan they should because of the salinity in the water.

Mr. Speaker, when I last raised the issue of Sanikiluaq's water supply during our fall sitting, I noted that the minister had previously indicated to me that the department would be receiving Green Stream federal funding to improve water security in three communities:

Sanikiluaq, Iqaluit, and Grise Fiord.

Can the minister update the House today on how much federal funding has been provided in relation to Sanikiluaq's needs? Thank you, Mr. Speaker.

Speaker: Minister Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. I don't have that level of detail in terms of a breakdown of how much of this funding is going into Sanikiluaq. Let me get that detail for him and I would be more than happy to share it with the House at that time. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary question, Member Rumbolt.

Mr. Rumbolt: Thank you, Mr. Speaker. Again, when I last raised the issue of Sanikiluaq's water supply during our fall sitting, the minister also indicated that the community would continue to require desalinization equipment.

Mr. Speaker, it is my understanding that the local housing organization performs maintenance checks every three months on reverse osmosis filters that have been installed in public housing units and changes filters at least once every six months, and more frequently in the case of units with high rates of water consumption.

However, when it comes to private homes, it is my understanding that the Iqaluit-based contractor that has been hired to perform maintenance checks has not been to the community since July of last year.

Can the minister explain why the maintenance of reverse osmosis units in private homes does not get the same level of service as those in public housing? Thank you, Mr. Speaker.

Speaker: Minister Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. There's no reason why they shouldn't be the same. Mr. Speaker, this is news to me. I will look into it and ensure that they are dealt with at the same level. Mr. Speaker, I'll go further than that and I will look into seeing if it is possible for us to put out that service so that it is dealt with locally. I commit to that, Mr. Speaker. Thank you.

Speaker (interpretation): Oral Questions. Member for Iqaluit-Niaqunngu, Member Angnakak.

Question 762 – 5(2): Unlicensed Lotteries

Ms. Angnakak: Thank you, Mr. Speaker. Good afternoon, everyone.

My questions are for the Minister of Community and Government Services and they concern the issue of unlicensed lotteries.

Earlier this week the minister's department issued a public service announcement in which it warned Nunavummiut that "Conducting a lottery event without a licence is a Criminal Code offence."

Mr. Speaker, we have all been talking a lot in this House recently about serious crimes, including the violent sexual abuse of children. We know that the RCMP is already stretched pretty thin, as

is evidenced by their recent decision to stop conducting driver's tests in our communities.

My first question for the minister is this: can he indicate how many residents of the territory have been criminally prosecuted within the last 12 months for offences related to unlicensed lotteries? Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Community and Government Services, Minister Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. I'm not aware of any of those offences in the last 12 months, Mr. Speaker. Thank you.

Speaker (interpretation): Your first supplementary question, Member Angnakak.

Ms. Angnakak: Thank you, Mr. Speaker. As the minister will be very much aware, the *Lotteries Regulations* under the territorial *Lotteries Act* were inherited upon division in 1999 and have only been amended a few times. It is clear that the regulations have not kept pace with the times, especially when it comes to some new forms of fundraising that community groups are using, such as the popular "Chase the Ace" events that are doing great things for our school.

Will the minister commit to undertaking a full review of the legislation and will he also commit to looking at the issue of whether the regulation of lotteries and other forms of gaming in the territory would be better situated with the liquor and gaming commission, which is a regulatory model used in a number of

other Canadian jurisdictions? Thank you, Mr. Speaker.

Speaker: Minister Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. Our department and our division that is working with the *Lotteries Act* is constantly monitoring where we need to make improvements and thus the public service announcement that was put out recently to remind people that there are laws out there that regulate what you can and what you can't be doing legally, and we will continue to do that.

In terms of the second or third part of her question, Mr. Speaker, in doing that, in working with that, we constantly assess whether this division is more appropriate in our department or in any other department, Mr. Speaker. Thank you.

Speaker (interpretation): Your second and final supplementary question, Member Angnakak.

Ms. Angnakak: Thank you, Mr. Speaker. I'm glad that the department is assessing and maybe it will come forward to the House for amendments to the legislation.

Mr. Speaker, I completely agree that individuals should not be allowed to run lotteries or other forms of gambling in order to pay for their Vegas vacations or buying a new truck. I also agree that fraudsters and scammers should be prosecuted to the fullest extent of the law. However, when it comes to desperate people who are looking to raise a few dollars to help with funeral-related expenses or travelling to be with

a dying relative, we need to take a more human approach and recognize that prosecuting someone in these circumstances is not in the best use of our government's time and resources. This is my position on the issue. What is the minister's position on this issue? Thank you, Mr. Speaker.

Speaker: Minister Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. I believe it is my right not to state an opinion on this issue, Mr. Speaker. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Tununiq, Member Qamaniq.

Question 763 – 5(2): Addressing Violence in Our Communities

Mr. Qamaniq (interpretation): Thank you, Mr. Speaker. My apologies. (interpretation ends) Thank you, Mr. Speaker. I would like to direct my question to the Minister of Justice.

Mr. Speaker, first of all, I would like to thank the minister for her reply to my question on October 31, 2019. I had asked the minister whether she and her department would consider a pilot project where our police force would use vehicle or body cameras. The minister's response indicates that the Royal Canadian Mounted Police has determined that Nunavut's "V" division would not be undertaking this pilot project.

I would like to ask the minister whether the Government of Nunavut has any say under the Territorial Policing Services Agreement about how policing services

are delivered in Nunavut and whether she would be willing to address the issue of police body and vehicle cameras when she next negotiates a new territorial policing services agreement with the Royal Canadian Mounted Police. Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Justice, Minister Ehaloak.

Hon. Jeannie Ehaloak (interpretation): Thank you, Mr. Speaker. (interpretation ends) Thank you, Mr. Qamaniq, for your question. Regarding the cameras and our shared directional statement with the RCMP, the Department of Justice and the RCMP have renewed their shared directional statement for 2019-2021.

The shared directional statement is based upon priorities identified by Nunavummiut and with the Government of Nunavut and the RCMP. These priorities are: promoting public trust and confidence with Inuit; promoting accountability for government in the communities; supporting communities at risk; and enhancing crime prevention and reduction initiatives in our communities. The model of policing provided to Nunavummiut is based on service delivery and strives for excellence and is customized to the specific needs of the territory's residents.

Regarding the cameras on RCMP officers or on vehicles, you're right that the RCMP and the Department of Justice at this time will not be looking at those options, but there is the Kativik Regional Police Force in Nunavik who will be doing a pilot project in their territory. Once that pilot project's results are received, we will be looking at their results and the research, and the pilot

project itself and we will be reviewing ours. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Qamaniq.

Mr. Qamaniq (interpretation): Thank you, Mr. Speaker. (interpretation ends) I don't think as Nunavummiut, the Nunavut government has jurisdiction over Nunavik's Kativik Police Force.

Anyway, as I mentioned in my member's statement, we must stand together to prevent violence in all its forms. Does the minister agree that reducing the number of violent incidents between police and Nunavut residents is an important part of reducing violence in our territory? Thank you, Mr. Speaker.

Speaker: Minister Ehaloak.

Hon. Jeannie Ehaloak (interpretation): Thank you, Mr. Speaker. (interpretation ends) The Department of Justice believes that working with the RCMP to ensure that violence between the RCMP and an individual community member... . If a community member feels that they have been treated unfairly by the RCMP, they have the option to report this and it will be investigated and they will be assisted. I, like everybody else in this room, don't condone violence. I totally agree that violence should not be tolerated in any form. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary question, Member Qamaniq.

Mr. Qamaniq (interpretation): Thank you, Mr. Speaker.

(interpretation ends) I believe that making individuals accountable for their actions is an important step towards changing their negative behaviour. The use of body cameras, with the ability to review events as they occurred instead of relying on people's memories, would be a good means of ensuring accountability for their actions.

Mr. Speaker, will the minister commit to reconsidering and reviewing the possibility of Nunavut's police force using body cameras and reporting back to this House on the results of her review? Thank you, Mr. Speaker.

>> *Applause*

Speaker: Minister Ehaloak.

Hon. Jeannie Ehaloak (interpretation): Thank you, Mr. Speaker. (interpretation ends) The Department of Justice and the RCMP will continue to explore equipment and storage options. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Amittuq, Member Kaernerck.

Question 764 – 5(2): Community Name Change

Mr. Kaernerck (interpretation): Thank you, Mr. Speaker. Good day, my fellow Nunavummiut.

My questions are for the Minister of Community and Government Services.

Mr. Speaker, as the minister is aware, residents of my home community voted last year in a plebiscite to decide whether or not to change the official

name of the community to its traditional Inuktitut name, which is Sanirajak. Mr. Speaker, we had a low voter turnout, but I want to thank those who voted during the municipal plebiscite.

Mr. Speaker, the municipal council recently wrote to the minister in order to request that the name change be officially approved by the territorial government. My question for the minister is: can the minister confirm when the official name change will be made? Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Community and Government Services, Minister Kusugak.

Hon. Lorne Kusugak (interpretation): Thank you, Mr. Speaker. I also thank my colleague for asking that question. Mr. Speaker, after the municipal plebiscite in Hall Beach, the hamlet's SAO wrote to me, asking me to proceed with this matter. I replied by saying that I approve of the decision that the municipality made to change the name. We will exchange correspondence and once the hamlet council makes the appropriate resolution, it will proceed from there. It should be going through cabinet in the next few days. Correspondence has been sent between the Mayor of Hall Beach and my office regarding the matter. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Kaernerck.

Mr. Kaernerck (interpretation): Thank you, Mr. Speaker. I also thank the minister for clearly explaining that. I'm sure the hamlet has expectations about the name change and all the documents

and signage will have to change. Can the Government of Nunavut help the municipality pay for the name change? Can the Department of Community and Government Services help the hamlet do this? Thank you, Mr. Speaker.

Speaker: Minister Kusugak.

Hon. Lorne Kusugak (interpretation): Thank you, Mr. Speaker. I don't know if the name change would incur a large expenditure or how much it would cost. If the hamlet doesn't have the funds within their budget, then we can look into that. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary, Member Kaernerck.

Mr. Kaernerck (interpretation): Thank you, Mr. Speaker. It is good to hear that they can probably get help financially.

This is my final question to the minister. It is my understanding that the residents of Cape Dorset also voted in favour of a community name change to Kinngait. They had their own plebiscite. Does the minister know how many official community name changes are in the process of being approved? Thank you, Mr. Speaker.

Speaker: Minister Kusugak.

Hon. Lorne Kusugak (interpretation): Thank you, Mr. Speaker. I don't know how many communities' names have been changed, but Hall Beach and Cape Dorset are doing it basically at the same time. We have been corresponding with the residents of Cape Dorset. Once we have them all listed, we will be able to tell you how many there are, but I don't

know how many communities have had their names changed back into the Inuktitut name. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Arviat North-Whale Cove, Member Main.

Question 765 – 5(2): Kivalliq Hydro-Fibre Link

Mr. Main (interpretation): Thank you, Mr. Speaker. I rise to ask questions to the Premier in regard to what I spoke to earlier about the hydro-fibre link project in the Kivalliq.

(interpretation ends) Mr. Speaker, the news release from February 5 lists the Kivalliq Inuit Association, Canada Infrastructure Bank, and Anbaric Development Partners. The Government of Nunavut is not listed on the news release and I will note that neither is the Government of Manitoba.

My first question to the Premier; it's obvious this is a project with huge potential benefits to the government and residents in the five communities. What is the government's role at this stage in supporting this project? (interpretation) Thank you, Mr. Speaker.

Speaker (interpretation): Premier of Nunavut, Premier Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. I'm glad I have been given the opportunity to share information here.

Mr. Speaker, this project is an Inuit-led project by the Kivalliq Inuit Association. About a year ago when the project was starting to pick up steam, I was a part of the delegation that was lobbying

ministers in Ottawa to inform them on the benefits of this project in many ways: environmentally, economically, and socially even. So far that has been the extent of our involvement in those early stages.

As I said, it is an Inuit-led project, but if this project were to come to being and be successful, then the GN would be one of the anchor customers as we are a large user of power in the five communities that this power line would hook up. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Main.

Mr. Main (interpretation): Thank you, Mr. Speaker. (interpretation ends) My second question is just requesting clarification on two matters. I would like to understand whether there has been significant funding provided to this project as it was on the front page of a local newspaper recently. I believe that was maybe a typo, but I'll just ask for clarification on that and whether the Government of Manitoba has indicated their support. Government of Manitoba or Manitoba Hydro, I'm not sure who the body involved would be.

Clarification on those matters, if possible. (interpretation) Thank you, Mr. Speaker.

Speaker (interpretation): Premier Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. At the signing of the MOU with the Canada Infrastructure Bank, I was present at the ceremony there, although I was not part of the signing. I was present there and I can tell the member that there were no financial

commitments on behalf of the federal government to fund this project. The MOU was to the Canada Infrastructure Bank. We will be working with the Kivalliq Inuit Association on their feasibility study to make sure that the financial end of it is proper and is being worked on.

I read the newspaper article the member is talking about too and the news article was misleading and not true in the fact that it stated that the federal government is willing to fund the \$1.6 billion. I'm looking forward to the day when we do see that announcement being made by the feds, but I'm sorry to inform everyone that today is not that day yet, but it's a good project and we support it. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary question, Member Main.

Mr. Main (interpretation): Thank you, Mr. Speaker. Thank you, Premier, for that clarification. At this current junction, the parties are preparing the initial feasibility plan outlining the required work and they're making considerations. If that is the case, to use Arviat as an example, will the residents of Arviat receive lower electrical bills as a result of this linkage? (interpretation ends) Just for clarification, I think the billion dollar question is: would this project mean lower power bills for the communities that stand to be connected to this hydro line? (interpretation) Thank you, Mr. Speaker.

Speaker (interpretation): Premier Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. The Kivalliq Inuit Association got a \$1.6 million grant from CanNor to do a feasibility study. Currently right now the feasibility study is still being worked on. It should be completed within a short time frame now. I'm not part of the study, so I can't say, but this feasibility study will be able to tell us what the price will be at the end, what the Arviarmiut will pay at the end when the power goes from the telephone pole into their house. The feasibility study will be able to tell us that then.

We all hope and it makes sense that the power rates should go down, but I can't say anything about what the power rates will be with the hydro line. Once the feasibility work is done, we will have a much clearer picture on what the prices would be for Arviarmiut, not just Arviarmiut; Rankin Inlet, Whale Cove, Chesterfield Inlet, and possibly even Baker Lake. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Iqaluit-Manirajak, Member Lightstone.

Question 766 – 5(2): Competition Update on Six Positions for Qikiqtani General Hospital

Mr. Lightstone: Thank you, Mr. Speaker. My questions are in relation to my member's statement earlier and are for the Minister of Health. My questions are in relation to the advertisement of six housekeeping assistant positions that were advertised with staff housing and restricted to Nunavut Inuit.

First of all, I would like to thank the minister for taking this initiative. In fact I was so pleased to see this that I shared

the job ad on social media. The public was just as enthusiastic and pleased about this post, and it was so well liked and shared that my social media post had over 12,000 views.

I would like to ask if the minister would be able to provide us with an update on this competition. Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Health, Minister Hickes.

Hon. George Hickes: Thank you, Mr. Speaker. I can't take all the credit. This is a shared priority across the government with our staff housing allocation committees on how job competitions go out with housing. I wish I could take sole credit for it, but this has been obviously a team effort.

Mr. Speaker, with regard to that competition, it was open until filled, the six positions in there, and to the best of my knowledge it just closed on Monday. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Lightstone.

Mr. Lightstone: Thank you, Mr. Speaker. I had also noticed that the job ad is no longer posted. We all know that the hiring process is lengthy. In fact the most recent Public Service Annual Report indicates that the average time to fill a job from the date it is advertised until the job offer is signed has reduced down to 141 days. I'm quite surprised that this job ad was only advertised for such a short period of time. I would like to ask for more specifics. How long was this job advertised, and how many

individuals had applied? Thank you, Mr. Speaker.

Speaker: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Speaker. I don't have that level of detail. There are over a hundred job competitions and actions that are going on right now just in the Department of Health alone.

With regard to how many applicants, again I don't have that information. The reason that the posting was taken down meant that there were enough applicants that they felt they would be able to fill the six positions that were advertised. Whenever an advertisement is made open until filled, when the HR process comes into play where there are enough applicants to fill those positions, then the ad is pulled down. That's why I said it was closed on Monday. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary question, Member Lightstone.

Mr. Lightstone: Thank you, Mr. Speaker. I fully understand that the minister would not have that amount of detail on hand at the moment, but I hope he would feel free to provide me with a return to oral question at a later date.

For my last question, Mr. Speaker, I would like to ask if the Department of Health had utilized the new Staff Housing Policy which allows departments to request that the allocation committee depart from their particular housing allocation categorization or criteria to enable the Department of Health to advertise this position with

staff housing restricted to Inuit employees. Thank you, Mr. Speaker.

Speaker: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Speaker. Yes, that's the human resources process. We can't, as a department, go out and put an advertisement out with housing or certain conditions on it without the cooperation of the Department of Human Resources. We follow their procedures. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Aggu, Member Quassa.

Question 767 – 5(2): Local Housing Organization Managers

Mr. Quassa (interpretation): Thank you, Mr. Speaker. I say “good day” to the residents of my community and my colleagues.

Mr. Speaker, I would like to direct my question to the Minister responsible for the Housing Corporation.

Now, the housing corporation is responsible for making funding available to the local housing organizations for operations and maintenance expenses as well as equipment. Each housing association or authority has a manager. They all have a manager. I would like to ask the minister: who are the managers and how do they get chosen in the process? Thank you, Mr. Speaker.

Speaker (interpretation): Minister responsible for the Nunavut Housing Corporation, Minister Netser.

Hon. Patterk Netser (interpretation): Thank you, Mr. Speaker. I also thank you for the question. I think you're talking about the managers of the housing organizations. When they're looking for an office manager, they select someone who they believe is qualified for the job. The successful candidate then starts working for the organization. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Quassa.

Mr. Quassa (interpretation): Thank you, Mr. Speaker. As the housing corporation, we realize that you assign certain authorities to each local housing authority. In some situations there are letters from the community written to the managers and the managers don't always respond clearly. How is the process set up? For example, if they are not satisfied with the performance of the housing organization manager, what happens then? Thank you, Mr. Speaker.

Speaker: Minister Netser.

Hon. Patterk Netser (interpretation): Thank you, Mr. Speaker. According to what I understand, we have an MOU in place and we have a management agreement that each authority will be choosing their staff; (interpretation ends) in this case, (interpretation) their managers. If any of the authorities are not satisfied with the performance of their manager, they can remove their employee. We don't deal with them specifically. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary question, Member Quassa.

Mr. Quassa (interpretation): Thank you, Mr. Speaker. I think we all understand and I believe that's the case. We all know there are policies in place for each local housing authority and they identify which policies they want to produce. I'm just wondering if the Nunavut Housing Corporation has a unified policy in place for each authority that must be followed. Is there such a thing in place? Is there accountability that is followed and their policies and by-laws? For example, these kinds of things occur and different situations can happen. Is the housing corporation involved in those kinds of things? Thank you, Mr. Speaker.

Speaker: Minister Netser.

Hon. Patterk Netser (interpretation): Thank you, Mr. Speaker. There was a memorandum of understanding recently and we work closely with each local housing authority or association. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Netsilik, Member Qirngnuq.

Question 768 – 5(2): Lead Floats in Water Tanks

Mr. Qirngnuq (interpretation): Thank you, Mr. Speaker. I'm happy that you finally reached me.

Mr. Speaker, yesterday part of my question is what I want to move forward with today, related to the Nunavut Housing Corporation which I queried the minister on yesterday. I wish to ask the minister the secondary question who is responsible for Health.

This is related to the Taloyoak news

story recently about the lead water level instrument that was in the water tank for many years, as lead can be ingested with the food they eat, from the water they drink, and it can accumulate in the body. It really makes you wonder.

How worrisome is it to a person? I'm asking the Minister of Health because I want to know. Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Health, Minister Hickey.

Hon. George Hickey: Thank you, Mr. Speaker. I appreciate the question from the member. It is a perfect follow-up to his questions to the Nunavut Housing Corporation.

Mr. Speaker, as soon as the Department of Health became aware of this, we did contact and work through the Nunavut Housing Corporation to identify communities and residences that were impacted by these lead floats in there. People in those units either have been contacted or will be contacted by the Nunavut Housing Corporation and it will be recommended that they go to the health centre for blood testing.

From early indications, we are not aware of any specific examples where it has had a health impact, but we do want to make sure that people do get tested at the health centre, and then if any treatment is necessary, then it can be followed up with. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Speaker. I also thank the minister for clarifying that for our

information. Although only the one household was identified in the news story, it still wasn't discovered for over 20 years and this makes one wonder if there are other issues that we haven't discovered yet.

Within the community, if more tenants face this issue, they will inform the tenants about that problem. I would like to ask what lessons have been learned from this event that became quite concerning after finding out the details. Mr. Speaker, I am asking the minister this question. Thank you.

Speaker: Minister Hickee.

Hon. George Hickee: Thank you, Mr. Speaker. I agree with the member. It is very important that people are aware that if they have had these floats in their tank, they be notified and the Nunavut Housing Corporation is doing that.

Again, we can't mandate people to go in for testing, but to make sure that there are no concerns health-wise, anyone who is contacted by the Nunavut Housing Corporation, I do recommend that they take the opportunity and go to the health centre. It is a fairly simple blood test that can be done to analyze their levels and then follow up with their health professional. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary question, Member Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Speaker. This news article was noted by many residents as it was broadcast widely and it impacts many people potentially throughout the territory. How will this be resolved to

the satisfaction of Nunavummiut to ensure it doesn't slip through the Department of Health again? I would like to understand that, hence my question on the matter, Mr. Speaker. Thank you.

Speaker: Minister Hickee.

Hon. George Hickee: Thank you, Mr. Speaker. Lead levels in the blood are obviously a concern when they're elevated and any portion can have impacts, but I think the first step, and I'll commend the Nunavut Housing Corporation on this, is to remove those floats. Any lead levels in the blood system do deteriorate once that source has been removed. That's the first step of getting the lead out of the water system or the resupply.

Again, anyone who is contacted by the Nunavut Housing Corporation, I do suggest that they follow up with their health centre in the community. There is, like I said, a very easy test. It's a simple blood test that can determine the lead levels in the blood and make sure that they feel comfortable with their health and with the actions from the Nunavut Housing Corporation as well as the health centre. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Rankin Inlet North-Chesterfield Inlet, Member Towntongie.

Question 769 – 5(2): Marine Protection

Ms. Towntongie (interpretation): Thank you, Mr. Speaker. My question is for the Minister of Environment.

First of all, I say “good day” to the people of Rankin Inlet and Chesterfield Inlet.

Also, my husband, it’s your birthday and I miss you. Enjoy your day, Harry Towtongie.

>> *Applause*

I am quite concerned in light of the Oceans Protection Plan that the federal government announced on April 26, 2019. The protected area would prohibit certain activities in the oceans surrounding us under (interpretation ends) the *Oceans Protection Act*, (interpretation) where the protected area includes the seas offshore of the Kivalliq and adjacent to Chesterfield Inlet, which concerns the people of Chesterfield Inlet. They have plans for fisheries and they have studied it because Chesterfield Inlet doesn’t have too many jobs.

According to my understanding, the mayor and David Vinnie Aggark, David Kattegatsiak, and two officials from Arctic College identified how they wanted to proceed in Chesterfield Inlet and at the Ottawa Northern Lights Festival. Looking through what you said, you said it was a federal government decision.

I would like this information with details from the Government of Nunavut, when discussions commence with Canada, upon completion of a devolution agreement where 2025 is the target date. 2019 is already done. Is the Government of Nunavut having discussions with the people of Chesterfield Inlet or Coral Harbour and the local hunters and trappers organizations? Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Environment, Minister Savikataaq.

Hon. Joe Savikataaq (interpretation): Thank you, Mr. Speaker. This is under the purview of the federal government. This falls under parks or conservation areas, so harvesting will be allowed, but certain activities are prohibited. The federal departments responsible for this, according to the information provided, just visited Coral Harbour, and discussed the issues with the representatives of Coral Harbour, the HTO, and the public via a meeting. However, we as the GN did not attend these meetings. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Towtongie.

Ms. Towtongie (interpretation): Thank you, Mr. Speaker. I also thank the Minister of Environment. However, I believe it’s imperative that the Government of Nunavut is involved from the onset. When I was recently in Chesterfield Inlet, an elder told me that the minister, in his role, should travel to Chesterfield Inlet and hold a hearing with the residents. I gladly invite you to Chesterfield Inlet and I want you to commit to going if able, and I know you can make time for this meeting.

What I am concerned about is the Inuit knowledge aspect, and when scientists are reviewing their scientific data, it can conflict with Inuit knowledge. When they started looking at university-related research or when western scientific data is referenced...hold on, I will speak English here.

(interpretation ends) When there is

scientific research being done, sometimes they are incompatible with the Inuit IQ. There are opposing views. Once the research has been done, how much weight is given to the Inuit IQ and how much weight is given to the scientific research? There has been research in the bay of Chesterfield Inlet for scallops and there is potential in Chesterfield Inlet for the fishing industry to develop. Thank you, Mr. Chairman.

Speaker (interpretation): I remind you that I am the Speaker. Minister of Environment, Minister Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Chairman. Mr. Chairman... . Sorry.

>>Laughter

Mr. Speaker...

>>Applause

Mr. Speaker, sorry. I apologize. I am listening too much.

>>Laughter

Mr. Speaker, I just want to clarify to the member that marine protected areas are a federal government initiative. The federal government does the consultations. The Nunavut government does not do the consultations on marine protected areas; the federal government does. We would like to be part of the process, but the federal government is in charge of the consultation process.

Going back to the member's other question about *Inuit Qaujimajatuqangit* and scientific research and when it is weighed, in the Department of Environment when we have any

hearings on any wildlife matters, we look at both the scientific research and *Inuit Qaujimajatuqangit* knowledge that is there and presented. If it is going to the Nunavut Wildlife Management Board, they hear all that and then the Nunavut Wildlife Management Board would make a recommendation to Environment on what they hear on both sides. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary, Member Towtongie.

Ms. Towtongie: Thank you, Mr. Speaker. Thank you for letting me know that you are not "Mr. Chairman." I apologize. *Ikuluuqpunga*.

According to what the Minister of Environment is telling me, there is improved consultation and collaboration between scientists and the Inuit traditional knowledge holders. If we are going to use scientific research to further territorial goals such as the scallop industry, what is the process for developing a scallop industry? Do you do scientific research or do you combine both scientific research and... ?

That is because the Chesterfield Inlet community has a decent plan, as you yourself know, how their future will evolve in terms of economic development using the natural resources. Has there been a combination of scientific research and Inuit? If so, there has to be further consultation and further collaboration with the local community. Thank you, Mr. Speaker.

Speaker: Minister Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. We know that there are scallops outside of Chesterfield Inlet. There has been a test fishery done for scallops in the past. It was probably about 15 years ago. There are scallops just offshore from Chesterfield Inlet.

If Chesterfield Inlet wants to do a scallop fishery, my recommendation would be that they work with Economic Development and Transportation because that is where the Fisheries and Sealing Division will be after April 1. They can do a test fishery. I highly recommend that if the hunters and trappers association or any other organizations or individuals would like to do some test scallop fisheries, then they can write a proposal and hand it over to my counterpart and it will be looked at. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Uqqummiut, Member Keyootak.

Question 770 – 5(2): Fuel Delivery Contracts

Mr. Keyootak (interpretation): Thank you, Mr. Speaker. I would like to direct my question to Minister of Community and Government Services.

Mr. Speaker, many communities contract out the petroleum delivery contracts to businesses and independent bodies that deliver fuel and provide fuel services, and in some communities it is usually the local Co-op that is contracted to provide this service while other communities have independent contractors who provide these fuel services.

Mr. Speaker, can the minister provide details on the various petroleum contractors and whether their invoices are paid on time? Are the contractors paid in due course or on scheduled dates? Can the minister provide this level of detail? Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Community and Government Services, Minister Kusugak.

Hon. Lorne Kusugak (interpretation): Thank you, Mr. Speaker. Yes, the fuel contractors have to submit an invoice and identify what they have done, such information as how many litres they have sold and so on. Those have to be submitted to the government before they're paid for the services that they provide. Usually it's paid on time. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Keyootak.

Mr. Keyootak (interpretation): Thank you, Mr. Speaker. This has been of a concern, especially in my two communities. Last year we ran out of aviation fuel because we did not get a refill. We waited quite long and the only time that an airplane could come in was when the weather was very nice. The individual who had a contract could not get the aviation fuel tanks refilled and that's not the only situation. There was another contractor who was concerned about not being paid on time even though they had submitted a detailed report on what services they provided to the community. Thank you, Mr. Speaker.

Speaker: Minister Kusugak.

Hon. Lorne Kusugak (interpretation): Thank you, Mr. Speaker. With the aviation fuel that he is talking about, I would like to have a meeting with the member outside of the House to find out exactly what happened in that circumstance. Usually the contractor provides a detailed report on what they have sold and what services they provided. At times the review takes a little bit longer than normal. Usually that is done before they are paid.

There are various reasons as to why there is a delay in payment at times. Usually it is the forms that have to be filled and they have to be filled correctly. We have to make sure that everything is in order before the contractor is paid, but I hear what you are saying and I will look into the matter. Thank you, Mr. Speaker.

Speaker (interpretation): Oral Questions. Member for Pangnirtung, Member Nakashuk.

Question 771 – 5(2): Pangnirtung Airport

Ms. Nakashuk (interpretation): Thank you, Mr. Speaker. Good afternoon. I say “good day” to the people of Pangnirtung.

This afternoon my questions are for the Minister of Economic Development and Transportation.

The minister is well aware of the need to find a long-term solution to problems with Pangnirtung’s current airport. In June 2019 the Legislative Assembly approved a \$512,000 capital carryover for the Pangnirtung Airport relocation project. My first question is: can the minister clarify how his department has

been spending this funding? Thank you, Mr. Speaker.

Speaker (interpretation): Minister of Economic Development and Transportation, Minister Akeegok.

Hon. David Akeegok (interpretation): Thank you, Mr. Speaker. I also thank the member for asking that question. Yes, it’s a longstanding issue for the community. This \$512,000 capital carryover is still there. We have not expended any of this money because we know that it’s going to cost a lot more than \$512,000. We will have to deal with this issue carefully. That’s where the government stands at this time. Thank you, Mr. Speaker.

Speaker (interpretation): Your first supplementary question, Member Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Speaker. I recognize that the Government of Nunavut submitted a proposal to the federal government under its National Trade Corridors Fund, and I share the minister’s disappointment that the federal government has not approved our request for the necessary funding to relocate the airport, which the minister has publicly estimated at between \$100 million and \$150 million. My question to the minister is: can the minister indicate if he is planning to resubmit this project to Ottawa? Thank you, Mr. Speaker.

Speaker: Minister Akeegok.

Hon. David Akeegok (interpretation): Thank you, Mr. Speaker. I also thank the member for asking that question.

In regard to the National Trade Corridors Fund, I'm sure that we will get another request because we would like to set aside another \$450,000. We will look at how much we can make a request for and I will make sure to talk to the members and to other entities and as a cabinet to see which pots of money we're going to be making a request to. I don't want to say what we're going to be requesting for, but the Pangnirtung Airport has to be relocated. Thank you, Mr. Speaker.

Speaker (interpretation): Your second and final supplementary question, Member Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Speaker. I understand exactly where the minister is coming from. This is a major concern to the people of Pangnirtung because it's right in the middle of the community and in the spring and summer it is also of a concern also with the planes landing and deplaning with the dust flying all over the community. It has a health effect on the residents. Again, we would like to urge the minister to access funds.

My last question to the minister is: as an interim measure, will the minister commit to examining the feasibility of extending the airport's runway or have they considered any other solutions? Thank you, Mr. Speaker.

Speaker: Minister Akeeagok.

Hon. David Akeeagok (interpretation): Thank you, Mr. Speaker. Yes, they look at different options, especially the relocation in Pangnirtung and Grise Fiord. There are slight discrepancies, especially with the relocation in

Pangnirtung and Grise Fiord. Just recently I asked the staff if it would be possible to build an ice runway because there is a possibility there. We will look at the different options, and I have asked the staff if it would be possible to build an ice runway and whether there would be challenges involved. We know that it is not going to be relocated right away because of the huge associated costs, especially in Pangnirtung. With the terrain there, there are very few places that we can relocate the runway to. Thank you, Mr. Speaker.

Speaker (interpretation): Members, please note that the time for question period has expired. Continuing on with the orders of the day. Written Questions. There are none. Continuing on. Returns to Written Questions. There are none. Continuing on. Replies to Opening Address. There are none. Continuing on. Replies to Budget Address. There are none. Continuing on. Petitions. There are none. Continuing on. Responses to Petitions. There are none. Continuing on. Reports of Standing Committees on Bills and Other Matters. There are none. Tabling of Documents. There are none. Continuing on. Notices of Motions. Notices of Motions for First Reading of Bills. Minister of Finance, Minister Hickes.

Item 15: Notices of Motions for First Reading of Bills

Bill 40 – Supplementary Appropriation (Operations & Maintenance) Act, No. 3, 2019-2020 – Notice

Hon. George Hickes: Thank you, Mr. Speaker. I give notice that on Friday, February 21, 2020, that Bill 40,

Supplementary Appropriation (Operations and Maintenance) Act, No. 3, 2019-2020, be read for the first time. Thank you, Mr. Speaker.

Speaker (interpretation): Notices of Motions for First Reading of Bills. Minister of Finance, Minister Hickes.

Bill 42 – An Act to Amend the Cannabis Act – Notice

Hon. George Hickes: Thank you, Mr. Speaker. I give notice that on Friday, February 21, 2020, that Bill 42, *An Act to Amend the Cannabis Act*, be read for the first time. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Notices of Motions for First Reading of Bills. Minister of Justice, Minister Ehaloak.

Bill 41 – An Act to Amend the Guardianship and Trusteeship Act – Notice

Hon. Jeannie Ehaloak (interpretation): Thank you, Mr. Speaker. (interpretation ends) I give notice that on Friday, February 21, 2020, that Bill 41, *An Act to Amend the Guardianship and Trusteeship Act*, be read for the first time. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Continuing on. Motions. Member for Hudson Bay, Member Rumbolt.

Item 16: Motions

Motion 063 – 5(2): Extended Sitting Hours and Days

Mr. Rumbolt: Thank you, Mr. Speaker.

I move, seconded by the Hon. Member for Iqaluit-Sinaa, that the Speaker be authorized to set such sitting hours and days as the Speaker deems fit to assist with the business before the House during the winter 2020 sitting of the Legislative Assembly.

Thank you, Mr. Speaker.

Speaker (interpretation): The motion is in order. To the motion.

An Hon. Member (interpretation): Question.

Speaker (interpretation): All those in favour. All those opposed. The motion is carried.

>>*Applause*

Continuing on. First Reading of Bills. Continuing on. Second Reading of Bills. There are none. Continuing on. Consideration in Committee of the Whole of Bills and Other Matters. With Member Rumbolt in the Chair and they will deal with Bill 39.

Before we proceed to the Committee of the Whole, we will take a 20-minute break.

Sergeant-at-Arms.

>>*House recessed at 15:15 and Committee resumed at 15:40*

Item 19: Consideration in Committee of the Whole of Bills and Other Matters

Chairman (Mr. Rumbolt): Good afternoon, members. I would like to call the committee meeting to order.

In Committee of the Whole we have the following item to deal with: Bill 39. What is the wish of the committee? Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. We wish to continue with the review of Bill 39 and the 2020-21 Main Estimates for the Department of Health. Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Are we in agreement that we first deal with Bill 39?

Some Members: Agreed.

Bill 39 – Appropriation (Operations & Maintenance) Act, 2020-2021 – Health – Consideration in Committee

Chairman: Thank you. I would now like to ask Minister Hickes if he has any witnesses that he would like to appear before the committee. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. If the committee will allow, I would. Thank you.

Chairman: Thank you, Minister Hickes. Does the committee agree to let the witnesses enter the Chamber?

Some Members: Agreed.

Chairman: Thank you. Sergeant-at-Arms, if you could please escort the witnesses in.

Thank you. For the record, Minister Hickes, if you could please reintroduce your witnesses. Minister Hickes.

Hon. George Hickes: Thank you, Mr.

Chairman. To my right, your left, Deputy Minister Ruby Brown, and to your right, my left, Greg Babstock, Executive Director of Corporate Services. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Welcome to your officials. When we left off yesterday, we were on page H-4 of the Department of Health under Directorate. It had a budget of \$56,384,000, and the next person on my list for questions was Mr. Quassa. Mr. Quassa, please go ahead.

Mr. Quassa (interpretation): Thank you, Mr. Chairman. Welcome. I'll be switching back and forth between Inuktitut and English as usual.

First of all, what drew our attention yesterday was that you're requesting new PYs. We all know that within the Nunavut government, there are many positions that are still vacant and many of these positions have ever been filled.

I'll ask the minister a question in English. (interpretation ends) Your department plans to add a number of PYs in 2019-2020 despite growing difficulties in filling positions that already exist. A number of new positions appear to be funded by third party agreements. What new positions are being added? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Quassa. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Thank you for the question from the member from Aggu. Twenty-nine of the new positions are new positions that are Vote 4 funded, so third

party funded and that's the oral health positions in every community and then the four coordinators. We have created Baffin into North Baffin and South Baffin and then one in the Kivalliq and one in the Kitikmeot.

With regard to the other ten positions, four of them being here at the hospital in Iqaluit, the member is correct, Health does have a number of positions that are vacant and I'll kind of qualify that on paper. One of the concerns or one of the issues that Health, like I had mentioned yesterday, is a little bit of a different beast than other departments, where the 493 positions, I think, that are vacant right now, about 415 of them are actually filled with casuals.

Our vacancy rate on paper looks dramatic, yet the majority of the positions are currently filled because of the necessity of providing health care. We don't have a choice in a lot of circumstances. It's not like you can be short a finance clerk or something for a period of time and then be able to deal with a backlog. When you are dealing with health professionals, we don't have the option of leaving positions vacant for a long time.

Yesterday I did speak to the overall government's objective, and the exercise that we undertook to avoid new PYs was to look at vacant positions, re-profiling, re-advertising, and taking opportunities at direct appointments where available. I am very proud to say that year to date we have accomplished 19 direct appointments for the Department of Health in numerous communities. I hope that responds to the member's question. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickey. Mr. Quassa.

Mr. Quassa (interpretation): Thank you, Mr. Chairman. If I understood correctly, maybe that position is related to dental health. I don't really know what the situation is now, but people used to be sent to Churchill for dental purposes. There were many people who used to be sent down there. I don't know if that is still running or how it is running, but I would just like to ask this question: will more dental work be done here in Nunavut now? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Quassa. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. I'm hoping with these positions that there will be less dental work in Nunavut. These are oral health care workers. They work with parents and children on preventative dental hygiene and those are locally hired positions. When we were talking yesterday about targeted Inuit positions, these are all targeted Inuit positions, one for each community. It is on preventative oral hygiene. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickey. Mr. Quassa.

Mr. Quassa (interpretation): Thank you, Mr. Chairman. (interpretation ends) The 2020-23 business plan indicates that there will be a significant increase in funding to the Directorate Branch in 2020-21. Can you describe what additional programs or resources will be provided with this new funding?

(interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Quassa. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. When I talked in my opening comments about the compensation and benefits back in, I'm trying to remember my numbers now, I think 2010, where departments were directed to fund from within with the NEU increases, this is bringing us back into balance. We have been able to absorb some of the increases over the years, but we are at a point now where it is literally \$8 million that we have been falling behind in our salaries and benefits for the incremental Nunavut Employees Union increases. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickeys. Mr. Quassa.

Mr. Quassa (interpretation): Thank you, Mr. Chairman. (interpretation ends) The 2020-23 business plan indicates that the implementation of updates to the departmental human resources plan continues to be deferred. What are the biggest challenges currently facing human resources development in the Department of Health? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Quassa. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. I apologize on the hesitation on my response. It is circumstantial or different circumstances within the HR process. Staffing has been an issue. We have recently had a new director of human resources start. We've had some

volatility in that division which has hampered some of our previous processes, I guess you could say.

That being said, there have been a number of improvements and I will take this opportunity to kind of celebrate the Department of Human Resources now, where there is a clearer link and clearer processes in place, and more focused energy, I guess you could say, from that aspect.

I am not sure if I am answering the member's question fully, but I will stop there and if he has anything further, let me know.

Chairman: Thank you, Minister Hickeys. Mr. Quassa.

Mr. Quassa (interpretation): Thank you, Mr. Chairman. With regard to medical travel, there were questions about medical travel yesterday from my colleagues. It is very important and we have witnessed or seen things happening where medical escorts are refused. Sometimes an escort is refused for someone who has to go to the hospital to have major work done on them like surgery and so on.

You stated that this would be reviewed. What is your position on this matter right now? Do you agree that things need to be changed? There are some people that want to go as escorts that are refused right away and then they end up calling us as MLAs to tell us what happened. Is your department going to be looking at other ways to improve this situation? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Quassa. Minister Hickeys.

Hon. George Hickes: Thank you, Mr. Chairman. As the member well knows, he has forwarded me some concerns from constituents and the majority of members have also over the years of medical escort policy, appeals, and concerns. It is very complicated. When we look at our medical travel budget, close to 40 percent of it is spent on escorts. We are continuously over in our budget expectations and forecasting for medical travel. We have to be very cognizant of how often and under what conditions we are sending medical escorts out.

That being said, where there is a clinical need identified, typically escorts are approved. There can be some communication errors with the case management or the local staff. Maybe the physician didn't recommend an escort, but if a client feels that they need one, there is a process and that is where they don't necessarily have to involve the members or myself. They can contact patient relations directly to appeal any escort decisions that are made. I do strongly recommend that if anyone has a concern, they act on it right away. There is a process in place where they have to do a review of the person's clinical needs, on whether they need an escort or not, of what services that are available.

I hope that answers the question. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Quassa.

Mr. Quassa (interpretation): Thank you, Mr. Chairman. Thank you, minister. I believe that you understand the situation now a lot better because it has a huge

impact in our communities. There are big concerns about this in our communities when people have to go on medical travel.

We also know about people who go for a diagnosis in their community. They go to the nursing station if they are sick, but then they keep being told that there is really nothing wrong with them. Some people we know end up paying their own way to go to Iqaluit or if they live in Iqaluit, they pay their way to Ottawa, or wherever they live in Nunavut. People who have paid their own way for medical reasons who are then diagnosed only to find out that yes, they have this illness or disease, can they make a request to be reimbursed?

We know that there are people in Nunavut who end up paying their own way for a (interpretation ends) second opinion (interpretation) from a doctor. With that happening, is there any way that they can get their money back when they have paid for their own ticket and then they find out that they do have an illness? This is after they have paid their own way to get a medical diagnosis. How are they dealt with? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Quassa. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I appreciate the opportunity to be able to speak to this. It is a rare occurrence. It doesn't happen very often and to be frank, I don't recommend this as a path. There are other options; again, going through the Office of Patient Relations or speaking to your health care provider in the health centre to get a second opinion or to elevate, make sure

that when the next physician visits, there could be an appointment made. In a case where it does happen, where there is an identified medical need, that person can contact the Department of Health and submit a claim. It would be investigated at that point and, if warranted, reimbursement would be available. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Next on my list, Mr. Qamaniq.

Mr. Qamaniq (interpretation): Thank you, Mr. Chairman. In the minister's opening comments, I believe it was on page 5 where he mentioned that 29 indeterminate PYs will be staffed by the Department of Health and there will be a children's (interpretation ends) oral health coordinator. (interpretation) I can't say it in Inuktitut, but he has identified there will be two coordinators, one in Iqaluit and also one in North Baffin. Has the community in the North Baffin been identified? That is my first question. Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Qamaniq. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Both the North Baffin and South Baffin coordinator would be located here in Iqaluit. They work with our dental program to make sure that it is all coordinated. That being said, we can't start any of the human resource recruitment process until this budget is approved. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Qamaniq.

Mr. Qamaniq (interpretation): Thank you, Mr. Chairman. If my next question

has already been asked, I apologize and I'll change my questions, if you could let me know, Mr. Chairman.

With regard to the grants and contributions being made available by the minister's department, there is an allocation of \$250,000 to be used for community-based health committees of council. If I'm not mistaken, he will clarify it. The hamlets already have committees. Are the funds being requested for health committees of council under the hamlet? I would first like to know if it is directed to them or to other committees. If the minister can respond, what activities are supported by this funding? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Qamaniq. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. The member is correct; this is for the health committees on hamlet councils. We provide \$10,000 to every community. What that does is it gives the council the resources to be able to put proposals together for other community wellness projects that they want to implement in their community so that they can apply for further funding. It gives the hamlet council some resources to be able to do the work behind that. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Qamaniq.

Mr. Qamaniq (interpretation): Thank you, Mr. Chairman. I also thank the minister for his response. If the budget goes through, I will remind my fellow members that in my home community, they can also apply for this type of funding. Thank you for that.

My next question, as you're the Minister of Health, one of the Department of Health's priorities listed in the draft 2020-21 business plan is to proceed with a legislative process to amend the *Tobacco Control and Smoke-Free Places Act*. What I'm talking about is: what are the types of amendments that you're considering in your department? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Qamaniq. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With this Act, we don't necessarily have proposals right now. That's part of the consultation process to see from other stakeholders or individuals or corporations or other government entities that have suggestions to make. The criteria that we're looking through the legislative proposal, there are four main themes and that's to protect Nunavummiut from second-hand tobacco smoke, to prevent people, particularly children and youth, from using tobacco, to reduce the visibility of tobacco products, and to regulate emerging products. The intent is with the recent influx of vaping products to be available. We don't have established recommendations at this point. That's part of the consultation process which will help frame our further legislative work. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Qamaniq.

Mr. Qamaniq (interpretation): Thank you, Mr. Chairman. My next question is still regarding tobacco control. I did smoke one time, but I did try to quit and it was very hard and challenging to quit.

I would like to ask in English. (interpretation ends) How does the Department of Health monitor and measure the success of tobacco reduction strategy? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. It's a good question and I commend the member for quitting smoking. It is a challenging task.

One of the things that obviously we try to promote with our tobacco reduction are the free services in health care on tobacco reduction or tobacco cessation products, but I do want to celebrate a little bit with our tobacco reduction team. With the measurements that they use, they do surveys, the information that they're getting, working with kids in schools to make sure that people don't start smoking, too often we see young children starting to smoke or chew in some communities. I don't have the information right at my fingertips, but there was recently a national award that was presented to our tobacco reduction team and I'll be speaking to that a little bit more later on in this session.

With regard to the activity of that team, they go around to the different communities, they travel to different schools, and they work with the community wellness coordinators on any smoking cessation programs or any proposals that come forward. I hope that answers the member's question.

Chairman: Thank you, Minister Hickes. I think the best way to quit smoking is to promote never starting smoking, and I have never smoked in my life, which is a

good thing. I always encourage kids not to smoke.

>>Applause

Thank you. Mr. Qirngnuq, do you have another question? Please go ahead.

Mr. Qirngnuq: Thank you, Mr. Chairman. I think this is my last question for today. The Department of Health works with the federal government and Nunavut Tunngavik Incorporated on the Northern Wellness Contribution Agreement. How do the programs and the initiatives funded through this agreement integrate with community wellness plans in Nunavut communities? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Basically what it does is it gives us money that we can add to the money that we are already contributing to the program that people can submit proposals for. They contribute to that fund so that we can offer more programming across more communities. Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Main, you have questions? Please go ahead.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I do have questions, I don't know if they're any good, but thank you for asking me. I have questions about executive and senior management of the department. The minister mentioned earlier that there has been some volatility in terms of one of the divisions. I'm looking at your Inuit Employment Plan and I note that there is one senior management position

that will be eliminated. You are going from 32, I think, to 31 positions. In terms of the capacity at the senior management level and turnover, I wonder if you can give us an update or a snapshot of where the department is at. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Without getting too deep into the weeds, there has been turnover. At the executive level in the last 18 months there has been 100 percent turnover. Obviously Deputy Minister Brown has been here for a little over a year now. Both ADM and the associate DM positions have also changed.

When we look at the workload that it puts on the different directors of the different divisions, it creates...I guess volatility is not really the perfect word, but it kind of suits the purpose, I guess. With any organization, especially something as complex as health with the clinical demands and operational requirements, you need stability. We're still adjusting to that, but I will say and I will take this time to publicly commend all the directors, including Mr. Babstock sitting beside me, for stepping up the plate. We didn't see a lot of speed bumps with the transition that we're still experiencing.

I know that doesn't really get into the meat of the question and I don't have that level of detail on that one PY. I think it might have been an interim position, but I'm not positive on that. Maybe if the member could either rephrase so I can look at the *Hansard*

and maybe get back to him, or I'll take a look at it. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I apologize; it was kind of a broad question, so I'll be specific. Looking at your Inuit Employment Plan, page 158 of the business plan, you are projecting that at March 31, 2021 you will still have two vacant executive positions, and I find that a bit troubling. You are projecting to fill one of your three vacant executive positions in the next fiscal year. I want to know what the reason for the inability to fill two of three vacant executive positions is. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I apologize for the confusion. Maybe I do not understand the question properly. I do apologize, Mr. Chairman, and to the member, but I'm not fully understanding what the question is.

Chairman: Thank you. Mr. Main, if you could clarify your question, please.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) On page 158 of the business plan under "Executive Positions," it shows "Total Vacant Executive Positions" as of September 30, 2019, three vacant, and the projection at March 31, 2021 is two vacant positions. I'm just wondering why you're not projecting to fill all three of those vacant executive positions because, as the minister mentioned, they

are quite important to operating the department. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I apologize for wasting the committee's time with my lack of comprehension. I get it now.

I'm just trying to think how to phrase this appropriately. It is not that we are not trying to. There have been, again, some recent developments with a couple of the positions. I can't get into a lot of detail of where we are looking at filling them in more permanently with acting members of our service right now in those positions. Thank you.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. Thank you, minister. (interpretation ends) They are acting persons in the executive positions. Are there any senior management or executive positions that are being filled by contract at the moment? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. No. I will say our chief public health officer is on a contract basis. Thank you.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) We are on directorate, I understand that, and for that reason, I am asking kind of broader questions.

Within the senior management and executive level, I'm looking at the priorities under directorate and I don't see anything specific to cost control, budget control, "finding efficiencies" is what I think they call it. Is the department going through an internal cost control or cost-cutting exercise at the moment? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I'm going to answer this in kind of a weird way. I'm going to ask Mr. Babstock what direction he has been given on fiscal responsibility as a director within the Department of Health, if the Chair will allow.

Chairman: Thank you, Minister Hickes. Mr. Babstock.

Mr. Babstock: Thank you, Mr. Chairman. It is a prevailing thought that we always are looking to accrue efficiencies, looking for best practices, always looking for ways to save money and be efficient and still continue to deliver effective health care to all Nunavummiut. Thank you, Mr. Chairman.

Chairman: Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you for the response and I

understand it would be a constant thing because you are constantly coming forward with supplementary appropriations, but just to return to my question: is there a new cost-cutting initiative? Is there increased emphasis on cutting costs in the current fiscal year and going forward into this next fiscal year which we are considering, or is there nothing new in terms of the cost-control measures within the department? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Let me put it this way: pretty much every time I do a tour of a health facility, the topic of the direction that they have been given on financial responsibility gets brought up. I know that message is getting out there. That is why I wanted Mr. Babstock to respond to the initial part of the question.

It sounds like it is just like an ongoing, another-day-at-the-office, "Let's try to save some money here and there." I can assure you that the direction that I have provided through Deputy Minister Brown and the direction she is passing on down the ladder is we need to get a very strong grasp of our fiscal situation, our forecasting, and our budgeting process. Health is a challenging one because it is so demand-driven.

That being said, maybe I will call it a renewed focus. It might be a better word. It has always been a focus of the Department of Health, but gone are the days where you can just blindly sign off on things and not worry about the financial accountability if it. Deputy

Minister Brown is doing, I am going to say, a pretty diligent job on keeping all the divisions to task. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm trying to tie these two topics together: the lack of stability at the senior management and executive level, the vacancies at the senior management executive level, and the need for cost control. Within the department, is there any evidence to show that the emphasis or the renewed focus on controlling costs is harming retention and/or staffing efforts at the senior management and executive level? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I would say no. These are professional positions. These are people that know that that's part of their job description. Unfortunately until somebody gives us a blank cheque, we do have to worry about cost controls.

One of the benefits that we do have, even though there are vacancies, the people that are backfilling are very competent. When you look at an ADM level that has a number of directors reporting to them, it is the directors of each division that has oversight, and then the ADM and then ultimately the DM have different levels of oversight.

The competency of the staff that are in the positions like I had mentioned

earlier, I want to take the time to celebrate them because they are they glue that's holding everything together with some of the turmoil that has been going on. I do want to take the time to thank them. I appreciate the member's question. Thank you.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. I will move on to something else. On page 148 on suicide prevention, (interpretation ends) Quality of Life, (interpretation) it talks about how the budget has been cut from \$11.7 million to \$11.5 million. It is not a very big amount; it is cut by \$200,000. I would like to know why you are requesting a smaller budget even though it is a very important issue. Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I appreciate the diligence that the members are taking with our budget. It is a \$265,000 decrease. Those were expenses that were incurred during the start-up of the Quality of Life Division. Now that the division is in place, those initial start-up costs are no longer needed. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) On the long-term suicide prevention action plan mentioned on page 149, and implementing that plan, which I have here as a priority for the upcoming fiscal

year, and so going through the plan, it is a very thorough document and its very ambitious, I will say. The priority is to implement this plan, but my question is: by implementing this plan or if the department tries to implement this plan, do you need more money to implement it? Basically that's what I'm asking. Do you have the money in this proposed budget to implement the actions that are assigned to Health under this suicide prevention action plan? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With a lot of the recommendations from the strategy, there are shared responsibilities, different divisions within the Department of Health and other departments that are responsible for it. Would more money help? Obviously. It might help accelerate some of the issues, but we have made quite a bit of movement on a number of the issues, a lot are a work in progress and some are more challenging than others.

I think there were 149 recommendations, if I recall correctly. It is ongoing work and it is going to be continually evaluated. If it is ever determined that more funds can be justified, then a business case would be brought forward. With what we have right now, we feel it is sufficient for the work that we are doing right now. Thank you.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman.

(interpretation ends) Under this Inuusivut Anninaqtuq Action Plan, the Department of Health is not the only party. There are all kinds of partner organizations. There are other government departments, Nunavut Arctic College, Culture and Heritage, and Inuit organizations. To date, on this suicide prevention action plan, when it comes to the other partners, have there been any issues encountered in terms of...? I guess I'll ask it like this: are the other partners pulling their weight? Is everybody still bought into this plan or is the action plan getting stale and maybe losing momentum among the partners? (interpretation) That is my last question. Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes, they are pulling their weight. Some actions within the plan, if you look through all the different recommendations, are fairly straightforward and some are very complicated. Will I stand here and say that every communication channel is working perfectly? Probably not, but we are working very well with our partners and our partners are working very well with us. I get regular updates on the items that are in the recommendations.

Because the Quality of Life Division is still fairly new, we are still building a lot of the capacity and maintaining the momentum that was created by developing that arm of the department. It even just took a while to get the office all staffed up, which they are now. There are some really great people that are doing a lot of good stuff out there. Again I thank the member for the response and

I hope he keeps the pressure on us to make sure that we keep the momentum going on these initiatives. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. I want to touch on what was discussed a little bit yesterday by my colleague, Mr. Lightstone.

As the minister is aware, over the last few years I have raised the need for a health board to be implemented in Nunavut. Nunavut is the only jurisdiction without a health board and I have also seen some motions in the past that call on the government to create one and in support of. To date there has been no development in this area. I know the minister did propose an advisory board, but in my opinion, without the decision-making powers, the board wouldn't be able to make their own decisions, especially if they contradicted the department.

I'm wondering if the minister can explain to us what specific reasons have led to this decision not to create a health board so that all of us here and Nunavummiut, including the regional Inuit associations, know why their requests for a health board is not followed through on or is denied, if you can explain why. Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Angnakak. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I will respond this way: when you look at other jurisdictions the way

health care is delivered, it might be funded through the jurisdiction, through the province or territory, but they have a number of different health authorities that are responsible for providing health care in a certain geographic area.

In Nunavut obviously it is government run. We provide the health care. It is not parceled off to a number of different health authorities. Even look at the NWT where they have the Stanton Health Authority. I think they renamed it recently. If we were to put a health authority or a health board here in Iqaluit to have the responsibility for health care here, having that transition from the different community health centres, having the transition from southern health care, it would add another layer of bureaucracy that I just don't think is necessary right now.

To be honest, I have never received any other correspondence from any other party that wants to go that route and if somebody brings me a legitimate argument on a value to it, I will take a look at it again. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. I thank the minister for his response. Can the minister tell us if his response is based on a report or consulting work or something that has been figured out? Has somebody actually gone and figured this out or is this something that the department feels would not be a good idea? I would like to know if there is substantial evidence that actually proves that as well. For Nunavut, we always say we are unique,

so in some ways maybe something could be worked out. If you do have a report or documentation, is that something that you could share with us? Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Angnakak. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. No, there is no report or anything. There is advice from internal of different professions within the Department of Health.

With the Chair's indulgence, Deputy Minister Brown actually used to work for a health authority, so she would know very well the intricacies of working with government through a health authority and maybe might be able to bring that insight to how it would or would not be relevant to working here in Nunavut, with the Chair's indulgence.

Chairman: Thank you, Minister Hickes. Ms. Brown, please go ahead.

Ms. Brown: Thank you, Mr. Chairman. I have worked across Canada in various provinces with provincial and regional health authorities. They are all struggling with what is the ideal structure to fulfill all the needs and functions. I can tell you that when they were formed, it was because the hospital systems were stand-alone and they were not incorporating the full, holistic component of community care, long-term care, and so on. They were amalgamated under one umbrella.

The set-up in the provinces is very different than we have in Nunavut. Our backbone to our health care system is the community health centres. We have

started off with a strong base of community health with primary health care that directs our actions and our hospitals are the supporting structures to that. It's sort of a different set-up.

The value added may not be there at this time. As the territory grows, it warrants another look at it. The provinces also did that to standardize because they operating in silos. Every hospital was doing their own thing, every community clinic was doing their own thing, so they wanted to standardize. Our process, the way we operate is standardized already and so we wouldn't gain any benefit from that, and there are no efficiencies. The other thing was to bring it under one administrative umbrella and so it created efficiencies for them. We already are small enough to be connected and be efficient.

For those reasons and from my experience and my connection with my colleagues in the national organizations that look at structures and functions, Nunavut is not in a position at the moment, from my view, to benefit from that. Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Brown. Ms. Angnakak.

Ms. Angnakak: Thank you. Thank you for your response. My feeling is that we used to have a health board and I can't remember when and which Assembly dissolved it, and the reason was purely money is what I understand, but Nunavummiut have really missed that.

The way it stands now, all the power is in the department. You guys decide everything. You decide on behalf of everybody else. There's no real way and

if you tell me, “Oh, well, we have a health representative in every community,” that’s not really working. People want to be able to sit around the table representing their community to be able to have some kind of say in how health care is delivered. Right now you don’t have that, so it works very well for you.

Not everybody on the street has that kind of money to go and do their own justification of why a health board would be good to argue against what the department is saying. People don’t have that. Maybe Inuit orgs and that do, but this is not something that a lot of people in the communities could do. Like the minister said, if you could present him with an argument to go against what the department’s position is, then maybe he would look at it.

I think that having a health board would back up the minister’s statement as the Minister of Finance yesterday or the day before when you did your Budget Address where you say it’s the people’s government. That really perked my ears up because I like to hear that. I think that’s the right direction to go, but I also feel that we have to give opportunities for people to be involved with their government in a meaningful way. That’s why I keep raising this all the time. I feel it’s something that would benefit.

I would really like to see an independent review done by the department to look at this and to go out to the communities and talk to health care service providers, talk to communities, talk to elders, talk to the people who use your service. That’s my advice and I guess a request, but I’m going to leave that topic.

I do want to ask a question in regard to your priorities to establish a development team for the Nunavut recovery centre. This is to work on addictions and trauma. Can you provide an update on what steps have been taken to establish this team and which areas are they working in? Thank you.

Chairman: Thank you, Ms. Angnakak. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. To date we have hired a project manager to oversee the development of the addictions and trauma program, but without the further resources, we have been working with NTI and the federal government to develop a plan, a strategy. This is why we’re here looking for this budget, to further that process with money. Thank you.

Chairman: Thank you, Minister Hickey. Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Chairman. I would like to return to the letter we received from the minister and I would like to note that it appears as though the HR Division within the Department of HR is fully staffed and it seems that almost all of the positions are filled, whether it’s an indeterminate, casual, term, or someone on a transfer assignment. I just want to point out, looking at the business plan over the last 12 months, the department has increased capacity or filled positions from 650 to 680, meaning that the department was able to fill 30 new positions within a 12-month period, I guess net.

When I think of the workload that senior management has, specifically directors,

and I have heard that as much as 80 percent of their time is devoted to HR-related issues and the remainder of their time is devoted to running their specific programs. Given the fact that your HR department is fully staffed yet it seems like the department is having trouble filling these positions, are managers receiving enough support to help begin the hiring process? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Lightstone. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I would say it would depend where and how often the management team gets together and what training and what experience they bring to the table. One of the biggest challenges we have with staffing isn't the HR process; it's the availability of housing. That's one of the biggest limiters of the numbers that we're putting out. I do appreciate you putting in "net" in there because there is obviously volatility. Positions come and go.

When we look at the cultural competency training or orientations when new staff come online, I have often said that there needs to be a little HR component with anybody that has any supervisory positions. It's not as easy as even I think it is. It's something I have been talking about for a couple of years now.

With the new Department of HR, I am really looking forward to some of the training opportunities that are going to be brought forward and even with the new division that HR is proposing on employee wellness. I think that will alleviate a lot of the burden on

administrators from their HR loads, where people understand their rights from both sides, from the employer and employee. I'm really hopeful that when Human Resources comes forward with their budget ask, that portion gets approved. I think it is going to be a key component of dealing with this issue of the HR burden on managers and directors. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Chairman. Thank you for the response. I wish the minister and the Department of Health and all the senior managers the best of luck in filling these vacant positions.

Moving on to the next item in the response from the minister, on the fourth page or so, there is a section devoted to community-based mental health worker programs. It states that the department has collaborated with job evaluation to create entry-level positions specifically for Inuit, in which they can progress through a ladder professional development system. I just wanted to point that out because I feel that it's a great idea and it's really great to hear that the department is working on this initiative. Once again I just want to applaud your efforts on your Inuit employment initiatives and I really once again wish you the best of luck in achieving that.

I'll move on to my next topic, budget-related issues. I don't want to put too much blame on the Department of Health because I know that it is a reoccurring issue with several departments, not just the Department of

Health, but it is the issue that I brought up before and it is recycling of budgets. Looking at the information that was provided to me in written responses, the breakdown of budget down to the section level and it is obvious that so many sections, almost...a really high percentage are just mirrored from one year to the next.

Without getting into too much detail, there are just two questions under the directorate that I would like to pose. The first question is: given the fact that there has been a lot of recycling of budgets over the prior years, have there been some adjustments in this upcoming budget? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Lightstone. Minister Hickee.

Hon. George Hickee: Thank you, Mr. Chairman. The bulk of the changes in the budget are, especially in this branch, to do with the catching up, if I could be allowed to call it that, on the salaries and benefits. There has been work done. I know I spoke to it in the past wearing my other hat on how important it is that all departments deal with the actuals and work on better forecasting models.

Health is, I am going to say it again, a little bit of a different beast where it is obviously the largest department in the government, not just money-wise but PYs as well too, and the complexities of having the three regions and then the headquarters and coordinating everything together. I am sure Mr. Babstock can attest that getting all that data together from across the territory is challenging at the best of times and making sure that it is correlated. I will say that it is a positive work in progress.

The word has gone out, I guess you can say. Again, from my other hat and obviously having the responsibility for Health, I want to make sure that Health is one of the leaders of that campaign. It is a little bit more challenging because it is so big and cumbersome, if you want to call it that, but we are doing better. Thank you.

Chairman: Thank you, Minister Hickee. Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Chairman. Thank you, Minister Hickee. That's good to hear. Looking at the information that was provided, I would like to highlight the budget for telehealth. Last year this item lapsed 53 percent, \$1.2 million of the budget, and it looks like in prior years a million dollar lapse in this area has been the average. I have two questions for that specific line item, telehealth. Why has that budget lapsed a significant amount year over year? Is it due to telehealth being underutilized or just that it is over-budgeted and will it be corrected in the upcoming fiscal year? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Lightstone. Minister Hickee.

Hon. George Hickee: Thank you, Mr. Chairman. Just before I respond to that question, I want to touch on my last response; just to add to it a little bit. The executive directors from the regions are in town this week, and I was just informed that this morning was their budgeting exercise training component. I can tell you this is as of today even it is a continual work in progress.

With regard to the budget for telehealth,

one of the biggest components that were leading to the surpluses, I guess, was staffing. That division is staffed better now and we are not anticipating any of that money being surplus this year. Thank you.

Chairman: Thank you, Minister Hickeys. Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Chairman. Thank you for the response. The next item I would like to highlight is the nurse recruitment strategy. This section has had a budget of over \$4 million for a number of years. Last fiscal year 93 percent of that was lapsed; over \$4 million of that budget last year was lapsed. Could you tell us a little about the nurse recruitment strategy, which has this substantial budget, and why so much of that is being or has been lapsed year over year? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Lightstone. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. We don't call it the "nurse recruitment strategy." It is the medical professions recruitment, so we have actually expanded it to encompass other health professions. Basically the reason that there was money not being utilized in the last year, and it is being utilized more this year, again I go back to staffing as one of the issues but also just building it up. Because we have changed the design and the model of it, it takes a little while to get our feet off the ground and get running. I don't know what else I can add to that. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickeys. Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Chairman. Thank you. It is quite interesting that it is now the medical professional strategy. It is good to know that it has been expanded.

My next question is: for the upcoming fiscal year, is the budget for that line going to remain constant at \$4.7 million, and do you anticipate it being fully utilized? Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Lightstone. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. We have remained with that budget and we are hoping to get more utilization of those funds this year than we did last year. Thank you.

Chairman: Thank you, Minister Hickeys. Ms. Nakashuk, you had questions? Please go ahead.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. (interpretation ends) I have a few questions on positions within the department and I wanted to first ask a question in terms of the mental health positions in the communities. I am curious to know if there are mental health workers in all the communities in Nunavut and, if not, which communities don't have mental health supports. (interpretation) Thank you.

Chairman: Thank you, Ms. Nakashuk. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. I was just looking for the detailed information. I know all communities do have mental health coverage. I believe a couple of smaller

communities, Resolute Bay and Grise Fiord, may have a shared resource. I'm just going by memory on that one. I don't have...now I do have the information.

If we are looking through the communities here in the Qikiqtaaluk as an example, the only two communities, like I said, were Resolute Bay and Grise Fiord where they use a shared resource. All the other communities in the Qikiqtaaluk have a mental health professional or paraprofessional. There are a few communities in the Kivalliq and none in the Kitikmeot that are totally empty right now. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Ms. Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. Looking at the mental health workers, they have huge responsibilities, especially because they help people with addictions or people who are having too hard of a time with their minds and some of them are more critical than others. There are some others that can be dealt with by the Department of Family Services. They usually ask for someone who can speak in Inuktitut and a lot of times when there's just an English-speaking social worker, they won't go to that place.

The question I have is: has there been any thought to put Inuit social workers or mental health workers for the communities? Thank you. That's my first question.

Chairman: Thank you, Ms. Nakashuk. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Absolutely yes, that's with part of the written response that Mr. Lightstone brought positive attention to the department on.

We have taken our mental health and addiction worker program and actually split it into three different categories so that we can get more people involved in that field with lower requirements at the entry level. Every time they achieve a different level of whether it be academic or experience levels, they can increase their professional profile. That to me is going to be a critical component and the member is absolutely correct that we need more people in the communities working in the mental health field.

One of the challenges I repeatedly hear is that the mental health professionals in the health centres, there's too much turnover where people have to go over their story over and over and over again and for some people with their mental health issue, that's re-traumatizing them right there. It is something that we're cognizant of and that's why we have taken the step to break the mental health and addiction worker program down into those three categories so we can get more Inuit into those positions and develop them into higher level positions.

Hopefully some of the local employees will further their education even more and go in to get their social work degree or psychiatric nursing or whatever their own goals and their own vision has. Thanks, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Ms. Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. It's good to hear that there can be some planning done to have more staff in the communities that can work on people with mental health issues. The question I have is: which communities are being looked at to have workers like that or what is your plan to slowly get these in all the communities, to get them trained? Which communities are going to be first? Thank you.

Chairman: Thank you, Ms. Nakashuk. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. Some communities already do have mental health and addiction workers in them. Obviously the priorities would be the communities that don't. One of the other success stories that I'll take the opportunity to bring attention to is our paraprofessional program as well too, where we're taking local employees and giving them training opportunities to further their own education and experience so that they can move into more impactful positions, if I can kind of use that term.

Ultimately we do have mental health and addiction worker positions in all communities, so this is a territory-wide campaign, but like I said, I would expect the initial focus to be targeted on the communities that currently do not have any mental health and addiction workers. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickey. Ms. Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. Another question I would like to ask is people who help people with disabilities, some

communities have more disabled people than others and there are elders who need more help too. Considering them, do all communities have workers that can help people with disabilities or elders who need more help? What sort of training do they need in order to get a job like that in the communities? Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Nakashuk. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. There are positions...again I apologize. I'm not hesitating on the response; I'm just trying to find the correct wording. There are individual circumstances, so each case is different. There may be home care involved. There may be personal care workers involved. If there is an elder facility in the community, there are also personal care workers that are employed there.

We do work with Nunavut Arctic College on different programming. There are different modules for personal care workers so that they can assist, whether it be family or as a career. We want to make sure that those opportunities for training are there. That's one of the purposes when we look at medical escorts is so that when they're speaking to the health care provider, they are learning how to take care of the person that they are escorting. One of the conditions of needing an escort is if you need to communicate and help train or work with the family to make sure that their needs are being met.

I hope that answers the member's question. Thank you.

Chairman: Thank you, Minister Hickey.

Ms. Nakashuk, please continue.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. I had this question regarding individuals who might be in a position to be able to become trained to help deal with family members who are disabled that have to travel because we have a lot of empathy for people in that position.

We know that some situations require rushed matters where they have to suddenly travel to go see their family at, let's say, Embassy West in Ottawa. There are situations where they have to travel quickly to get out. Also, families are not able to travel as a whole group and only some people can travel to go see a family member.

Are there resources within the department where an elder could be repatriated to their home community to see the other family members, their grandchildren, their family, so that they could see their loved ones? I want to know if there is such a program in place or if it has ever been considered. Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Nakashuk. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I thank the member for the question. That actually happens fairly regularly. I wouldn't say every day, not like that, but again, it depends upon the level of care that needs to be provided to the patient. They may not be able to be cared for at home full time, hence needing to be in a facility.

If they can go home for a couple of weeks and visit with family or for an

extended period of time, as long as the health care needs can be met in the community, we do bring people back so that they can spend time with their family in lieu of sending family down to them because we do have limitations on how many family members or how many trips that people can take.

Where the care level is appropriate and available, we do send people back to their home communities, whether it be for a visit, an extended visit, or even repatriating where... . Let me go at it this way. One of the benefits that we have when somebody is in a facility is they get better care than what was provided. That's why they had to go to the facility. In some cases they even improve to the point where they can move back home indefinitely. There are success stories in this process as well. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Ms. Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. It is good to know that there are possibilities of visiting home for a bit. There have been some people who have come back to Pangnirtung. When a loved one leaves, it is like you never see them again. It is that type of situation. If there could be a plan in place within the year that they could be scheduled visits to see their loved ones, it would be nice.

We have experienced this personally. My uncle and my aunt both passed away at the facility within the past two years without ever going back home. I have seen and experienced this myself. I know that they wanted to go home for a bit, but they were not able to go home.

It's regretful when people don't get to see their relatives again.

This should be looked into again. There are people who are homesick. Maybe they can be brought back home for a short time all at once. There are not that many Nunavummiut down there. If some of them are able to go, then the rest of them should be able to go as well. Can this be looked into further so that those who have been away from home for a very long time can be brought home for a short time? Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Nakashuk. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With our care and continuing or home care and continu...Home and Continuing Care Division, you would think I know the title of that one, with the communications that they have with family members, and first of all I... .

Thank you, Mr. Chairman. Basically I'm going to say that there are ongoing communications with family members. If any family member feels that their communication lines aren't as open, typically most families have a designated contact person. That is one of the avenues to make sure that when you have an elder or a loved one that is in a facility, whether it be in-territory or out-of-territory, that family member is specified to be a contact person for the whole family. It alleviates a lot of the confusion and potential mixed messaging going out.

I do want to assure anyone who is out there watching and people in attendance here to communicate with the Home and Continuing Care Division if they have

any questions or any concerns that they have about their loved ones. That is what they are there for is to help provide that level of comfort knowing that your family member is being taken care of properly. Thank you.

Chairman: Thank you, Minister Hickes. Ms. Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. I also thank you for clarifying that. I will go to something else. One of the things that are continually discussed is the Office of Patient Relations. I would like to get more information on that office and to get clarification. We are usually informed by our offices of people who require more assistance and we direct them to the Office of Patient Relations. I have been involved a number of times in trying to assist individuals to redirect their questions. I would like to ask this question. When they have a complaint, how far is it looked into? Are there a lot of employees who look into complaints? Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Nakashuk. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I will say that they track every issue that is brought to their attention. Every case that is brought to their attention, I will say, is followed up with.

That being said, the volume is increasing. I'm trying to remember the exact numbers and the number of cases. I know it has been steadily increasing as more and more awareness...we have done some public service announcements. You probably heard

them on the radio, in newsprint of “Contact Patient Relations if you have any concerns,” and I strongly encourage people to contact that office.

Typically the initial response is dependent upon the complexity of the case, but the goal is at 48 hours, there should be at least some type of a response or acknowledgement that the issue is being looked at. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Ms. Nakashuk.

Ms. Nakashuk (interpretation): Thank you, Mr. Chairman. (interpretation ends) In terms of the volume increasing, I’m curious to know how many. Are there a lot of patient relations officers in each territory or where are they located? Are they here in Iqaluit and how many are there? (interpretation) Thank you.

Chairman: Thank you, Ms. Nakashuk. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I believe there are currently four PYs and they’re all located here in Iqaluit. Thank you.

Chairman: Thank you, Minister Hickes. Ms. Nakashuk.

Ms. Nakashuk: I guess in terms of expansion, are they planning to increase more of those positions in the different regions? (interpretation) Thank you.

Chairman: Thank you, Ms. Nakashuk. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. At this time we’re not

looking at expanding outside of Iqaluit. The access to the medical services and personnel is a lot easier done by being located here. We will continue to monitor the volume of activity in that division. That is one division that I very strenuously want to maintain and make sure that they have the resources to be able to function. We will continue to monitor the volume of cases that are going through that office and, if necessary, we will bring forward any additional supports proposals. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. I’m going to give Ms. Towtongie an opportunity to ask questions and I’m going to cut it off at that. We’ve had 12 people with lines of questioning on this particular page. We will move on to the next. Ms. Towtongie.

Ms. Towtongie: Thank you, Mr. Chairman. My questions are on public health and I thought we were on H-5. I would like to be the first one when we go to H-5. Thank you.

>> *Laughter*

Chairman: Thank you, Ms. Towtongie. We’re on page H-4. Health. Directorate. Total Operations and Maintenance, to be Voted. \$56,384,000. Agreed?

Some Members: Agreed.

Chairman: Thank you. Moving on. Page H-5. Public Health, with a total operations and maintenance budget to be voted of \$24,563,000. Ms. Towtongie.

Ms. Towtongie: Thank you, Mr. Chairman. I’ll be nice and short.

With public health, my question to the minister is I'm very concerned about we have the highest birth rate in Canada, at least one thousand times, and we have increased our population from 27,000 when Nunavut was created by 35 percent to 39,000. To me this is not good news. The birth of a baby is great news, but what are they all going to do?

We have a chronic housing shortage and we do have a social net income support, but into the long-term vision, when I ask Nunavummiut, I get concerned because I see children becoming parents while they're children and being unable to parent at that time and getting into relationships when they're not prepared.

My question to the minister is: has there been any outreach to the schools to hold off on pregnancy, hold off on relationships, complete your education, and do some type of family planning instead of catering to their needs and "You can have daycare subsidy, you can have child tax credit"? That becomes a means of having money, having babies. We have to be realistic as the population of Nunavut that if we are not preparing, we are going to be hit like a tsunami. I apologize for using that, but we have to think in terms of 10 years what these parents and children are going to all do. Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Towtongie. Minister Hickee.

Hon. George Hickee: Thank you, Mr. Chairman. I will say upfront I'm not sure on what the sexual health curriculum that the Department of Education puts forward. That might be a more appropriate question for the Minister of Education.

I will say that within our health centres we have reproductive and sexual health programming with our health care professionals in there. It can be difficult, like the member states, but as a health example, when a child goes into the health centre, it is not always easy to have that conversation in front of their parents. That is why our health staff get trained on how to get messages from the kids if they want to meet with the health care professional by themselves. There are different practices at different health centres. I don't know the exact parameters of it, but there is some training that has gone on, on how to ask a child whether they want their parents or not without the parents being able to say "No, I'm going in" type of thing.

It is a very important part of the sexual health and sexual well-being and confidence. As kids mature, they have more and more questions, and if there is not a family member that is comfortable having that conversation, that is where, whether it be the health care staff or the health care professionals in the health centre that can work with the child to help educate them on reproductive and sexual health... I had a little starter there for a second.

I hope that answers the member's question. With regard to what all these kids are going to do when they grow up, that might be a better a better question for the Minister of Economic Development and Transportation.

>> *Laughter*

Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickee. Ms. Towtongie.

Ms. Towtongie: Thank you, Mr. Chairman. I think it is not specifically to each department. I think, as leaders and as a government, we should take the leadership, each department and myself responsible.

I have seen or heard young girls got one baby and then a year later they got another child, and she is counting the economic cost. She told me, "I got \$400 for the first child. Now I can have \$800 a month." That is dangerous. That is the type of thinking we are producing across Nunavut: the more children you have, the more income support and child tax credit you will get, but the cost of living is high. Let me put it this way: I'm not saying giving birth is bad. I'm saying a lack of planning for the future is horrible.

The new *Public Health Act* came into force this January 2020. What new activities will be initiated as a result of the new legislation and regulations? That's the conversation we should be having. Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Towtongie. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With the new *Public Health Act* it is more of a regulatory, to make sure that the accountability from health care professionals has a structure to it and defined parameters. Also, we want to make sure that the communication lines are open. You bring up some valid points where planned pregnancy is obviously a preferred practice where people can set themselves up and be ready for a family.

When we're looking at strategically

bringing resources forward like "I Respect Myself" program that we offer, it's teaching kids that it's their body, that they're in control of their body, and that's a very important message, I think, to promote, promoting safe sex. There are condoms or female... I'm tongue-tied right now; I can't even think of the right word... contraception. They're also available through the health centres.

Those are discussions that I encourage young adults to have those conversations with health care professionals, but it's also a family conversation that needs to happen as well too. I know with my daughters, as they matured, we continue to have these dialogues and it's not a taboo topic and it shouldn't be a taboo topic. Those are the types of parenting skills that we want to promote. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Ms. Towtongie.

Ms. Towtongie: Thank you, Mr. Chairman. Thank you for listening to my comments because to me it's a serious and troublesome aspect for young children producing children. That's the fact across Canada; Nunavut does have the highest birthrate, very high.

I would like to say that more presentations at the schools should take place, even from the elders. The reason why I say that is I know there's a lot of abortion across Nunavut, but an elder said to me, "You can tell when the doctors are keeping abortion confidential. We can tell who has had abortion because the body continues as if it's producing and the loss of hair tells us this child has had an abortion."

And then the elders told me, “These children are producing children when their body is not physically mature enough to give birth.” I think that type of Inuit IQ should be part of the education curriculum. I believe that the frontline health workers should start approaching schools and giving discussions. Otherwise, ten years, even five years we will have a very unhealthy young population.

I don’t really have a question. I just wanted to bring that up and say my piece. Thank you, Mr. Chairman.

Chairman: Thank you, Ms. Towtongie. Mr. Hickey, you wanted to comment on that? Please go ahead.

Hon. George Hickey: I do. Thank you, Mr. Chairman. I appreciate the opportunity. When I talked about “I Respect Myself” campaign, there’s also, through the Inuutsiarniq Literacy Program with the Department of Education, they have an “About Me” campaign and it’s age appropriate. At different grade levels they’re introduced to different concepts of contraception, puberty, healthy relationships, consent, story lines are developed to help align with the Department of Education’s reading program. There are some programs. You might be able to get some more detailed information, my apologies for the Minister of Education, during his appearance or through another forum. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickey. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I assume that we will have some questions

for the Minister of Education on related topics to Ms. Towtongie’s questions days and weeks to come. I believe that some of the curriculum that we’re discussing is seriously outdated by decades, but we will get confirmation.

My first question is I wanted to request data similar to what was provided about a year ago by the department. The department provided a letter and they gave a breakdown of the community wellness program funding as well as breakfast program funding. Whether the minister would be able to commit to providing this at a later date to the committee is my request. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. Yes, I can do that. Thank you.

Chairman: Thank you. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I’ll just keep asking ‘til I get a no.

The issue that Ms. Towtongie touched on in terms of population growth and the Department of Health, I note that in the letter provided on November 21, this was following one of the annual supplementary appropriation exercises. The department mentions, this is on the third page of the letter, “Nunavut’s high birthrate affects medical travel expenses, as almost all women must travel outside of their home communities to give birth.” It also mentions that infants typically have the highest per capita medical travel costs and they require

special treatment for illnesses.

In terms of what my colleague was asking and taking a government-wide look at this and the impact it has on the bottom line, and the topic of family planning and planned parenthood, become a parent but make sure it happens when you're ready for it, whose responsibility is that within the government, planned parenthood? Is it the Department of Health? I don't think it's the Department of Education. Is it simply something that families and parents have to deal with? Does the department have a position on this planned parenthood heading? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. I'm not looking at passing the buck because I don't think that's appropriate. We all have somewhat of a responsibility. That being said, we do partner together on initiatives. Like you say, it's not the Department of Health. It's not the Department of Education. It's not the Department of Family Services. It's all of us depending upon what topic is up.

When we're talking about sexual health and sexual well-being and respecting your body, and identifying different consent, we partner with the Department of Education. When you're talking about some of the social service needs of foster care and awareness on those sides, then Family Services steps up to the plate. From a health standpoint, that's those reproductive or sexual health or communicable disease programs that we

have across the territory.

I know I'm not giving a condensed lens answer because it is numerous departments are all interrelated depending upon the specific topic. I wouldn't say Health is directly responsible nor is Family Services nor is Education. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickeys. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) The minister mentioned earlier access to birth control, condoms, and other methods. I'm going to ask about birth control, the pill, or whatever you want. It can be a needle now too, I believe.

For young women who want to access contraception, is there a way for them to access it where they don't have to step foot into a health centre at the community level? The reason I ask that is that small communities, the gossip is terrible and it's really harmful for young people if they're trying to access health services, specifically I'm talking about sexual health. Is there a way for young females or any female for that matter, I guess, to access birth control without entering a health centre and, if so, how do they access it? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. Not that I'm aware of. I know there are community health workers in the community that maybe a local young woman would feel more comfortable speaking to, maybe in a private manner.

Again, that puts a lot of onus on those care workers outside of their work hours.

The thing that concerns me about the question the most from Mr. Main is that it is like mental health. We've got to break down these taboos. Who cares why somebody is going to the health centre? Maybe they've got a sliver under their fingernail they can't get out. It is nobody's business why they are in there and I know rumour mills are rampant, but people need to, for one, mind their own business. We have pretty strict privacy legislation for workers. Unfortunately we can't enforce that out with members of the public sometimes.

I think we've got to get past some of these stigmas. There is nothing wrong with going to see a health care professional and it is nobody's business why you are there, in some cases even your parents' business why you are there. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickey. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I agree it isn't anybody's business, but trying to change that behaviour and tell people to stop gossiping or stop being nosy is going to be pretty difficult.

You look at young people in the school. It is under your business plan here on page 150 where it mentions "Population Health" and it says "School Health." How often are health professionals... I'll say nurses for example. How often are they available inside the schools in the community? Is there a program where a nurse will be assigned to visit a school, be given a private area where they could

talk with students or consult with them, or does that not really exist and the nurses or the professionals stay in the health centre? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. It is actually a good point. I am not aware of any specific guidelines or conditions or parameters where they are supposed to be in there for certain topics. I know audiology goes in and dental or oral hygiene and that, but when it comes to health care professionals, usually it is by invitation. I do know of some health centre staff that have gone into schools and had discussions on different topics, usually through invitation. That would maybe be something worth talking about with the supervisor of health programs in the health centre and maybe the DEA or the principal of a school specifically to look at what options can be available. I'm sure the health care staff would be open to it. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickey. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you, minister. I just put it out there as a suggestion. Speaking to the oral health coordinator, if that is his position, in my home community he was saying it is location, location, location. You go to where the young people are and then the services. That really stuck with me, so I hope that you can look into that.

On page 151 of your business plan, your

priority for the upcoming years says, “Use reporting from the sexual health program to inform future program priority areas.” It is kind of like you have a priority where you are going to set priorities. I just want to know what that means and maybe an example of what would happen under that one. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. I was just getting some reading material here.

One of the examples is like health protection where we talk about the STIs, the education component there. I guess it is a plan to have a plan to a certain degree, but it depends on which topic that you are going into and how you develop the information and how it is going to be dispersed, I guess would be the understanding out of that. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickey. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) Also on page 151 one of the priorities for the current fiscal year was developing cannabis programming and under the status it says training was delivered, and then I don’t see anything about cannabis on the priorities for this upcoming year and so it is concerning.

People are using a substance which is called shatter. I am told it is very popular on the street now. It is a very concentrated version based from

cannabis. From what people tell me, it sounds like it’s a hard drug almost because you only need a very small amount to get intoxicated. Does this cannabis programming and the training include these new things that people are doing? Is this something that is still going to be worked on in the upcoming fiscal year? It is very concerning and it’s not staying the same; it’s changing. The drugs are changing. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. That is one of the challenges when we identify these types of programming, when we are looking at whether it be training or whether it be education, or whether it be just information sharing, media campaigns, different awareness programs that you put out there. We’re trying to promote safe use of legal substances. When you are talking illegal substances, it opens the door to a very complicated avenue, then where do you stop? You get into methamphetamines or cocaine or heroin or different hard drugs and over-the-counter prescription medications are a big issue of using inappropriately.

I am speaking very anecdotally here, but sometimes giving information about things that aren’t available right at their fingertips sometimes creates that curiosity. I am hoping through this program that people are aware of legal and safe methods of consuming cannabis, as an example, and that’s given. There is a danger going into the illicit side of things where, like you mentioned, you know it’s happening, you see it’s happening, and that’s where

I think where the justice system needs to step in and take a very serious look of what the dynamics of a community is going on, what's available, and due diligence on how to mitigate that.

From a health standpoint, we're not in the enforcement business; we're trying to promote safe use of legal substances. I know that is not giving the member the response he is probably looking for, but that is our responsibility. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm not sure if this substance would be legal or illegal. I think that the next phase is concentrates and it might be classified as that. I am not sure. It is cannabis-based. This cannabis programming work is going to continue in the coming fiscal year. I just want confirmation on that from the department. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes, this is continuing. We do have shared cost recovery on that. We put in money through Vote 1. We also get money through Vote 4 funding on this as well. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I requested information on the Community Wellness Agreement and

the breakfast programs. This is public health. Is there a trend or does the health department have data on malnourishment among children in Nunavut? Food security is a huge issue. I know that Health can't solve it on their own, but if a child comes in to the health centre, for example, and it is identified that they are not getting enough food, it is an issue.

Is there a protocol in place? I know that there are protocols in place for things like sexual abuse. In the school system, a protocol happens and the teacher has to tell somebody. The student tells the teacher and the teacher has to tell somebody. Around malnourishment in children, is there any protocol existing within the department? (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes, that is reportable. As a health care professional, if you suspect malnourishment, you take a blood test which would identify levels like vitamin D and things like that which would justify reporting. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) In the letter to the committee that will be provided, would the minister be able to include as much information as possible on that malnourishment topic? I'm not trying to create too much additional work for the department, but I'm trying to understand whether there is a

measurable trend in this occurrence. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. We can provide the information that is available. I will have to look into how that is tracked, how many occurrences, and if it is a very small number, I wouldn't be able to report, especially locations. Typically, if it is under five cases on almost any health issue, we don't report on it. As far as the information on how the reporting structure works, I will definitely make sure that I share that with the members. Does that suffice? Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickeys. Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Chairman. Welcome, minister and your officials.

On page 150 of the business plan there's a description for the chief medical officer of health. It "provides leadership and expertise to population health and health protection programs." The thing that comes to mind is that the chief medical officer must have a pretty heavy workload. Perhaps the health care positions under that officer can't deal with the entire workload.

In thinking of what is written there under Health Protection, the second paragraph, they work on public health and safety. The environmental health officers "inspect and monitor activities and premises that may affect the public's

health." In thinking of that, does the chief medical officer of health have staff under him so that they accomplish what they were set out to do? I want to get clarification, hence my question, Mr. Chairman. Thank you.

Chairman: Thank you, Mr. Qirngnuq. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. I appreciate the question. When we talk about capacity and the workloads some people take on, it can be concerning. I do want to alleviate the member's concerns with regard to our chief public health officer position. For one, he's doing a very good job. There is a team behind him. He does have different responsibilities under his watch. Ultimately I think there are 125 PYs that report through his division through public health and everything. I hope that alleviates the member's concern. We have consistently met all standards of practice. Thank you.

Chairman: Thank you, Minister Hickeys. Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Chairman. Yes, that's clearer now. Nunavut is still quite young when you think of it. Are the number of people who are in bad health being reduced or have any diseases been mitigated or made fewer? That's my question, Mr. Chairman. Thank you.

Chairman: Thank you, Mr. Qirngnuq. Minister Hickeys.

Hon. George Hickeys: Thank you, Mr. Chairman. That's a really good question. When you look at dietary information and health information as it matures,

there is more and more knowledge. People are living longer in better health. I would say the health indicators are obviously improving in that regard.

One of the biggest concerns that we have across the territory is the levels of smoking. We have by far higher levels of smoking than anywhere else in the country and it's who is smoking are very concerning. We work with as many groups as we can to bring awareness.

We have dieticians that work with our facilities to make sure that menus and dietary requirements are followed and adhered to. There are different clinics that are put on within the health centres.

There's mental health, obviously, the impact that it's having. The rates of people accessing mental health services are increasing more and more, which is one of the reasons why we are requesting to increase that aspect of our budget this year and why we had to go for additional funds last year. More and more people are becoming more aware that not just physical health is important but mental health is as well.

I hope that answers the member's question.

Chairman: Thank you, Minister Hickey. Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Chairman. Part of my question was answered. It's very hard to ask the right question to get the right answer. If more questions are posed about this, then we will get more information, but I'll move on to something else.

This was asked earlier about concerns

with young people going to health centres. When you're a young person, you have a lot of freedom these days and we all know that. However, with the department of heritage under the language division, I don't think it's going to work out the way they intend because we try to base our lives with our ancestors as a foundation. I think it would be good to say that in the future as a government, we will be progressing with our work to make sure that we run things properly for our Inuit. It is not a real question; it is more of a comment. I have other comments to make as well, Mr. Chairman. Thank you.

Chairman: Thank you. I'll take that as a comment. We are on Public Health. Mr. Kaernek.

Mr. Kaernek (interpretation): Thank you, Mr. Chairman. Good afternoon, minister. We can be proud that you are going to be creating jobs for Nunavut. We are proud of that. On page 7 of your comments, the Department of Health is always going to be checking to see the most efficient way of running things for Nunavut.

Have any considerations been given on this matter or have you forgotten about midwifery? One of the MLAs stated that Nunavut is apparently producing the highest number of children in Canada. Have you checked to see if you can hire or create midwives that can do some of the birthing in Nunavut? Is it still under consideration by the Department of Health? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickey.

Hon. George Hickey: Thank you, Mr. Chairman. Currently we have 10

midwifery positions across the territory. Not all of them are filled right now. Mostly with CSAs, we've got a few positions in Cambridge Bay, Rankin Inlet, and here in Iqaluit. Like I said, some of them are still being filled and some are being covered by casual staffing actions.

That being said, this is the year of nurses and midwives. It is a very important component, not just from a safety standpoint. We want to make sure that people are in safe circumstances, but midwives are so important, not just for the delivery part of things. That is one of the misconceptions, I think, that is put out there. You look at the role of midwives and doulas across the world and it is the prenatal care, dealing with the expectant mother, making sure that healthy habits are being formed, and with the post-delivery, you are looking at making sure that the breastfeeding and making sure that... . It is very challenging, especially for a new mother who has never been a mother before, especially if you are in a community and maybe not around your own mother or aunts or other women to help you throughout it.

We use Inuit maternal workers here in Iqaluit, as an example. I understand the importance of the service. I also understand the complexities of it. When we were doing a pilot project in the Kitikmeot, as an example, that were taking the midwives from Cambridge Bay where they are stationed and sending them out to outlying communities to work with expectant and new mothers and bringing those services that I was just talking about a minute ago, and we are seeing some positive results already on that. We are looking at

rolling that out in the Kivalliq as well too of having the midwives go out to the outlying communities where they can work with expectant mothers.

The challenge that we have, obviously and especially in the smaller communities, is having the midwife stationed there. You can't have one person on-call 24/7, 365. We have to take a look at multiple postings in a community. We have worked with our two regional communities and then obviously with the capital city here. We have a little bit more work to do, but it's something that I am very passionate about myself. You kind of took over my reigns of when I was a regular member. I think I was the only member that ever asked about midwifery and you have taken up the challenge and I hope you keep it up.

The Midwifery Program itself is something that I would like to see grown. I have said many times that women have been having babies for a long time. My father was delivered by a midwife. It's a very important part of our culture. I applaud the member for raising it again. I don't have much movement on it as of now. Especially I know where you're going of getting midwifery into your communities. I do look forward to a day where we're going to achieve that. There's going to be a lot more groundwork and capacity building is going to need to be accomplished before we can actually fulfill that. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Hickes. Mr. Kaerner.

Mr. Kaernerk (interpretation): Thank you, Mr. Chairman. I always urge you to

create this. The medical travel expenses are too much. It's over \$70 million. If we look at all the communities where they can be helped by creating jobs, if the government is not spending so much money and creating jobs in the communities, it's a win-win for everybody.

Husbands can go along with their wives, but the children are left behind and they have to be babysat. I have seen a case where a person had to go on a particular day and the due date was too far. The lady finally left very close to her birthdate so that she doesn't have to wait so long. I would like this looked at further. We also have to consider the children without supervision being left behind and they change their behaviour when they don't have their parents around.

In your opening comments in the last part, (interpretation ends) "The department envisions a health care system that embraces Inuit societal values and empowers Nunavummiut to live a healthy life." (interpretation) Listening to that statement and as you stated earlier, nobody can work 24 hours a day or be on call 24 hours a day.

Maybe if you do it this way: young people are giving birth while still in school. Maybe they can help with midwifery or on sexual health work. Perhaps you can work with the Department of Education and create this and start it where young people still in school are taught more about sexual health. I'll end there for now. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: I didn't really hear a question there, but I do agree with the member in the majority of what he's saying. I think it's a very important part of our health care delivery that we do need to further work on and I'm going to continue to champion it as much as I can. Thank you.

Chairman: Thank you, Minister Hickes. Mr. Main.

Mr. Main (interpretation): Thank you, Mr. Chairman. At this time I move a motion to report progress. Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Main. There's a motion on the floor to report progress. The motion is not debatable. All those in favour. Opposed. Motion carried. Sergeant-at-Arms, if you could please escort the witnesses out. I will now rise to report progress to the Speaker. Thank you.

Speaker (interpretation): Report of the Committee of the Whole. Member Rumbolt.

Item 20: Report of the Committee of the Whole

Mr. Rumbolt: Thank you, Mr. Speaker. It has been a long day.

Mr. Speaker, your committee has been considering Bill 39 and would like to report progress. Mr. Speaker, I move that the Report of the Committee of the whole be agreed to. Thank you, Mr. Speaker.

Speaker (interpretation): There is a motion on the floor. Is there a seconder? Minister Kusugak. The motion is in

order. To the motion.

An Hon. Member: Question.

Speaker (interpretation): All those in favour. All those opposed. The motion is carried.

Third Reading of Bills. Continuing on.
Orders of the Day. Mr. Clerk.

Item 22: Orders of the Day

Clerk (Mr. Quirke): Thank you, Mr. Speaker. *Orders of the Day* for February 21:

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

17. Motions

18. First Reading of Bills

- Bill 40
- Bill 41
- Bill 42

19. Second Reading of Bills

20. Consideration in Committee of the Whole of Bills and Other Matters

- Bill 39

21. Report of the Committee of the Whole

22. Third Reading of Bills

23. Orders of the Day

Thank you.

>>*Applause*

Speaker (interpretation): In accordance with the authority provided to me by Motion 63 – 5(2), this House stands adjourned until Friday, February 21, at 10 a.m.

Sergeant-at-Arms.

>>*House adjourned at 17:57*

