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Iqaluit

Speaker: The Honourable George Qulaut, M.L.A.

Legislative Assembly of Nunavut

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(Amittuq)

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Hon. Johnny Mike

Minister of Family Services; Minister responsible for the Qulliq Energy Corporation

Deputy Chair, Committee of the Whole

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Review Council

(Tununiq) Deputy Speaker and Chair of the Committee of the Whole

Hon. George Hickes

(Iqaluit-Tasiluk) Minister of Health; Minister responsible for Suicide Prevention

> David Joanasie (South Baffin)

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Iqaluit, Nunavut Monday, February 27, 2017 Members Present:

Mr. Tony Akoak, Ms. Pat Angnakak, Hon. Monica Ell-Kanayuk, Mr. Joe Enook, Hon. George Hickes, Mr. David Joanasie, Mr. Pauloosie Keyootak, Hon. George Kuksuk, Mr. Steve Mapsalak, Hon. Johnny Mike, Mr. Simeon Mikkungwak, Mr. Paul Okalik, Hon. Keith Peterson, Mr. Emiliano Qirngnuq, Hon. Paul Quassa, Hon. George Qulaut, Mr. Allan Rumbolt, Mr. Alexander Sammurtok, Mr. Tom Sammurtok, Hon. Joe Savikataaq, Mr. Isaac Shooyook, Hon. Peter Taptuna.

>>House commenced at 13:29

Item 1: Opening Prayer

Speaker (Hon. George Qulaut) (interpretation): Mr. Isaac Shooyook, can you say the opening prayer, please.

>>Prayer

Speaker (interpretation): Good afternoon, my fellow Nunavummiut, members, ministers, and (interpretation ends) Premier.

(interpretation) Before we start, I have a letter to read.

Speaker's Statement

(interpretation ends) Thank you, members. During Friday's sitting of the House the member responsible for Nunavut Arctic College made a statement concerning the partnership between the college Interpreter/Translator Program and the Legislative Assembly.

I am very pleased to inform the members that the students are taking their next step forward today. For today's sitting our Members' Statements will be interpreted by our students. I ask all members to stay within the speed limit when making their statements today.

We will now proceed with the orders of the day. (interpretation) Item 2. Ministers' Statements. (interpretation ends) The Hon. Minister for Executive and Intergovernmental Affairs, Mr. Peter Taptuna.

Item 2: Ministers' Statements

Minister's Statement 243 – 4(3): Government of Nunavut Signs MOU with Dalhousie University

Hon. Peter Taptuna (interpretation): Good afternoon, my colleagues, Nunavummiut, and Kuglukturmiut.

(interpretation ends) Mr. Speaker, I rise today to inform my colleagues about an exciting development with regard to our government's Hivuliqtikhanut Leadership Development program.

As I have previously mentioned in the Assembly, Hivuliqtikhanut aims to strengthen Nunavut's public service and provide the necessary tools and skills for our employees to become effective future leaders.

Mr. Speaker, on February 16, Deputy Premier Ell-Kanayuk, on behalf of the Government of Nunavut, and officials from Dalhousie University signed a memorandum of understanding (MOU) to establish the accreditation offered to graduates of our Hivuliqtikhanut supervisors' and senior managers' series. Mr. Speaker, I am pleased to announce that thanks to this newly signed MOU, Dalhousie University is offering pathways to degrees in three of their graduate programs. Hivuliqtikhanut supervisor and senior manager series graduates can now receive six credits towards a Master of Public Administration Degree, four credits towards a Master of Information Management Degree, or three credits towards a Master of Business Administration Degree.

Mr. Speaker, 34 GN employees, including 19 Inuit, have graduated since the start of the Hivuliqtikhanut leadership development program in 2015. There are another 47 students currently taking the program, including 27 Inuit, 18 of whom are in the first emerging leaders' series.

Mr. Speaker, this program is based on the Government of Nunavut's leadership competency model, which is created with Inuit societal values as its basis. I am thrilled to be able to offer this experience and education to our public servants and look forward to seeing the benefits in departments across the territory. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Minister of Nunavut Family Services, Mr. Johnny Mike.

Minister's Statement 244 – 4(3): Omingmak Emergency Men's Homeless Shelter

Hon. Johnny Mike (interpretation): Thank you, Mr. Speaker. Good day, Nunayummiut.

I am pleased to share that the Omingmak Emergency Men's Homeless Shelter opened in Cambridge Bay on December 6, 2016.

(interpretation ends) Mr. Speaker, there are individuals and families within our communities who are without a safe place to sleep, who lack the stability and security of a home, and who struggle from day to day just to survive. Many of these individuals are taken in by friends or families, resulting in overcrowded homes, while others are forced to seek shelter in places not meant to be housing.

(interpretation) Mr. Speaker, the Omingmak Emergency Shelter is managed by the Cambridge Bay Wellness Centre and has an (interpretation ends) eight (interpretation) bed capacity. It will provide a safe place to sleep, shelter from the cold or a place where men can re-find stability and take steps forward towards independent living again.

(interpretation ends) Mr. Speaker, my department supports homeless shelter services in the territory through contribution agreements. We are advocating on behalf of individuals who find themselves homeless and are working to implement the Angirraqangittuliriniq Framework for Action for Nunavut's Absolute Homeless.

(interpretation) Mr. Speaker, I would like to commend the staff and volunteers of all of our territory's emergency homeless and family violence shelters for their hard work, compassion, and dedication to supporting Nunavummiut who find themselves in a crisis. They are truly invaluable. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Ministers' Statements. Minister of Education, Mr. Paul Quassa.

Minister's Statement 245 - 4(3): French Language Instruction

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. I wish to share about French language instruction for Nunavummiut in my department.

(interpretation ends) Mr. Speaker, my department offers French first language instruction to students in Iqaluit. Eighty-four students are currently enrolled in our French First Language program at the Trois-Soleils school. We also service francophone Nunavummiut from outside of Iqaluit by providing support to parents wishing to offer home schooling to their child.

(interpretation) Mr. Speaker we also have an after school French program offered at Nakasuk School and Joamie School. The program aims to offer greater exposure to French for students who are interested in learning the language. Theme-based activities in French are linked to arts, sports, games, technology, and music to facilitate learning. Mr. Speaker, the after school program is open to all grades 4 and 5 students.

(French interpretation) Mr. Speaker, my department also offers French as an Additional Language program to students whose mother tongue is not French. I am very happy to say that my

department noted a total 53 percent increase in the number of participants in the past three years with 103 students participating in 2013 to 158 participants in 2016.

>>Applause

(French interpretation ends) Mr. Speaker, French as an Additional Language is offered in all Iqaluit schools. Students from grades 4 to 12 can take French language classes within the regular school day.

(interpretation) Mr. Speaker, our territory has four official languages and the French language programs that my department offers gives our students who wish, the opportunity to learn one of our four official languages in Nunavut classrooms. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Ministers' Statements. Minister of Environment, Mr. Johnny Mike. I'm sorry. Joe Savikataaq.

Minister's Statement 246 – 4(3): Conservation Officers' Conference

Hon. Joe Savikataaq: Thank you, Mr. Speaker. Today I would like to bring to your attention the recent successful completion of our annual conservation officers' conference, which was held during the first two weeks of February.

This annual conference is an opportunity for our officers from all across the territory to learn new skills that will enable them to provide better services to Nunavummiut. Some of the training courses that were delivered this year included a session on verbal intervention and de-escalation of conflicts. This will help our officers to deal effectively with conflicts that may face them in their day-to-day jobs. There were also sessions on *Inuit Qaujimajatuqangit* held with local elders. In addition, officers received training in the use of new environmental protection equipment. This equipment will enable them to deal more effectively with spills in their communities.

Mr. Speaker, my department is committed to providing all our conservation officers with the very best training possible so that they can have the skills and tools they need to ensure both their safety and that of the communities that they serve. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Ministers' Statements. Minister of Culture and Heritage, Mr. George Kuksuk.

Minister's Statement 247 – 4(3): Uqausirmut Quviasuutiqarniq 2017

Hon. George Kuksuk (interpretation): Thank you very much, Mr. Speaker. Good day, my fellow Nunavummiut and good afternoon to my colleagues.

Mr. Speaker, I rise today to tell you about Uqausirmut Quviasuutiqarniq, Nunavut's annual celebration of Inuktut taking place throughout the month of February.

(interpretation ends) This year's theme is Unikkaaqtuat/Ittarnitat (legends). Traditional and contemporary Inuit legends are an important form of art and cultural expression, conveying our connections and perceptions of the world through our language.

The Department of Culture and Heritage provided Inuktut resources to every school, daycare, and library in Nunavut, including legend books, activity books, and posters. The department produced several resources, including an activity book on legends, a family literacy handbook on Inuit clothing, and much more.

Mr. Speaker, I call on all Nunavummiut to celebrate this important part of our culture and to use Inuktut everyday. *Unikkaaqtuat upigilavut ammalu uqausivut quviasuutigilavut*! (interpretation) Let's be proud of our legends and let's be happy about our language. Thank you very much, Mr. Speaker. (interpretation ends) Thank you.

>>Applause

Speaker (interpretation): Thank you. I have no more names on my list for Ministers' Statements. Moving on. Item 3. Members' Statements. Member for Tununiq, Joe Enook.

Item 3: Members' Statements

Member's Statement 458 – 4(3): Recognition of Pond Inlet Youth

Mr. Enook (interpretation): Thank you, Mr. Speaker. First of all I say "good day" to my wife, Mary. Let's have a good day.

Before I make my statement, I understand there are two young interpreters in the booth who are new. I am proud of you and I hope you enjoy your time here. It is quite daunting to be an interpreter and I am glad to see that you are not intimidated by the job.

I would like to recognize another young resident of Pond Inlet. Mr. Speaker, as you will recall, two constituents whom I have recently recognized are Rachel Smale, who has been appointed a member of the Prime Minister's Youth Council, and Michael Milton, a young entrepreneur.

I would also like to take this opportunity to note that the Prime Minister's parliamentary secretary for youth just recently took the time to visit Pond Inlet in person.

Mr. Speaker, today I recognize Patricia Kunilusie. Patricia is another young resident who has taken part in the Inspire Nunavut Program. Let me share with you how the program has described her initiative:

"Patricia's challenges trying to find affordable clothing for her children inspired her to start the Annuraaqtaarvik - a thrift store in Pond Inlet. The Annuraaqtaarvik offers options for all ages and for every budget. Patricia is filling a large gap in the Pond Inlet clothing market as there are currently very limited clothing options available. The store carries new and second-hand inventory. Part of the profits is donated to the local food bank."

Mr. Speaker, Nunavut needs the energy and enthusiasm of young people like Patricia, Michael, and Rachel. I am very proud to call them my constituents and I ask all members to join me in acknowledging them. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Members' Statements. Member for Baker Lake, Mr. Simeon Mikkungwak.

Member's Statement 459 – 4(3): Nutrition North Canada Public Meeting in Baker Lake

Mr. Mikkungwak (interpretation): Thank you very much, Mr. Speaker. I rise today to express my appreciation and thanks to the many residents of Baker Lake who took the time last month to participate in a public meeting concerning the federal Nutrition North Canada Program.

Mr. Speaker, as my colleagues are very well aware, the Nutrition North Canada Advisory Board has been holding public meetings across the north over the past several months. January's meeting in Baker Lake was originally scheduled to be held last year but was postponed due to the weather in Baker Lake and the Kivalliq.

Mr. Speaker, over 100 of my constituents took part in the meeting that was held last month in January. This was an excellent opportunity for residents to express their concerns regarding the Nutrition North Canada Program., food security, and other related issues.

Mr. Speaker, I look forward to reviewing the final report from this consultation process and I encourage the federal government to listen closely to what they heard from my constituents and other northerners. Thank you very much, Mr. Speaker.

Speaker (interpretation): Thank you. Members' Statements. Member for Aivilik, Mr. Steve Mapsalak.

Member's Statement 460 – 4(3): Naujaat Royal Canadian Army Cadet Corps

Mr. Mapsalak (interpretation): Thank you, Mr. Speaker. Good day to the people of Naujaat, Chesterfield Inlet, and Nunavut.

(interpretation ends) Mr. Speaker, I rise today to talk about the Royal Canadian Army Cadet Corps in Naujaat.

Mr. Speaker, as you know, Canada's national cadet program includes the Royal Canadian Sea Cadets, the Royal Canadian Army Cadets, and the Royal Canadian Air Cadets.

Mr. Speaker, the 3055 Royal Canadian Army Cadet Corps in Naujaat plays an active role in the community. In addition to taking part in the program's training and citizenship activities, cadets contribute to such initiatives as community cleanups.

Mr. Speaker, I am very pleased to note that the 3055 was named Nunavut's top cadet corps last year, and I pay tribute to Lloyd Francis for his leadership as its commanding officer.

Mr. Speaker, on a personal note, I also want to take this opportunity to congratulate Warrant Officer Terrance Mapsalak, my grandson, for having been

selected to participate in an international exchange that has taken place in Chile.

Mr. Speaker, please join me in saluting our Nunavut cadets and instructors for the positive example that they set for our youth. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Members' Statements. Member for Rankin Inlet North-Chesterfield Inlet, Mr. Tom Sammurtok.

Member's Statement 461 – 4(3): Nation-building

Mr. Tom Sammurtok (interpretation): Thank you, Mr. Speaker. (interpretation ends) I rise today to again speak about the importance of nation-building at a time when we mark 150 years of Confederation.

Mr. Speaker, I was pleased to note that the Minister of Finance's recent Budget Address made reference to the proposed Kivalliq-Manitoba road.

At a time when we are moving forward to opening the new Meliadine mine near Rankin Inlet, it is essential that we continue to work closely with our Manitoba partners to maintain momentum on this initiative.

Mr. Speaker, I asked questions last week on the status of this initiative. In his responses to me, the responsible minister indicated that he had not received clear replies from his federal counterparts regarding our efforts to demonstrate the strategic importance of finally connecting this part of the nation to the rest of Canada. Mr. Speaker, that's disappointing.

Mr. Speaker, it's becoming more common to hear people speak about Canada being a nation that extends from coast to coast to coast. Let's make that a reality during this important anniversary year. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Members' Statements. Member for Rankin Inlet South, Mr. Alexander Sammurtok.

Member's Statement 462 – 4(3): Congratulations to Graduates of Underground Mining Program

Mr. Alexander Sammurtok

(interpretation): Good day to the people of Rankin Inlet, Nunavummiut, and (interpretation ends) colleagues.

Thank you, Mr. Speaker. I rise today to extend my congratulations to the recent graduates of the Introduction to Underground Mining Program at the Nunavut Arctic College's trades training centre in Rankin Inlet.

Mr. Speaker, I know I do not have to explain to you or my colleagues the importance of providing the kind of training that will lead directly to employment and career opportunities across Nunavut.

Mr. Speaker, I was very pleased to have recently attended the graduation ceremony for:

Devon Kannak; Kyle Power; Wayne Tattuinee; Richard Nattar; Simeoni Samok; Dean Nahalolik; Lloyd Sammurtok; and Clark Adams.

I wish them the best of luck in their future careers. I would also like to acknowledge the hard work of the program instructor, Robert Kenney.

At the appropriate time, Mr. Speaker, I will be tabling a photograph of the graduating class.

I also would like to extend my congratulations to Brandon Laalu Oolooyuk, who completed, passed, and was awarded his journeyman status as an electrician, including receiving his Red Seal this past December. Thank you very much, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Members' Statements. Member for Uqqummiut, Mr. Pauloosie Keyootak.

Member's Statement 463 – 4(3): Qikiqtarjuaq Marine Infrastructure

Mr. Keyootak (interpretation): Thank you, Mr. Speaker. I rise today to again address the issue of developing a new marine facility for Qikiqtarjuaq.

Mr. Speaker, I asked a number of questions last week to the Minister of Economic Development and Transportation on this issue. Mr. Speaker, I was pleased with some of her answers but disappointed with others.

Mr. Speaker, I asked the minister a very clear question last week about why the Government of Nunavut's own Interdepartmental Committee on Capital Planning did not select the Qikiqtarjuaq marine facility project for submission to the federal government's New Building Canada Fund.

Mr. Speaker, this is one of the Government of Nunavut's own committees and it is composed of the Government of Nunavut's own employees. Mr. Speaker, I am very confident that this committee documents the specific reasons for why it approves some projects but not others.

Mr. Speaker, my community deserves a clear answer about why the Government of Nunavut did not submit this project to the federal Building Canada Fund. I will be asking the minister the same question at tomorrow's sitting of the House and I respectfully ask her to be prepared to provide a clear answer.

Mr. Speaker, on a positive note, I was very pleased that the minister expressed willingness to have her department work with the municipality to see what specific improvements need to be made to the proposal for a new port for the community so that a new proposal can be submitted to the federal government. I thank her for this and will be seeking further clarification at tomorrow's sitting on the timeline for this work. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Members' Statements. Member for Netsilik, Mr. Emiliano Qirngnuq.

Member's Statement 464 – 4(3): Condolences to Family in Constituency

Mr. Qirngnuq (interpretation): Thank you, Mr. Speaker. I rise today to say that a constituent of mine passed away over the weekend by accident in one of my communities. Let us remember the family members and fellow residents of my constituent in our prayers. I ask my colleagues to join me in marking this tragedy here in this House. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Members' Statements. Member for Iqaluit-Niaqunnguu, Ms. Pat Angnakak.

Member's Statement 465 – 4(3): Successful Fundraising for the New St. Jude's Anglican Cathedral

Ms. Angnakak: Thank you, Mr. Speaker. Good afternoon, everyone. I'll try to read slowly.

Mr. Speaker, I would like to take this opportunity to share some very good news.

In 2004 I was a member of the volunteer committee that was formed to raise monies for the renovation of the old St. Jude's Anglican Cathedral here in Iqaluit.

One year later, in 2005, because of an arson fire, our beloved cathedral was burned down and destroyed.

Mr. Speaker, the original cathedral was built by local labour and was a huge source of pride for all of the residents of Iqaluit. Immediately after the fire, the local fundraising committee refocused and we began to raise funds to build a new cathedral.

Mr. Speaker, 13 years later and after many rummage sales, craft sales, chili bake-offs, barrel sales, and many more fundraising activities, the last monies owed to our new cathedral have been paid off.

>>Applause

This good news was shared to the community at the AGM of the local vestry this month.

Mr. Speaker, the Anglican cathedral here in Iqaluit serves all of Nunavik, Nunavut, and the Northwest Territories. It has been become a symbol of hope and pride for many people here in Iqaluit and across the north.

Support for the cathedral fundraising has come from almost every community and parish in Nunavut, the Northwest Territories, Nunavik, as well as, Mr. Speaker, from down south, the US, and even England.

Mr. Speaker, the local fundraising committee members that have worked on the fundraising since its beginning over the past 13 years include Chairperson Ed. Picco, members Rebekah Williams, Mary-Ellen Thomas, Susan Gardener, and Mr. Frank Pearce. As well, many folks have come and gone from the committee that have helped the fundraising committee here in the community. Locally, just here in Iqaluit, the committee has raised close to \$1 million.

Mr. Speaker, I would like to ask that you and this House join with me and congratulate the local fundraisers and celebrate the upcoming consecration of our beautiful, new, and debt-free St. Jude's Cathedral. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Members' Statements. Member for Pangnirtung, Mr. Johnny Mike.

Member's Statement 466 – 4(3): Study of Beluga Whales in Cumberland Sound

Hon. Johnny Mike (interpretation): Thank you, Mr. Speaker. Good day to my fellow community members and Nunavummiut.

It is my mother-in-law's birthday today and she is celebrating her 82nd birthday. I wish her a good day. I'm sure her children and grandchildren will ensure she will enjoy her birthday.

I rise today to inform you about the marine activities in Pangnirtung and its fiord. This past winter on January 10 and 11, 2017 the federal Department of Fisheries and Oceans held a community meeting regarding beluga whales in the Cumberland Sound.

The beluga whale issue has been a very active issue that Pangnirtung residents have worked on over a long period of time. The people of Pangnirtung set their own regulations, establishing a moratorium in beluga whale calving grounds. I want to ensure that this hard work is known and acknowledged. It is my deepest honour to announce it in the

House. It goes without saying that my fellow residents are thinking the same thing.

Beluga whales were being considered to be as a species at risk. It is for that reason that a study needs to be carried out since there is more than one subpopulation that comes into Cumberland Sound. This is contrary to what beluga whale researchers keep saying and, that is, there is only one subpopulation.

This is why I rise today to call for the beluga whales to be studied for a full year, if possible, and that this study should determine whether there is more than one subpopulation. We also want the study to note that the moratorium in Pangnirtung has been a voluntary one in beluga calving grounds.

I look forward to the Nunavut Wildlife Management Board and the federal Department of Fisheries and Oceans conducting a full study on beluga whales in Cumberland Sound. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Members' Statements. Member for South Baffin, Mr. David Joanasie.

Member's Statement 467 – 4(3): Recent Achievements of Constituents in Education

Mr. Joanasie (interpretation): Thank you, Mr. Speaker. Good afternoon, my colleagues and Nunavummiut who are listening to our proceedings.

Mr. Speaker, I rise today to express how proud I am. It was last year that I had reported how my younger brother is more capable than I am. He took carpentry courses here in Iqaluit and had to be out of the community for many weeks.

It wasn't just my brother; both he and Michael Hayward took the carpentry course for four years. I feel really proud that they completed their courses and are now certified (interpretation ends) journeyman carpenters. (interpretation) Both have now returned to Cape Dorset. I want to say how proud I am of them. They had to be away from their family and friends to take this training, but they knew that it was worthwhile to be away from home for a while they were taking these courses.

Mr. Speaker, I would like to further recognize my friend, Ottokie
Aningmiuq, who was in Rankin Inlet for training. Ottokie has been taking oil burner mechanic courses along with many others who went to Rankin Inlet for many weeks. I am extremely proud of them for their dedication to further their education. What they learn will only have a positive benefit, so I urge them to complete their courses.

I am also proud of the interpreter/translator students who are working hard in their endeavours and that they can even be interpreters here at the Assembly. Thank you, Mr. Speaker.

>>Applause

Speaker (interpretation): Thank you. Members' Statements. I have no more names on my list. Moving on. I fully appreciate the young students from the Interpreter/Translator Program who are here in the House. Thank you.

>>Applause

Going back to the orders of the day. Item 7. Written Questions. My apologies. Item 4. Returns to Oral Questions. Item 5. Recognition of Visitors in the Gallery.

Item 5: Recognition of Visitors in the Gallery

I would like to recognize an individual in the gallery. I think I've had one visitor to date since I was first elected. Today I fully appreciate my wife and my son for visiting in the gallery, Patricia and John Paul Apak. Welcome.

>>Applause

Recognition of Visitors in the Gallery. Item 6. Oral Questions. Member for Hudson Bay, Mr. Allan Rumbolt.

Item 6: Oral Questions

Question 610 – 4(3): Qulliq Energy Corporation Activities in Sanikiluaq

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

Mr. Speaker, my questions are for the Minister responsible for the Qulliq Energy Corporation.

The Qulliq Energy Corporation's 2015-16 annual report, which the minister tabled in the House last week, indicates that the corporation has completed "the first phase of a desktop study to assess the viability of wind power generation in all 25 [Nunavut] communities."

A technical report prepared for the Qulliq Energy Corporation states, and I quote, "...the best location for a first project using small wind turbines is Sanikiluaq."

I understand from reading the QEC's annual report that this study was to have been presented to the Qulliq Energy Corporation's board of directors. For the record, can the minister confirm what decisions the Qulliq Energy Corporation has made with respect to moving forward with a wind power project in Sanikiluaq? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister responsible for the Qulliq Energy Corporation, Mr. Johnny Mike.

Hon. Johnny Mike (interpretation): Thank you, Mr. Speaker. I also thank my colleague for that question. With respect to solar or wind power generators, I have to look into how Sanikiluaq was selected for that study. I'll have to get back to the member on his question so that I can provide a proper update on what has been done to date. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Oral Questions. Member for South Baffin, Mr. David Joanasie.

Question 611 – 4(3): Addressing Social Passing in Our Schools

Mr. Joanasie (interpretation): Thank you, Mr. Speaker. I would like to direct my question to the Minister of Education.

Mr. Speaker, the issue of social passing, when a student is promoted from grade to grade regardless of what they have learned or not learned, is often raised as a concern even though education officials have often stated that the department does not support the use of this policy.

Mr. Speaker, I would like to ask the minister if he can clearly explain how his department can be sure that students are not socially promoted from grade to grade in schools across Nunavut. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Education, Mr. Paul Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. I also thank my colleague for requesting more information on that matter. I would first like all of my colleagues and the House to be aware that the Department of Education doesn't have a policy about social promotion.

I would like to respond to his question clearly. To give an example, if I had to complete seven classes and I completed five of them, then I can be promoted and I can go back to those two classes that I failed when I'm in the higher grade where I have been promoted.

I would like all of you to be aware that when they assess students in the schools, they do proper assessments. The school principal, support staff and parents have a conversation about the student as to whether that student should be promoted or not or stay in the same grade. That's how it's determined.

I would like to further explain in the House that it's very hard to say in Inuktitut. We don't have a term for (interpretation ends) "social promotion" (interpretation) in Inuktitut. We don't have a policy on social promotion as I don't believe in it. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Speaker. While I appreciate that the Department of Education does not officially support the practice of social promotion, it does seem to happen.

Mr. Speaker, can the minister clearly explain how his department works with students and parents who feel that a student has been socially promoted? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. (interpretation ends) The Hon. Minister of Education, Mr. Quassa.

Hon. Paul Quassa (interpretation):
Thank you, Mr. Speaker. Within the schools we have what we call the (interpretation ends) school team.
(interpretation) These workers with different disciplines in the school discuss this with the student. As I stated earlier, the school principal and the (interpretation ends) student support assistants (interpretation) all work together along with the parents of the student and they talk about whether that student should be promoted to a higher class or not. That is what they do.

I personally have a hard time understanding what (interpretation ends) social promotion (interpretation) means and where that term came from. It's just a term, but then it gets overblown. However, I would like to explain that all

of our students have an assessment to see whether they should go on to a higher class or not. If it is felt that they should not be promoted to the next grade, then they have a meeting with the principal, the teacher, and the parents and they explain that to the student. That happens all across Nunavut.

The reason can be a lack of attendance or they have a hard time keeping up if they miss classes. That's why parents are involved in the matter. We try to make them understand what's happening and that's what we do in our schools in any community in Nunavut. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Speaker. From time to time, students are moved up to the next grade even though they or their parents feel that they are being socially promoted. Can the minister clarify what courses of action are available for students or to their parents if they feel that a student has been a casualty of social promotion? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Education, Mr. Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. As I stated earlier, the school team is the group I mentioned that determines whether a student should be promoted to a higher grade or not.

Any parent can go to the school at any time to speak with the faculty and that's what I tell parents, to please come and visit our students and check up on their school. If they have any concerns at all about their child, they can go to the school in their community or they can meet with the local (interpretation ends) DEA (interpretation) or the principal.

Parents can go to the school at any time to check up on their children's schooling. It is beneficial for parents to be informed of what their children are learning because it encourages students to do well and to complete their education. Yes, parents are welcome to meet with the local (interpretation ends) DEA, (interpretation) principals or teachers, or even their child's own teacher to get more information.

As I said earlier, students are fully assessed to determine whether they should move on to the next grade in the coming year. This assessment is not just done as a formality. The term the member alluded to, (interpretation ends) "social promotion," (interpretation) as they call it in English, even I have a hard time pronouncing it because I don't understand it. It is not our policy at all and I want to be sure my colleagues know that.

There are also many different support programs and services available to students. If I can say it in English, we have the (interpretation ends) individual learning plans. (interpretation) These kinds of supports are made readily available in our schools. I would like all of our students to attend school every day. It really helps them succeed well into the future. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Members, be aware that when the Minister of Nunavut Arctic College was speaking, one of the student interpreters was interpreting for him and I would like to express my appreciation. I'm very proud of that student.

>>Applause

Oral Questions. Member for Rankin Inlet, Mr. Alexander Sammurtok.

Question 612 – 4(3): Status of Trades Programs in Rankin Inlet

Mr. Alexander Sammurtok: Thank you, Mr. Speaker. I would like to direct my question to the Minister responsible for Nunavut Arctic College.

Mr. Speaker, Nunavut Arctic College's trades training centre is located in Rankin Inlet. It is a relatively new and well-equipped facility. There was an expectation that all of the main trades programs would eventually be delivered out of this main facility. In fact we had been given to understand that the carpentry program would be delivered out of Rankin Inlet by now, but it is still in Iqaluit.

Can the minister clearly explain why Nunavut Arctic College's carpentry program is not yet being delivered at the Rankin Inlet trades training centre? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister responsible for Nunavut Arctic College, Mr. Paul Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. I also thank my colleague for requesting that information. It's true that the facility in Rankin Inlet, which is called Sanatuliqsarvik in Inuktitut, is running very well. I can explain to my colleague and all of my colleagues that the carpentry program used to be in Iqaluit. If I remember correctly, it was up by the Ukiivik residence, but that residence has been closed. That's where it used to be in Iqaluit, but the whole program is being moved to Rankin Inlet in the new school year. Next year it should be moved to Rankin Inlet.

What my colleague stated is true and yes, we are trying to offer all the trades courses at the (interpretation ends) trade school (interpretation) in Rankin Inlet. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Mr. Alexander Sammurtok.

Mr. Sammurtok (interpretation): Thank you, Mr. Speaker. (interpretation ends) I thank the minister for promising to move the carpentry program to Rankin Inlet. I'll go on to my second supplementary question.

Mr. Speaker, I recognize that Nunavut Arctic College's carpentry program was delivered in Iqaluit in the past. I further recognize that change can be difficult for any number of reasons. However, the Rankin Inlet trades training facility was built with a specific purpose in mind: to provide dedicated trades training so that Nunavummiut can become skilled and certified for jobs that are much needed in our labour force.

Can the minister confirm that consolidating all trades training at the Rankin Inlet trades training centre is still the plan for Nunavut Arctic College? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. (interpretation ends) The Hon. Minister responsible for Arctic College, Mr. Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. We are now looking at how we can improve programs and services at the trades training centre. For example, we are reviewing trades or mining programs and other programs in order to improve them. We're not just sitting idly; we're quite busy.

We're looking at locating all trades training at the Rankin Inlet training centre. As I stated, the carpentry program will move to Rankin Inlet for sure. All these trades training programs will be moved to Rankin Inlet so that they can be decentralized to the other communities and Nunavummiut will know what to expect. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Alexander Sammurtok.

Mr. Sammurtok: Thank you, Mr. Speaker. My third question, he already answered it twice, so I'll leave it at that. Thank you, Mr. Speaker.

>>Laughter

Speaker (interpretation): Thank you. Oral Questions. Member for Tununiq, Mr. Joe Enook.

Question 613 – 4(3): Departmental Vacancies

Mr. Enook (interpretation): Thank you, Mr. Speaker. My questions are for the Minister of Environment.

In October of 2016, during our fall sitting, I asked the minister for an update on the status of filling his department's vacant positions in Pond Inlet. Of the seven positions available, five remained vacant at the time.

Can the minister tell me today what progress has been made since then to fill his department's vacant positions in Pond Inlet and how many of those positions have been filled? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Environment, Mr. Joe Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. I remember clearly when the member asked those questions and I'm sorry to say that my update would still be the same. We haven't filled any of the positions. The one in particular that the member was asking about, the manager position, at that time I told him that we were close to filling it. The job was offered to a candidate and the candidate turned it down. It was offered to the next candidate and that candidate turned it down. We're back to square one and it is being advertised or will be advertised very shortly. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Speaker. When I raised this issue last fall, the minister indicated that a shortage of available staff housing units in the community was affecting his

department's efforts to fill vacant positions in Pond Inlet. Can he indicate what progress has been made since then to work with the Nunavut Housing Corporation to address the staff housing situation in Pond Inlet? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Environment, Mr. Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. When any job is being advertised, if housing is needed, then my officials talk and put in a request with officials from the housing corporation and they are put in the queue for staff housing. We don't have any priority over any other departments in terms of staff housing allocation, so we just put our name in the queue and we do our best. I haven't talked with the minister of housing himself, but my officials are in communication with the housing officials when there is a need and a request for staff housing for any positions that we are advertising. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Speaker. Can the minister indicate which of his department's programs and services have been impacted by the vacancies in Pond Inlet? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Environment, Mr. Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. I can't say which is more

important or more critical, but we are putting the majority of our efforts into the manager's position. We are trying to fill them all, but the manager's position has been vacant for an extended period of time and we need to get that filled. Some of the positions have been filled by casuals and we are doing our best to fill all these positions with indeterminate workers so that the people of Pond Inlet can get the services that they need and require. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Oral Questions. Member for Baker Lake, Mr. Simeon Mikkungwak.

Question 614 – 4(3): Nunavut Housing Corporation Capital Plan

Mr. Mikkungwak (interpretation): Thank you very much, Mr. Speaker. My questions are for the Minister responsible for the Nunavut Housing Corporation.

As the minister will recall, the Legislative Assembly approved \$4.9 million in capital funding during our recent fall sitting for the Nunavut Housing Corporation to begin construction on a new warehouse and office facility for Baker Lake's local housing organization during the 2017-18 fiscal year.

Can the minister update me today on the status of the Nunavut Housing Corporation's tender process for this project? Thank you very much, Mr. Speaker.

Speaker (interpretation): Thank you. Minister responsible for the Nunavut Housing Corporation, Mr. George Kuksuk.

Hon. George Kuksuk (interpretation): Thank you very much, Mr. Speaker. I also thank my colleague. Mr. Speaker, I can tell my colleague today where we are at in regard to the status of the tender process for the LHO (interpretation ends) warehouse (interpretation) and office in the community. Mr. Speaker, in regard to the member's question on the (interpretation) warehouse (interpretation) warehouse (interpretation) issue, the (interpretation ends) public tender will come out today (interpretation) and the closing date is on March 31. Thank you very much, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Mr. Mikkungwak.

Mr. Mikkungwak (interpretation): Thank you very much, Mr. Speaker. As the minister will also recall, the Legislative Assembly approved capital funding during our recent fall sitting for the Nunavut Housing Corporation to begin construction of five new staff housing units in Baker Lake during the 2017-18 fiscal year.

Mr. Speaker, I was pleased to note that the tender for this work has now been issued and that the minimum Inuit labour content for this project will be 40 percent.

Can the minister indicate what the minimum Inuit labour content will be on the warehouse and office construction project for Baker Lake's LHO? Thank you very much, Mr. Speaker.

Speaker (interpretation): Thank you. Minister responsible for the Nunavut Housing Corporation, Mr. Kuksuk.

Hon. George Kuksuk (interpretation): Thank you very much, Mr. Speaker. In regard to the percentage of Inuit labour for the project the member is referring to, once the contract has been awarded, the contractors usually get funding allocated to be used in the community for hiring local people and/or beneficiaries. I don't want to just guess the figure, so I'll have to look into this, but it was approximately \$50,000 to initiate and support Inuit labour content.

Alongside of that, for training through Nunavut Arctic College, there is an apprenticeship program. They are involved with the contractors so that they can hire locally. It is also stipulated in the contract. That is what we will be using. We are working with the local housing organization to make sure they are following the Inuit labour content requirement. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Mikkungwak.

Mr. Mikkungwak (interpretation): Thank you very much, Mr. Speaker. It's obvious that the minister responded to part of my final supplementary.

I was also pleased to note that the NHC's tender for Baker Lake's five new staff housing units includes up to \$50,000 in funding for the contractor to fund training of Inuit workers.

Mr. Speaker, as we know from the success of training projects at the Meadowbank mine, my constituents are eager to take training and build their skills.

Can the minister indicate how much funding will be available for training workers as part of the warehouse and office construction project for Baker Lake's LHO? Thank you very much, Mr. Speaker.

Speaker (interpretation): Thank you. (interpretation ends) The Hon. Minister responsible for the Nunavut Housing Corporation, Mr. Kuksuk.

Hon. George Kuksuk (interpretation): Thank you very much, Mr. Speaker. As I stated earlier and I understand the member's comment that the funding will be made available and allocated to the contractors to provide support for local hires. Also, Mr. Speaker, our contractors have explained that they hire locally in the smaller communities.

I know that the local housing organization will be working alongside the contractors to work with the local hires in all of the communities. That's what we're starting to roll out in the communities. We always want to utilize local labour at the community level whenever possible and that will continue. Thank you very much, Mr. Speaker.

Speaker (interpretation): Thank you. Oral Questions. Member for Iqaluit-Niaqunnguu, Ms. Pat Angnakak.

Question 615 – 4(3): 2017 Budget

Ms. Angnakak: Thank you, Mr. Speaker. My questions are for the Minister of Finance.

I was re-reading the minister's Budget Address this weekend and a few things jumped out at me. In his speech the minister indicated that he is "about to begin discussions with the federal government about renewing" the Territorial Formula Financing Agreement.

Can the minister indicate whether or not he hopes to renegotiate aspects of the current agreement, or are we just looking at extending the current agreement without significant changes? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Finance, Mr. Keith Peterson.

Hon. Keith Peterson: Thank you, Mr. Chairman. We would hope to renegotiate certain aspects of the agreement. It's a five-year agreement. Every five years it's due to be renewed. During the intervening period we're in constant discussions with Finance Canada. They're aware of our concerns. We hope that when we do renew the new agreement, they will take into consideration certain factors that apply elsewhere in Canada but not in Nunavut. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Speaker. I thank the member for his response. This year's Budget Address indicates that the Department of Health will receive a funding increase of 3.5 percent.

Last week I raised a number of concerns and questions regarding the process by which this department's budget is determined given the annual need for significant supplementary appropriations for its operations.

Can the minister explain why the Department of Health is allocated a budget that is unlikely to meet its actual needs? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. (interpretation ends) The Hon. Minister of Finance, Hon. Keith Peterson.

Hon. Keith Peterson: Mr. Speaker, over the years the Department of Health, not only in Nunavut but in all territories and all provincial jurisdictions, the health care costs have been increasing, in some cases significantly. Some provinces' health care costs are 45 to 50 percent of their annual budget. There has been a concerted effort over the years by all the jurisdictions, territorial and provincial, and we coined the phrase "bend the health care cost curve." We're looking at ways internally for the departments of health in all jurisdictions to be more efficient and effective with the appropriation they have or receive.

I pointed it out years ago that it's impossible for health care costs to go up exponentially. Otherwise, eventually, any province or territory is going to ultimately have two departments, one being the Department of Finance and one being the Department of Health, the Department of Health to incur the bills and the Department of Finance to pay the bills. Ultimately then the health department would consume all the money.

It's in all of our interests to have the health department find ways to be more efficient and effective in their budgeting process or business cases and that leaves more resources, limited resources I might add, Mr. Speaker, for other government departments and capital projects across Nunavut. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Speaker. In recent months the federal government has been signing a number of stand-alone bilateral agreements with provinces concerning health funding. In January of this year the three territorial governments reached an agreement with the federal government concerning health funding.

Mr. Speaker, it has been suggested that the federal government has been pursuing a strategy of "divide and conquer" with the provinces and territories when it comes to health care funding. Would the minister agree with this description of Ottawa's strategy? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Finance, Mr. Keith Peterson.

Hon. Keith Peterson: Mr. Speaker, it's not a new strategy; it's an old strategy. The strategy has been around for, I don't know, five decades or maybe longer. The other rule, the golden rule is he or she who has the gold rules. They have the funding and the provinces and territories require it.

We worked with my colleague, the Minister of Health, and all the ministers of health in Canada. We did present what I thought was a fair, well-thoughtout business case so that the provinces and territories could provide health care to our citizens. The Premier himself was involved at his level. I'm unhappy to say that our concerted effort....

In fact I had the health minister of Nunavut sitting beside me at a finance ministers' meeting in Ottawa. It's unprecedented to have health ministers sitting with finance ministers talking to the finance minister and health minister of Canada at a finance ministers' meeting in December.

Unfortunately our arguments fell on deaf ears. In fact one province caved in within a couple of hours after we all stood in front of the national media and said that we're very united. One was two or three hours; a couple fell a few days later. The territories, we came on board, I forget the exact date, but some time in January, and then Saskatchewan after us and then BC. There are four or five bigger provinces that are still holding out and I wish them all the best.

We all negotiated clauses in our respective agreements that if another province or territory negotiates a better deal, then we all get that same deal. I'm hopeful in the federal budget that the federal minister will see it fair to help the three territories out with some additional funding, but we will see. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Oral Questions. Member for Aivilik, Mr. Steve Mapsalak.

Question 616 – 4(3): Status of New School for Coral Harbour

Mr. Mapsalak (interpretation): Thank you, Mr. Speaker. I would like to direct

my question to the Minister of Education.

Mr. Speaker, for several years the community of Coral Harbour has expressed the need for a new school. At one time a new school for the community was on the capital plan, but it disappeared. In the meantime the community is growing and there is not enough classroom space for all the students.

Can the minister provide a clear update on what plans are being considered to provide more classroom space for the community of Coral Harbour? Perhaps the minister can respond to that first. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Education, Mr. Paul Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. I also thank my colleague for asking that question. First of all I recently received a letter from the district education authority's chairperson, Willie Nakoolak, regarding the need for a new school.

Looking at the books, what we usually say is that we first start with the preplanning stage. Coral Harbour is one of the three communities, I believe, that are in the preplanning stage. We're well aware of the problem and the school is now at over 85 percent capacity, which would be one of the requirements. If the capacity is at over 85 percent, then we know that there is a need for an expansion or building of a new school.

At this time the Coral Harbour school is now in the preplanning stage. I can't tell you exactly when that will be completed, but Coral Harbour is one of the priorities for a new school in Nunavut. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Mr. Mapsalak.

Mr. Mapsalak (interpretation): Thank you, Mr. Speaker. The minister once pointed out some things about the planning taking place. When can we expect a decision on an extension to Coral Harbour's current school? Can the minister confirm when he anticipates this decision to be made? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Education, Mr. Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. At this time the Department of Community and Government Services is currently looking at the (interpretation ends) business case.

(interpretation) We don't know whether they're going to expand the current school. I don't know whether it's the same expansion or extension to the current school, but we do know that the school is overcrowded. We have portable classrooms in Naujaat that were being utilized when the current school was being built. What we can possibly do is use those portable classrooms while the extension is being put in place.

I can tell my colleague that we expect the business case to be concluded in April 2017. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Mapsalak.

Mr. Mapsalak (interpretation): Thank you, Mr. Speaker. As the minister is aware, the new school in Naujaat is very nice.

The Coral Harbour District Education Authority would really like a new school built because the current school is really old and facilities in that state usually require a lot of maintenance. Can the minister indicate if he can push to have a brand-new school built for Coral Harbour? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Education, Mr. Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Speaker. There will be three options for us to decide whether we're going to expand it, reconstruct it, or renovate it. We're looking at those three options.

I can tell my colleague, as I indicated earlier, that the Department of CGS will have completed their study in April 2017. After that date I will be able to provide more details on what we're going to be doing with the current school. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Oral Questions. Member for Rankin Inlet and Chesterfield Inlet, Mr. Tom Sammurtok.

Question 617 – 4(3): Dust Control in Nunavut

Mr. Tom Sammurtok (interpretation): Thank you, Mr. Speaker. Good day to the residents of Chesterfield Inlet and Rankin Inlet.

(interpretation ends) My questions are for the Minister of Economic Development and Transportation.

Mr. Speaker, during his Budget Address last week the Minister of Finance stated that, and I quote, "The Department of Economic Development and Transportation will receive \$2.5 million next year to help communities to build more access roads and to improve dust control." Can the minister provide a breakdown on how this \$2.5 million will be allocated? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Economic Development and Transportation, Ms. Monica Ell-Kanayuk.

Hon. Monica Ell-Kanayuk

(interpretation): Thank you, Mr. Speaker. I also thank the member for asking that question. Mr. Speaker, during this winter session we will be looking at how we will be allocating those dollars. We are still working on the plan, but I expect to make an announcement in the House during this winter session. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary. Mr. Tom Sammurtok.

Mr. Tom Sammurtok (interpretation): Thank you, Mr. Speaker. (interpretation ends) As the minister is aware, the Department of Community and Government Services has allocated funding to the Municipal Training Organization for the delivery of training related to the application of dust suppressants. As well, the Department of Community of Government Services has conducted research on the feasibility of

introducing new and different types of dust suppressants in the communities. Can the minister clarify if her department will be taking over these initiatives? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Economic Development and Transportation, Ms. Ell-Kanayuk.

Hon. Monica Ell-Kanayuk

(interpretation): Thank you, Mr. Speaker. I also thank the member for that question. We hear in the business plan that this \$2.5 million will be used for dust suppressants in the communities. Since it's going to be a feasibility study, we are going to be including different types of dust suppressants. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Tom Sammurtok.

Mr. Tom Sammurtok: Thank you, Mr. Speaker. I think the minister may have already kind of responded to my second question here. However, can the minister describe in detail what specific projects to improve dust control in Nunavut will be funded under this \$2.5 million appropriation? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Economic Development and Transportation, Ms. Ell-Kanayuk.

Hon. Monica Ell-Kanayuk

(interpretation): Thank you, Mr. Speaker. I also thank the member for that question. Our budget had to be prepared for this session and it still hasn't been approved, so I cannot definitely say how we will be allocating those funds. Once we have identified the

line items, I will be able to inform him. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Oral Questions. Member for Iqaluit-Sinaa, Mr. Paul Okalik.

Question 618 – 4(3): The Inuit Language Protection Act and the Private Sector

Mr. Okalik (interpretation): Thank you, Mr. Speaker. Last week I tabled a document in the Legislative Assembly. It was a letter I had written last spring to the Minister of Languages enquiring as to when legislation would come into force for private businesses that do government work. They will then be required to implement the Inuktitut language in their operations. Under the legislation, private businesses would be required to provide Inuit language services. The Act still has not gone into force.

The minister responded that it would take effect on April 1 this year. If this is the case, it is excellent news because we live in the Inuit homeland and Inuit deserve support to keep their own language strong and vibrant. Can the minister give us a clear update on whether this promised date is correct or not? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Languages, Mr. George Kuksuk.

Hon. George Kuksuk (interpretation): Thank you very much, Mr. Speaker. I also thank the member for the question. Mr. Speaker, I clearly understand the question he had asked and I had replied to it. Mr. Speaker, to date we are not the

only department that is working on this. We have to work with other departments and they still haven't gotten back to us. For that reason, I will take his question as notice. Thank you, Mr. Speaker.

Speaker: The minister has taken this as notice. I shall go on to the next. (interpretation) Oral Questions. Member for Hudson Bay, Mr. Allan Rumbolt.

Question 619 – 4(3): Nunavut Emergency Management

Mr. Rumbolt: Thank you, Mr. Speaker. My second question of the day is for the Minister of Community and Government Services.

Last week the minister tabled his department's *Nunavut Emergency Management Annual Report* for the 2015-16 fiscal year. In this report the department indicates that it has been decided that the government will not be bringing the *Emergency Measures Act* fully into force "as this would place most, if not all departments in violation of the *Act*." The report goes on to state that "Regulations still need to be developed for certain areas of the *Act* and that work has not started."

Can the minister provide a more detailed explanation as to why it has been decided that the *Emergency Measures Act* will not be brought fully into force at this time and when the department anticipates that the government will be prepared to bring this legislation fully into force? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Community and Government Services, Mr. Joe Savikataaq. Hon. Joe Savikataaq: Thank you, Mr. Speaker. I thank the member for the question. The reason that that section is not brought into force yet is that there are two communities that have the training, but they haven't enacted their plan yet. There is one community that still needs the training and we expect to do that training this year, 2017. Once those three communities are trained and have a plan, we would put that section into force. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Mr. Rumbolt.

Mr. Rumbolt: Thank you, Mr. Speaker. Also in the 2015-16 annual report, the department also states that Nunavut Emergency Management has "started a program to replace some of the older model SPOT units as they fail and are looking at and testing other communication equipment to see if some of the new technology can be utilized to assist citizens when in need."

Can the minister explain what new communication equipment his department is currently testing? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Community and Government Services, Mr. Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. We are replacing some of the SPOTs with the more advanced version. They're smaller and they appear to be just the same and they function just as well as the older, bigger ones.

If I can just remind the audience there, if anyone is going out on the land, they can just pick up a SPOT either from their HTO, their hamlet, or the RCMP. These SPOTS are provided to all the communities free of charge and they're there to assist the people going out so that if they should have any problems out on the land, then we know where they are. We won't know what is wrong, but we will know where they are and it is much faster and cheaper for us to get a person to the location.

To the other part of the member's question about what new devices, we're testing other devices that you can text out on the land with. There will still be satellite phones, but there are other communication devices that you can text and do other functions with. If these new technologies work well and if they're better, then they will become part of the tools that we use to assist people in not getting lost and not having emergencies. We look at any new technologies that come aboard because we want to provide the best service we can to the people of Nunavut. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Rumbolt.

Mr. Rumbolt: Thank you, Mr. Speaker. The annual report also states that Nunavut Emergency Management is looking at replacing its current database to track statistics related to the training and volunteer time. Can the minister explain what this new database will look like? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Community and Government Services, Mr. Joe Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. As like any database, I imagine it will be on a computer. That will be the

first thing of what it will look like because databases have lots of information. I'm not sure exactly what information would be in this database, but I imagine it would be who the person is, when they got their training, what the training was for, whether the training that was received is one-time training or would have to be done again.

Also, this database would be there to acknowledge that we have these volunteers that have these skills in these communities and from time to time we would recognize these volunteers and give them praise for the training that they have taken and acquired. It also helps us out so that we can plan our training for the people of Nunavut.

This database would be like a living document. It would be changing because we know that the volunteers in the communities do change yearly. Some people get burned out and some people just lose interest, but we have many volunteers in all of the communities. There are some communities that have the same volunteer people and in other communities they change. This would be just to make sure that the current information is up to date. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Oral Questions. Member for Baker Lake, Mr. Simeon Mikkungwak.

Question 620 – 4(3): Fur Freight Subsidy Pilot Project

Mr. Mikkungwak: Thank you, Mr. Speaker. My questions are for the Minister of Environment.

Just last week the minister announced his department's Fur Freight Subsidy Pilot Project, which will "allow hunters across Nunavut to ship undried wolf pelts to buyers such as taxidermists and fur dressers in the south."

Mr. Speaker, in his statement the minister stated that this pilot project will help his department "to determine if and how the program will be implemented more broadly."

Can the minister clarify if this means that his department is planning to implement similar projects to subsidize the cost of shipping other types of fur pelts, such as wolverine, grizzly bears, and polar bears, and, if so, can he clarify when we can expect to see this type of expansion of his department's new fur freight subsidy project? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Environment, Mr. Joe Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. I thank the member for his question. The member is correct that right now the Department of Environment is targeting only the species of wolves and it's a pilot project. The reason it's a pilot project is to see if we should expand it to involve or entail other species, like the member said, wolverine, polar bears, grizzly bears, white foxes, whatever other species are out there. This will be run to make sure that if there are any kinks in it, we can work it out before it's taken on more broadly, if it works out well. Like I stated, it's just a pilot project and we should know about other species once

the pilot project is completed. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your first supplementary, Mr. Mikkungwak.

Mr. Mikkungwak: Thank you, Mr. Speaker. For the information of our viewers today, can the minister tell us what companies or organizations his department has partnered with in order to deliver this pilot project, if any? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Environment, Mr. Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. We have not partnered with any company in order to run this program. This program is to assist the hunters to ship their wolf pelts out that they are selling. This program is not to help someone send their fur to a taxidermist so that they could get their shipping paid on their own fur which they want to taxidermy themselves to taxidermy back. It's to assist hunters in shipping their fur to fur buyers and taxidermists that are going to be buying these wolves. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Your final supplementary, Mr. Mikkungwak.

Mr. Mikkungwak: Thank you, Mr. Speaker. In his statement last week the minister stated that the pilot project will run until March 31, 2018. Mr. Speaker, I commend the department for implementing this pilot project and I am sure that many harvesters across the

territory are looking forward to hearing about the results of this project.

Will the minister commit his department to preparing a report on the results of this pilot project to be tabled in the Legislative Assembly at the earliest possible opportunity? Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. Minister of Environment, Mr. Savikataaq.

Hon. Joe Savikataaq: Thank you, Mr. Speaker. When the pilot project is done, we will have the results. I don't know if we will be tabling it or not. I can't commit to that, but the results will be analyzed. The way I see this project working, I think it's going to be very successful and I imagine that we will possibly continue and expand it. Once the pilot project is done and the results are in front of us, I will update the official when we're back here after March 18. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. The time for question period has expired. Going back to the orders of the day. Item 7. Written Questions. (interpretation ends) Item 8. Returns to Written Questions. Item 9. Replies to Opening Address. Item 10. Replies to Budget Address. Item 11. Petitions. Item 12. Responses to Petitions. Item 13. Reports of Standing and Special Committees on Bills and Other Matters. Item 14. Tabling of Documents. Hon. Member for Rankin Inlet, Mr. Alexander Sammurtok.

Item 14: Tabling of Documents

Tabled Document 260 – 4(3): Graduates of Underground Mining Program

Mr. Alexander Sammurtok: Thank you, Mr. Speaker. In my Member's Statement earlier today I congratulated the recent graduates of Nunavut Arctic College's Introduction to Underground Mining program.

I would like to table this photograph of the graduates and their instructor. I am very proud of them. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. (interpretation ends) Tabling of Documents. Item 15. Notices of Motions. Item 16. Notices of Motions for First Reading of Bills. Hon. Minister of Finance, Hon. Keith Peterson.

Item 16: Notices of Motions for First Reading of Bills

Bill 36 – An Act to Amend the Income Tax Act – Notice

Bill 42 – An Act to Amend the Tobacco Tax Act – Notice

Hon. Keith Peterson: Thank you, Mr. Speaker. I have two notices of motions for first reading of bills. The first one is I give notice that on Tuesday, February 28, 2017, that Bill 36, *An Act to Amend the Income Tax Act*, be read for the first time.

The second one is I give notice that on Tuesday, February 28, 2017, that Bill 42, *An Act to Amend the Tobacco Tax Act*, be read for the first time. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. (interpretation ends) Item 17. Motions. Item 18. First Reading of Bills. Item 19. Second Reading of Bills. Item 20. [Consideration in] Committee of the Whole of Bills and Other Matters. Bills 32, 33, 34, and 35 with Mr. Akoak in the Chair.

In accordance with the authority provided to me by Motion 41 - 4(3), the committee will stay in session until it reports itself out.

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

(interpretation) Sergeant-at-Arms.

>>House recessed at 15:22 and Committee resumed at 15:44

Item 20: Consideration in Committee of the Whole of Bills and Other Matters

Chairman (Mr. Akoak): Good afternoon, Inuit, colleagues, (interpretation) and Inuit watching the proceedings.

(interpretation ends) The last day we were at page H-5. Branch Summary. Public Health. I'm sorry.

I would like to call the committee meeting to order. I'm ahead of myself. In Committee of the Whole we have the following items to deal with: Bills 32, 33, 34, and 35. What is the wish of the committee? Mr. Rumbolt.

Mr. Rumbolt: Thank you, Mr. Chairman, and good afternoon. Mr. Chairman, we wish to continue with the

review of the main estimates for the Department of Health and, if time permits, the Department of Education. Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Rumbolt. Are we in agreement that we first deal with Bill 34?

Some Members: Agreed.

Bill 34 – Appropriation (Operations & Maintenance) Act, 2017-2018 – Health – Consideration in Committee

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

Hon. George Hickes: Thank you, Mr. Chairman. Yes, I do, if the committee will allow.

Chairman: Thank you. Does the committee agree to let the minister's staff go to the witness table?

Some Members: Agreed.

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

For the record, minister, please introduce your officials. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. As I stated before, I'm sure she's no stranger to the proceedings, my deputy minister, Colleen Stockley, Deputy Minister of Health, as well to my left, Karen Kabloona, Associate Deputy Minister of Quality of Life. Thank you, Mr. Chairman.

Chairman: Thank you. Welcome to the proceedings. The last time we were at page H-5. Branch Summary. Public Health. The next name on the list, Mr. Okalik.

Mr. Okalik (interpretation): Thank you, Mr. Chairman. Welcome again to the House. While we were going through the estimates, I went back through the business plan to see what the department plans to do about TB. I don't see any plans about tuberculosis. I would first like to get an update on that. Has the number of cases of tuberculosis fallen in Nunavut or what's new? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With regard to TB, it's continuing to be an issue across the territory of Nunavut. I know some of the recent media coverage has highlighted the need for people to make sure that they are following the guidance of health care professionals. At the end of the day it could result as a terminal illness.

Just to let the members know some of the efforts that are being undertaken by the Department of Health in 2015-16, there was a successful business case where the Department of Health has been receiving additional funds; an increase to the base budget that is being transferred throughout the three regions.

With regard to actual surveillance and information, there have been a number of PYs that have been created. There is a Nunavut TB manual that is ready for printing and distribution in the next couple of months in early 2017. This will be a guide for health care workers to

provide continual care and consistent care across the territory.

In the meantime there is also a faster laboratory test that is being implemented here in Iqaluit. We are looking at current efforts to expand throughout the region to start with. This takes TB testing in a matter of hours instead of days or potentially weeks from current testing.

There is a tuberculosis prevention and control program following Canadian TB standards, which includes management of active TB disease cases, contact tracing and outbreak investigations, screening for latent tuberculosis infection and active TB disease, surveillance and data management, laboratory diagnostic capacity, education and training of health professionals, community-based awareness, monitoring and evaluation, and lastly measures and high-risk settings. Thank you, Mr. Chairman.

Chairman: Mr. Okalik.

Mr. Okalik (interpretation): Thank you, Mr. Chairman. I had asked where we are at now with TB. Are there fewer cases now in Nunavut? Are our efforts to curb the transmission of TB working? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. My apologies for neglecting to answer that portion of the member's question.

In 2015 we had our lowest number of cases across the territory at 44. In 2016 we have a very similar number. It did increase slightly up to 50, but in general

over the last decade we have seen decreasing numbers. That being said, three-quarters of the cases that are reported in the territory are still in the Qikiqtaaluk region. Thank you, Mr. Chairman.

Chairman: Mr. Okalik.

Mr. Okalik (interpretation): Thank you, Mr. Chairman. It is good to hear that the numbers are starting to drop. We want to eradicate it in Nunavut and everywhere else. The people who have TB take really strong medication. Is it made known to them in Inuktitut that the medication may have side effects?

When we get medication there is an English printout explaining how that medication is supposed to be taken, what the possible side effects are, and if you're taking a particular type of medication, which other medications it cannot be mixed with or cannot be taken with alcohol. There are directions like that that go along with prescriptions to make sure that people are kept safe.

Will patients be made aware of all of this, Inuit who are taking TB medication in Nunavut? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I caution the word "dangerous." TB medications are a very important component to the treatment of active TB and to make sure that it is not shared with family members and the community.

It is very important to make sure that any time somebody is under TB treatment, their medical practitioner is aware of other medications that they're taking. There may be instances where certain medications, like the member mentioned, do not mix well with TB medications.

In addition to when we're looking at instructions that are being provided to people, we do have interpretive services for people that don't understand. Again, there is always the patient relations office that can assist with understanding.

We are working with the IUT on Inuktut translations of all materials for instructions of medication for TB to make sure that people do understand any risks that are associated with it but also how the dosages are, in addition to the regular follow-up that is provided by health care professionals to make sure that any concerns or any elevated levels of any of the conditions are noticed right away. Thank you, Mr. Chairman.

Chairman: Mr. Okalik.

Mr. Okalik (interpretation): Thank you, Mr. Chairman. I was just saying that the medication is very strong. It's not dangerous *per se*. I am not trying to scare people with TB. Those are the questions I have for this item for now. Thank you, Mr. Chairman.

Chairman: Thank you. It's just a comment. We're at Branch. Public Health. Total Operations and Maintenance, to be Voted. \$18,973,000. Agreed?

Some Members: Agreed.

Chairman: Thank you. Page 6. Health. Health Care Service Delivery. Mr.

Mapsalak.

Mr. Mapsalak (interpretation): Thank you, Mr. Chairman. I don't have too many questions on that page. However, I believe this matter is under medical travel, boarding homes for people who go down for diagnosis. I believe it's somewhere on that page.

In Winnipeg patients stay at the Inuit centre. There have been many complaints being made, especially this year, with people who are not happy with the service and the way they are treated. They feel they are not being treated properly. The contract was extended by another year. Where is the contract at now? Has the contract review started? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes, the member is correct. The current contract with the Winnipeg boarding home expires at the end of May 2018 and there are no further extensions available. We will be working with Community and Government Services on the best process for tendering that contract. Thank you, Mr. Chairman.

Chairman: Mr. Mapsalak.

Mr. Mapsalak (interpretation): Thank you, Mr. Chairman. I would very much like that to be reviewed because many people are unhappy with the boarding home. I know that my colleagues from the Kivalliq are getting more complaints about this as well.

The contractors just don't do enough and there is basically one person running it, yet there are supposed to be three people running it. The two other people don't seem to do anything there. It seems there is just one person running the whole thing and patients are just not happy. The end of the contract is just too far off in my opinion, but it should be reviewed properly.

The other matter is airlines in the Kivalliq. We are served by just one airline, Calm Air. There is no other airline and this predicament puts us in a very bad spot, especially for medical travel patients. It takes them a long time to get back home because often there is no space available.

With only one airline, it is especially bad in early spring. In summer and into the fall there are many tourists that go to Churchill. Again, there is just one airplane that covers the entire route between Winnipeg, Churchill, and Rankin Inlet and it can't keep up with the demand. Has that contract been extended by a year as well? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes, I believe I had answered that in an earlier question. The contract was extended up until the end of August of 2018.

That being said, there is work ongoing already with the Department of Community and Government Services, as well as we're looking at aviation expertise to get involved in a discussion on the best practices for the best type of procurement model for this type of a contract to make sure that... Again, it's a highly used service. We want to make

sure for one that we are getting the best value as well as the best service.

Currently, as the member stated, there have been some issues. We do work very closely with airlines to make sure that they're adhering to their contract conditions. Medical travel patients are supposed to get priority. There are issues with weather and mechanical delays that can contribute to unforeseen circumstances. We do work very closely and we're going to continue to work very closely with all of our contract partners that provide this type of service to us to make sure that there is recognition of the importance of medical travel patients.

It is not just an inconvenience alone; it adds additional costs to the Department of Health when people aren't able to fly home when they're finished with their appointments. There are additional costs with accommodations and meal expenses that contribute to the addition of costs to the Department of Health. It's a big concern of ours. Thank you, Mr. Chairman.

Chairman: Mr. Mapsalak.

Mr. Mapsalak (interpretation): Thank you, Mr. Chairman. This will probably be my final question. People have approached me on a number of occasions because they are put up in a hotel when the Winnipeg boarding home is too full. When they are put up in a hotel, they get \$30 meal tickets for one day. I think it's \$30 or not more than \$35 per day for meals. That \$35 is not enough to have breakfast, lunch, and supper. Can that be increased? They end up paying money out of their own

pockets because their meal tickets are only \$35. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With the issue as far as over-accommodation of the boarding home itself, they are under a contracted obligation to provide secondary boarding and typically they look at hotels that are close to the facility. There are a number of different hotels that they use that are in very close proximity to the boarding home.

The preferred model of providing meals is that the boarding home does provide transportation back to the boarding home for any provision of any meals. With regard to the specific amount, I would have to look into actually who sets that amount a little bit different, whether it's part of the contract or whether it's part of negotiations with Non-Insured Health Benefits, or if it's just under the contractor's estimation of what it costs to provide food at the facility.

I do want to emphasize that any medical travel patients that are travelling are more than welcome to take advantage of the transportation of the boarding home to go back for meals and other food and visiting. Thank you.

Chairman: Mr. Mapsalak.

Mr. Mapsalak (interpretation): Thank you, Mr. Chairman. This issue has been raised many times. Patients have been having problems with the drivers of the boarding home. I urge the minister to review this very carefully and in detail to find ways to improve services for the patients that require transportation to and

from their appointments. That is just a comment. Thank you, Mr. Chairman.

Chairman: Thanks. It's just a comment. The next name on the list, Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. I wanted to ask some questions again and I think this is the time to hear about OHSNI. I asked you a couple of oral questions in the House, I think it was the last sitting, but I would like you to, perhaps, talk a little bit about first of all, just for the benefit of everybody watching, what is the role of OHSNI and if you can also talk about the other regions and what kind of set-up they have as well. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With regard to the services provided by OHSNI out of Ontario, it's a very broad level of service that they provide. It goes right from case management of the actual medical, following the medical appointments and the procedures that are necessary for patients as they travel through the health care system in Ontario. They assist the navigation of that. They have interpretive services that are available. They also provide some I guess you call it in-patient care at Larga on an asneeded basis.

In addition they have been very cooperative. I met with the chair of the board and the executive director of OHSNI when I was in Ottawa earlier this year, shortly after taking on the portfolio of Health. It gave me an opportunity to kind of understand how

important of a role that they play in providing health care to Nunavummiut from this region going through the Ontario health care system. They provide counselling to our patients that are going down there and, like I said, patient navigation through the health care system and almost any other support that may come up as needed.

To kind of put it bluntly with regard to the other two regions, I wish we did have a one-contact service provider that was able to provide all those services. We kind of have to piecemeal it together, if you want to call it that, in the other regions where we work with the jurisdiction that they travel to, in Alberta and Manitoba, to take advantage of resources that are available there.

Again, where some of the gaps can occur and I have spoken about it here a few times now on interpretive services of making sure that medical terminology is something that's very important in properly communicating to unilingual residents of the territory or even just for people with English as a second language to be able to understand the procedures that they're undergoing, the medications that they need to adhere to the conditions of, and especially the aftercare. When people come home, it's a very important step in their care to make sure what's expected of them and their family when they return home to make sure all the healing can take place. Thank you, Mr. Chairman.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. I don't believe I quite got what the other regions have. I know you said that you wish you had an OHSNI

type of contract, but what are you working with right now? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Just as an example, one of the topics that have come up to my level a few times is access to counselling. If somebody is going down for cancer care or very serious issues, access to counselling has been a very critical component of understanding what they're going through and helping the family adjust to some of the dire news that people receive. I'm just using this as one example. We would undertake participation with counselling services within that jurisdiction, either through CancerCare Manitoba or through Alberta cancer care, and just provide the interpretive service to be able to access those types of services in that jurisdiction.

Where OHSNI coordinates that and helps people navigate it through, they will help direct the services to the client. We do have to rely upon, in the other jurisdictions, the model of care that's in that case management system in that jurisdiction to make sure that people are accessing the point. It's a little bit more difficult. You're not having somebody telling you what's available all the steps of the way through. It puts a little bit more onus on the family and the patient to be able to access the services that they desire. That's what I meant by that. Thank you, Mr. Chairman.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. When you say you would

arrange counselling and all of that for somebody, are you talking about your department? You have somebody within the department that's working with.... Is there an equivalent to Larga in Winnipeg? I'm just trying to get a better understanding of what the procedure is. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Just to clarify, for accessing counselling in the territory, you go through the region that the patient is travelling from. Once they're in a southern jurisdiction, we would have to rely upon the services that are being provided there.

Again, the client or the patient and the family have to undertake a little bit more onus on themselves to access or request those types of services. They're available. It's just somebody's not going to always tell you all the way through all of your appointments and steps of what exactly is available. It may take a little bit of enquiry, "Who can I talk to? What's my next step?" You may have to ask some questions on your own and take a little bit of initiative. Thank you.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. It's kind of a surprise to me that you wouldn't have put an RFP out for a similar service like that in the other regions, which brings me to the question of OHSNI. When I ask about OHSNI, it's very difficult to figure out how they got set up. I have never seen a call or a request for proposal. They don't seem to be anywhere, yet we are using them. Would OHSNI then fit under the NNI

Policy? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. All government contracts are NNI applicable. I guess in the case of OHSNI as an example, if there was a submission or proposal from a northern-based group or an organization, they didn't meet the cost or the parameters of the RFP. Thank you, Mr. Chairman.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you. I think there might be some interest from some Inuit firms to deliver the same kind of service, but it was just unknown of how.... Is this a contract that's going to be coming up soon for renewal or how long is this contract for? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Right now the contract comes up on April 1, 2021. There is one extension that is available. When I talk about contracting and procurement, as following all with the procurement rules, we make sure we go with the best proponent.

That being said, when you're looking at the amount of travel out of this region versus the other two regions, to submit a business case such as OHSNI in the other two jurisdictions, somebody would have to really take a look at the numbers. Once you're committing to providing that level of service, which I'm very pleased with the level of service that OHSNI provides, would the volume in the other two regions sustain an

organization to provide that level of service?

That's something that we are exploring all the time of taking a look at what we can do in the other regions to be able to provide an equivalent level of care. We want to make sure that during our medical travel review, we are looking at the other two regions to see how we can accommodate them. Thank you.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you. Yes, I think it is worthwhile to look at that.

When I go to Ottawa, I like to go visit the hospitals and Larga, and we all like to make those kinds of rounds to see our fellow Nunavummiut. It was always a mystery to me about what happens when people go down for nothing because either they don't have an appointment or whatever the other reason is. I guess I should ask you: is OHSNI responsible for setting up appointments with doctors down there? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. They're not responsible for it, but they do assist. Whenever we coordinate medical travel, especially if people need to see different specialists or need different appointments, we try very diligently to make sure that we're piggybacking appointments.

That being said, it does happen where people have gone down for appointments and there is conflicting information or maybe the appointment didn't exist as Medical Travel had understood. The MEDITECH software

that we have been utilizing on case management to be able to track people from across the territory as it's being rolled out, as I had mentioned in an earlier response, has streamlined that process and has reduced errors noticeably.

It is something that through our Medical Travel Policy review, we're going to continue to look for efficiencies and identify stronger ways and methods to make sure that appointment schedules are very clear to the people that are travelling and as well, notification is far enough in advance so people can accommodate their schedule. We do our best as a department if people have conflicting schedules where we do our best to accommodate with our partners in the south. Thank you, Mr. Chairman.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. I'm going to switch gears, as one MLA always used to say.

I would like to talk about long-term care. We often talk about elders, especially lately. As you know, I'm very much involved in a project here with the Sailivik Society. We have talked about it endlessly.

One thing that I would like to find out more information on is Nunavummiut who aren't necessarily elders but have to stay down south because their needs can't be met here through assisted living or maybe long-term care, but they're not elders. How many Nunavummiut have to be in the south because they can't receive that type of care here? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. It's challenging to answer that question because there are some instances where Health is involved in providing care in a facility down south, but typically the responsibility is to Family Services to provide that level of care, so I wouldn't have access to those numbers. Maybe she could coordinate with me and the Minister for Family Services to get a more accurate, detailed response. Thank you.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you. In your business plan under long-term care you have a little over \$7.7 million. Is that in or out-of-territory costs? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. That is in-territory. Thank you.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. One of the things, as you know, I have been frustrated with, really, is the whole issue of the hospital management board.

I think the House, everybody stood up and we all agreed that we wanted to have a comprehensive review of the merits and benefits of establishing a board of management. I don't really understand why there seems to be so much reluctance to release the findings. I really believe that it sends a wrong message to simply ignore the will of the

Legislative Assembly and not release those documents. In fact, as we know, you seconded the motion and I'm wondering if you would change your mind on that. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I strongly disagree with the member that we haven't followed through with the will of that motion. The wording on that was "to undertake a comprehensive review of the merits and benefits of establishing a board of management for the Qikiqtani General Hospital and report on its considerations and findings to the House."

I realize we haven't tabled a report on that and I did offer and the offer is still open to sit down with the member and discuss all the different levels of how we considered it, but I strongly disagree that we haven't.... If anything, I believe we have taken a solid step forward in the creation of a board of management at the QGH to occur at some point in the future.

With the board governance model that we're looking at right now, we want to make sure that we have community engagement linkages to the local community health and wellness committees. The allocation of resources that are necessary to put up an advisory board are sincere and they are going to be occurring in the very near future.

We also want to make sure that we're not putting the government or the Department of Health itself at risk or our patients at risk. It's not as simple as adding a board of management to a facility like that; to make sure that we're

providing consistent care across the territory for one and for two, to make sure that the accountability that ends at me, I'm responsible for it.

I understand a board of management works in larger jurisdictions and I believe it can and will work here, but we're not quite ready for that step right now. I think the Department of Health is taking a very serious step forward in the process of getting to that point by creating the depth through an advisory board that will have an impact on the direction of the QGH in particular. Thank you, Mr. Chairman.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. I guess I would disagree with you. I don't think the department has proven anything that they have done to this House because there was a motion passed and it specifically said specific documentation that we're looking for, but we haven't seen it. Like you said, you haven't tabled it.

I think personally an advisory board, in my mind, with no authority would be a waste of time. Maybe we should wait until a proper management board could be established. Maybe we should wait to find out from the department why a management board can't be established right now. We don't have the information that you are looking at. We don't have it here. All we know is that we passed a motion and this motion was supported by everybody here. All we have heard from the department is that "Oh, no, we can't do that. We have to have an advisory board." We don't know why. You haven't provided that information to us.

Maybe you are right. Maybe you're absolutely right and we shouldn't be having a management board or maybe we're right. We don't know that because we haven't got that information. That's what we're looking for from you, is to provide that information. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I appreciate the member's passion behind this topic. Again, I just want to reiterate that the motion clearly stated it was to undertake a comprehensive review of the merits. It wasn't to put in a board of management. It did not state that in the motion. A private member's bill cannot force the government to undertake different expenditures. It was to come back with the merits and we saw the merits. That's why we came back with the creation and the suggestion of the creation that got approved through cabinet to create an advisory board.

The invitation is totally open to the member to sit down with me to go over the pros and cons of the five different models that we examined. We have the information in a number of different pieces in a number of different ways. It's not set up in a report. When we're dealing with the structure and formal processes that need to be followed to make sure that a report gets provided, I'm taking away capacity from people that are working on a number of different initiatives and I feel that it wasn't a prudent use of time for those people to be used to put in the formal report. I'm totally open to sharing the findings.

If the member keeps pursuing this and she still agrees after the sharing of information with her and any other of my colleagues around the table that want further information on this topic, I would be more than happy to sit down and explore, again taking resources away from their duties and the department to satisfy the member's need for a report. Thank you, Mr. Chairman.

Chairman: Thank you. We may be getting just a bit out of what we're trying to do today, discussions. Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. I think we will have to pursue this through another means.

I would like to know a little bit more about the dental plan that we have in Nunavut. Recently I have been dealing with a constituent who has several children and two of them need dental work with a dental surgeon. One was approved and the other one wasn't. They were told that in order for the other child, who is only a couple of years older than the first, needed their own personal insurance.

Now I'm becoming very confused over what's going on. What are the criteria? When a dentist refers a child to the dental surgeon, can the child be only looked after if the parents have personal insurance for such things? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I'm surprised to hear that. I would very much appreciate, outside the House, if the member could give me

some further details and connect me with that parent.

NIHB has committed, through the children's oral health project, to provide oral health promotion, prevention, and basic treatment initiatives for children zero to nine years of age. In addition, through NIHB coverage, they would be covered for additional treatments on an as-needed basis.

We do work with dentist offices here in Iqaluit and through contracted services throughout the rest of the territory. The criteria do come out of NIHB where the billings for dental treatment are paid from, but as far as the details on why one child would be accepted than another, I would be curious to know the circumstances around that. Thank you, Mr. Chairman.

Chairman: Ms. Angnakak.

Ms. Angnakak: Thank you, Mr. Chairman. If the minister would remember, I did bring it to your attention last week and I also phoned the hospital or your patient relations office because I was told to do that. I did that as well. I've had no response from them.

Today when I phoned the parent to see what follow-up has been done on their behalf, they said, "Nothing," and they're very angry about it and they don't understand why one child would be favoured over the other one. For them the rules changed. In fact the mother said, "Well, I'll go back to the dentist and get a referral." The surgeon said, "It doesn't matter. I have it on the file that your son won't be seen unless you have personal insurance." I thought that was a very odd way to be dealing with

Nunavummiut here. It's the same one. We need to do something about it.

I think that's all from me right now. Thank you very much, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I do recall that conversation now and it was being looked into and I'll have staff follow up with that immediately. Thank you, Mr. Chairman.

Chairman: Thank you. The next name on the list, Mr. A. Sammurtok.

Mr. Alexander Sammurtok

(interpretation): Thank you, Mr. Chairman. (interpretation ends) I would like to ask a couple questions.

When a patient or client makes a phone call to the health centre, they're referred to the nurse on call, indicating that there's a long list of other patients that are required to be looked at.

Why would a community like Rankin Inlet, when there are about five or maybe six nurses, be referred to a nurse on call? (interpretation) Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. When we're dealing with after-hours care, it's always a challenge. Our nurses are expected to work a full day of work and then be on call throughout evening hours and sometimes for extended days where it can put a lot of stress and challenge on the system itself.

With regard to the member's specific community in Rankin Inlet, it would depend on the circumstances of what the patient is calling in for. With specifics to the provision of care, that is the one of the things with the model of care review we're doing right now that we're undertaking to ensure that when we're considering what care is expected to be provided, we're looking at a number of different initiatives; staggering hours in some of our communities at the health centres to be able to give nurses staggered shifts. We're looking at potentially extended hours in some to meet the community's individual needs.

Again, when I go back to provision of health care in general, we want the engagement of the community and we want to be able to provide the same level of care across the territory. There may need to be some customization in certain communities to be able to provide that care consistently. Thank you.

Chairman: Mr. A. Sammurtok.

Mr. Sammurtok: Thank you, Mr. Chairman. It's not for in-patients that are trying to make an appointment afterhours. It's between 8:30 in the morning until 5:00 in the afternoon when the nurses are at work during those times, and then they are referred to a nurse on call. I can't understand that at all. Would you explain that a little more clearly to me, please? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I will have to look into the specifics of it, of the scheduling process that is used in Rankin Inlet. I don't like

to assume anything and we all know what could happen then.

The nurse on call may be the most consistently available to talk to in case somebody needs to have an immediate telephone triage on how urgent their need to actually get physical care. The nurses that are in the hospital are busy doing other duties and they may not be near a phone consistently.

It's something that, again, I have to look into the details of how they structure it in Rankin Inlet, but to me that would be a pretty safe guesstimate on my part of why they would direct calls to the nurse on call because there would be somebody there that's available to take a call. Thank you.

Chairman: Mr. A. Sammurtok.

Mr. Sammurtok: Thank you, Mr. Chairman. On another topic, when a physician makes an appointment with a client and the southern physician or the doctor requests that the patient go down south for treatment with an escort, who decides in Nunavut, in the community that the patient can't have an escort, especially when they're going down for an operation? (interpretation) Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I wouldn't want to put the onus on an individual. It is the policy itself that dictates whether people would have an approved escort. There may be instances and I know of instances where the doctor recommends an escort for the patient, but depending upon the medical procedure that is being undertaken, they

may not necessarily need one. There are eligibility criteria under the travel policy guidelines that are available and the escort has to meet the criteria as well.

Whether the patient gets an escort or not follows strict policy criteria. Medical travel clients are eligible if they need legal consent by a parent or guardian; have a mental or physical condition preventing them from travelling without assistance; a unilingual Inuit language speaking client travelling to an approved centre where interpretive services are not available and the client escort under those circumstances are required to speak full English and the language of the client; a unilingual Inuit language speaking client that is 65 or older and a client escort is required to participate in the client's treatment program and will receive instructions on specific and essential home medical nursing procedures that cannot be given to the client alone.

It's often the case that southern physicians may recommend an escort for a medical travel client, but only a Nunavut practitioner can officially endorse the escort request and seek approval. The challenge we sometimes encounter is that southern medical professionals don't understand our policy for one because they're not Nunavut practitioners and two, as I had mentioned in an earlier response a couple of days ago, the Department of Health is again coming back to the legislature with a supplementary appropriation for medical travel costs.

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

Chairman: Mr. A. Sammurtok.

Mr. Sammurtok: Thank you, Mr. Chairman. What I can't understand is at the end after the Department of Health spends, let's say, \$10,000 for that patient just on medial travel, they finally approve the patient to go with an escort and they get their treatment. I still can't understand why. If they had sent the patient with an escort in the first request, that patient would have been treated and the Department of Health would have saved themselves \$8,000 for that person.

Maybe the policy is different from the southern jurisdiction, but I think you guys will need to look at this a little more closely in order to save more money in regard to this. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Under our medical travel review, I'm sure that topic will come up. Thank you, Mr. Chairman.

Chairman: Mr. A. Sammurtok.

Mr. Sammurtok: Thank you, Mr. Chairman. To my favourite topic. On your priorities for 2017-18, "Assess population needs and develop a long-term plan to expand the continuing care sector in Nunavut." Now, in April of 2015 a report was tabled, *Continuing Care in Nunavut* 2015 to 2035.

My question is: why another assessment for a report when they already know there are elder requirements for continuing care? (interpretation) Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. One of the main focuses when we're looking at continuing care, especially within the community, is there are changing parameters and different numbers that are changing. As demographics change, we want to make sure that we're providing the supports through our home care services. We're continuously looking for partnerships to look at utilizing outside facilities or partnerships within different communities on providing elder care on a fee-for-service basis.

As the member is very aware, I know he has been arguing logically for a continuing care facility in his community of Rankin Inlet for three plus years that I have been sitting in this legislature with him. I don't think the need can be argued. What can be challenging is finding the capital dollars for the government to build a facility like that and the length of time it takes to put it through the capital planning process.

We get numerous questions across the government from different departments on different pieces of infrastructure that are needed across this territory. It's not to begrudge the need of a long-term care centre specifically in Rankin Inlet, but there are also opportunities for partnerships that could be explored with other organizations or societies that we can continue to explore.

Our *Continuing Care in Nunavut*, which was tabled in the 2016 sitting, was not an evaluation of capital infrastructure. Thank you, Mr. Chairman.

Chairman: Mr. A. Sammurtok.

Mr. Sammurtok: Thank you, Mr. Chairman. I know I have asked this question in the House before, how many elders need to get out of Rankin Inlet before Health would consider building a new facility. It doesn't have to be in Rankin Inlet. It could be anywhere else in the Kivalliq.

Right now in Ottawa we've got four, Tommy Partridge, Mary Anawak, Bernadette Henrie, and Bernadette Irkootee; Arviat, we've got Tony Manernaluk; Gjoa Haven, there's Connor Issigaitok; Baker Lake, Eva Howard, Lizzie Ittinuar, and Ms. Akerolik. That's eight people out of Rankin Inlet.

How many more people do we need to send out of Rankin Inlet for care in other communities before you guys start considering building anything in my hometown? In this report also where you guys are sending the elders to the province of Ontario, Ottawa, they're going to get short for elders' care facilities too. I encourage the department to start looking very seriously in building another facility for Nunavutmiut particularly in the Kivalliq. (interpretation) Thank you, Mr. Chairman.

Chairman: It's getting into a capital-related item, but if the minister would like to answer. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I recognize the member's passion behind this topic; I share it. Again, when we're talking about capital dollars, it's a challenge to access. In addition, two of the facilities that the member mentioned are in the Kivalliq. There's a facility in Baker Lake and

there's a facility in Arviat.

It is a shame that we have to send people outside of their home community to access the level of care that they need, that they're assessed at medically. Until such time as we do have the capacity within an individual's community, we're going to have to continue to explore options of sending people outside their home community to other care facilities in and outside the territory.

I do know I met with a couple of different groups across the territory quite recently. The member from Iqaluit-Niaqunnguu has mentioned herself that she's part of the society that's interested in building a long-term care facility and providing services out of there on a feefor-service basis. There's another community in the Kitikmeot that I've had very serious discussions on the same type of initiative where an outside organization or society would build the infrastructure and we would utilize the services on a fee-for-service basis.

Going forward, again, we have a continual challenge for providing infrastructure across the territory. Until such a time as a project like that can get on the capital plan, we're left to whatever options we have available to us. Thank you, Mr. Chairman.

Chairman: Mr. A. Sammurtok.

Mr. Sammurtok (interpretation): Thank you, Mr. Chairman. (interpretation ends) I realize I was talking about the capital plan, but it's a part of the... . It is so frustrating, especially when they're coming from my community and going to the other communities. The other communities could be using their own

facilities to care for their elders. From Arviat, they send them to... . If I'm not mistaken, they were sent down to Ottawa. They could have been staying in Arviat. I encourage the health department to really talk with the federal government so that will be able to keep our elders in Nunavut. That's just a comment. Thank you, Mr. Chairman.

Chairman: The minister wants to answer the comment. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Like I said, I empathize with the member because I am passionate about the same thing. One of the ways that we are combating this issue is by working at providing a higher level of home care and care in the community so that people can age at home for as long as they can before they have to enter a care facility of any sort in any location. That's where we're focusing a lot of our energies until such time as we can access dollars to be able to actually construct facilities. Thank you, Mr. Chairman.

Chairman: Next name on the list, Mr. Mikkungwak.

Mr. Mikkungwak (interpretation): Thank you very much, Mr. Chairman. I would like to start off with a question that my colleague spoke about previously, medical travel patients that have to go south to go see doctors. If you look at it from the other side, I would like to talk about it in another way and ask a question.

Sometimes it becomes very expensive when bilingual people like myself.... For example, when I first became elected, I went on medical travel because I needed surgery. The doctor was not my

surgeon and they told me I was not allowed to carry anything heavy after my surgery and I couldn't hold anything for six months.

From that, I believe the Medical Travel Policy needs to be amended because many people see the actual surgeon and they tell us we need to come with an escort. If you don't have someone to come and carry your bags, then the surgery will not be done and you will be sent back home. That wastes a lot of money for the Department of Health.

When the minister was responding to questions earlier, he said he will be reviewing and working on the Medical Travel Policy. When will this review be completed? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. We're anticipating it to be complete in fiscal year 2017-18. Thank you, Mr. Chairman.

Chairman: Mr. Mikkungwak.

Mr. Mikkungwak: Thank you, Mr. Chairman. Earlier you indicated, "approved by a Nunavut practitioner." At the same time when you have a contradicting situation where a surgeon from the south whom you have sent a patient for medical to and the surgeon will not do the operation, as the surgeon indicates, "to ensure proper recovery, you must not handle anything 10 lbs. or more for a period of six months." Which one is going to override, the surgeon or the Nunavut practitioner? Is it the surgeon who is operating or the Nunavut practitioner who covers the cost? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. A southern practitioner can recommend an escort for a patient, but a Nunavut practitioner has to approve it because they are fully aware of our Medical Travel Policy and our escort policy.

There may be instances, as the member is speaking from personal experience on, where the aftercare for treatment may restrict somebody's ability to lift bags. Those services still are provided through medical transport when people are travelling for medical purposes. When somebody goes down on medical travel, they're typically not taking a great big heavy bag if they're just down there for a few days. I do understand, with our high cost of living here, people do like to go down and take advantage of southern shopping opportunities. At the same time, if people do decide to take that, that can't be a medical expense.

I do understand the member's personal situation. At any time, if somebody feels that the medical practitioner that is not authorized and Medical Travel is making an error, or there may be other additional information that they may not be aware of, there is an appeal process that is in place that people can appeal the decision and it will move it up the chain. Thank you.

Chairman: Mr. Mikkungwak.

Mr. Mikkungwak (interpretation): Thank you very much. I was just using myself as an example. There were many other people who received the same surgery as I did. I didn't know that at that time, but I was glad to survive that operation.

I'll move on to something that my colleague from Coral Harbour spoke about. Right now in the Kivalliq there is just one airline that handles medical travel to the south and I always see my constituents using that airline. I know I have asked questions about this and the minister will remember.

The escorts will be carrying the oxygen tank for the patients. However, sometimes the Department of Transportation or the airline takes their time and we have to wait. When the oxygen tank is not plugged in, it has a limited battery life. Can you think about this?

A patient that needs oxygen may have to travel from Rankin Inlet to Winnipeg, which is more than a two-hour flight. More and more people are travelling that need an oxygen tank. Sometimes they can carry it on the aircraft, but most times they have to leave it behind in the terminal and they use a little portable one.

Have Calm Air and the Department of Health put any more consideration on the matter? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. This is the first I have heard of it being an issue. Most oxygenators that are portable do have a fairly extensive battery life before it would run out. If somebody is travelling specifically with a tank, I'm sure there are extra tanks that could be travelled with, with the patient if there are delays. I'll have my officials look into the situation a little bit more detailed. This is the first I'm aware that this is an issue.

Thank you, Mr. Chairman.

Chairman: Mr. Mikkungwak.

Mr. Mikkungwak: Thank you, Mr. Chairman. I thank the minister and officials that are going to look into that. It would add more security to clients/patients who are travelling with oxygen tanks.

Moving on, as the minister is very well aware, we do have an elders facility which the department is going to soon be taking over from Family Services. Your 2017-2020 business plan includes a future priority for the 2018-19 fiscal year to address the need for dementia care.

Can you describe the current need for dementia care across Nunavut and provide further detail on how it is currently being provided to Nunavut residents who need it? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. The numbers are fluid, as cases get identified, as people access treatment facilities that are available. I do have a long-term care wait-list for confirmed or suspected dementia. As of early February, it was 12 individuals. At the same time that has probably changed since then, even just due to placements in facilities for people in care.

We're always exploring opportunities to be able to provide... An example with the preplanning, again I'm going to delve into the capital side of things just for a moment. In our preplanning in the Igloolik facility, we've got some preplanning dollars set aside to examine

an expansion of that facility that could be carried over to a similar facility in Gjoa Haven, the data from that. I'm looking at having that information available to us so that we can make some decisions ongoing on accessing the level of care in the territory. Thank you, Mr. Chairman.

Chairman: Mr. Mikkungwak.

Mr. Mikkungwak (interpretation): Thank you very much, Mr. Chairman. In your business plan for 2017-18 it also states that right now the health department is taking over the responsibility of elders facilities from the Department of Family Services. Does the health department have a good foundation to take over the elders facilities in Nunavut? With respect to the foundation that you will be creating to take proper care of elders who live in elders centres, are you working on that this winter or are you just in the initial stages? Thank you very much, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. When the responsibility was diverged from Health and from partial programming under Health and partial programming under Family Services, I think it was an unintended consequence of that departmental division that the programs and care got split up with the departments.

We have taken some on our territorial care coordinator and some of the positions that we have in there have been assisting the transfer. We've had a transition team that has been in place for most of the year now, if not longer, on

the transition of these facilities back into the care of Health or back in the responsibility of Health. That is where the expertise is and that's where the health professionals are. That is, to me, the best location for responsibility and I'm very much looking forward to taking responsibility for those facilities as well.

Just as an example, we just had a position for a territorial executive director of continuing care. We just had that position filled and the person just started today as a matter of fact. Thank you, Mr. Chairman.

Chairman: Mr. Mikkungwak.

Mr. Mikkungwak (interpretation):
Thank you very much, Mr. Chairman. I also thank the minister for his response.
In my community the Martha Taliruq
Centre is the elders facility. It has been in operation for many years and the staff is undergoing training. I know that sometimes the board members change, but they have a solid foundation and they have been functioning and operating smoothly. However, the facility maintenance is where the problem is occurring.

I know that the Department of Health is responsible for the care of seniors for the whole of Nunavut. Are they going to consult with the board members and the staff of the elders facility or will you be meeting with them this coming winter? Thank you very much, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Just for the member and everyone else's information, part of our transition team with the Department of

Family Services has already met with board members of that facility and we're continuing to go forward. As an example, \$200,000 is being transferred from Family Services' budget over to Health to cover any maintenance or potential renovations that might be needed.

If we identify, in collaboration with Community and Government Services, any additional needs that need to be met for the health and safety of the residents of facilities such as the one in Baker Lake, that is something we will bring forward to our capital planning or through our small capital process of making sure that any renovations that need to be done will be done as monies are available. Thank you, Mr. Chairman.

Chairman: Mr. Mikkungwak.

Mr. Mikkungwak (interpretation):
Thank you very much, Mr. Chairman.
My time is running out, but this is my
last question. As a member for the
Kivalliq and also a resident coming from
Baker Lake, I know that patients have
had problems with the Winnipeg
boarding home. I keep telling you about
the complaints that I have received and I
have also relayed them to the patient
relations office. Sanikiluaq is also a
community that has problems or they
have concerns about the boarding home.
It seems that we keep talking about the
issues that arise.

I want the Minister of Health and his officials to know that the patient relations office is popular with the people of the Kivalliq, particularly Baker Lake residents. It would make sense if you can consult with those communities about their concerns while you consider

a boarding home for the Kivalliq or to investigate the problems experienced by medical clients. It is after all in your best interest to do so. The patient relations office should lead this investigation because of the complaints they already receive. They are connected with the medical travel clients and health centres in the communities.

I'm just offering a suggestion and I would be happy if you can follow it up with an investigation Thank you very much, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Any time we receive concerns brought to the department's attention or to my attention or to the patient relations attention, they're dealt with right away.

I know there have been a number of issues that have been talked about by members from that region about that specific boarding home. The biggest advice I can give you all is that any time there's an issue that gets brought to your attention, you bring it to our attention, you contact the office of the patient relations, or through yourselves, you contact me or through the department.

We take every complaint or every concern very seriously, but at the end of the day it takes people bringing forward specific examples for us to be able to continue dialogue with the contract holder of any boarding home that we have. I know, within Winnipeg, there have been discussions with the management team of that facility. In general the feedback I'm getting is that

most of the issues have and are continuing to be dealt with.

As further issues, if any, come to your attention, please let us know. We need specifics. To sit here and talk about issues in a facility in a general manner is very difficult for me and my officials to deal with. The more specific of an occurrence that we can get information on helps us in our investigation to make sure that contracting obligations are being followed. Thank you, Mr. Chairman.

Chairman: Thank you. We're on page H-6. Health. Health Care Service Delivery. Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Chairman. Good afternoon, Mr. Minister and your officials.

Before I move on to my question, I believe you were responding to Ms. Angnakak when you stated that the Medical Travel Policy is currently being reviewed. Perhaps you alluded to this earlier, but let me ask you: when will you complete the review and when do you expect to report back about the results of the review and recommendations? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I'm sure the member and all my colleagues here can understand the complexity of a medical travel review. There are so many different components to it that we are undertaking. It has started already and we're looking at a final report in the next fiscal year, 2017-18. We're just ending this fiscal year in

another month, so it's in the upcoming fiscal year that the report will be finalized.

We are looking at a couple of different components to it. One is internal to make sure that we're identifying all the efficiencies that are available. As well there's a working group with Health Canada also because they're directly involved through NIHB. There has been more and more recognition on their part of the challenges that we have with medical travel and escalating costs. There are other people that are at play within the review itself. I sincerely look forward to the results of that report sooner rather than later. Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Chairman. Do I understand that the report will not be tabled within this current government and that it will probably be tabled in the next government? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Realistically chances are it will be in the next government. Thank you, Mr. Chairman.

Chairman: Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Chairman. Although I don't want to go into detail of the contents, while I have the opportunity, I would like to say that I might not be re-elected to the next legislature because we don't know what the future holds.

The issue that I hear frequently in my community is the seniors. I know that the legislation states that if you are 60 to 65 years old, you are allowed an escort and if you're a unilingual person at the age of 60 to 65, you can ask for an escort. The issue that always occurs is if these individuals at that age are bilingual, they don't require an escort according to the policy.

If you're going to have an escort, it breaks the policy right away if you're bilingual. This creates some problems. When they're around that age, they tend to get tired easily and they're physically weak. They usually have a heart condition. They're required to travel by themselves and carry their luggage, and so on, as long as they're bilingual. I urge you to review this carefully. I know that we just put our elders out there because they're bilingual, that it's okay for them to travel alone. The cases are exactly the same, whether they're unilingual or bilingual.

My question is in regard to Mr. Mikkungwak's comment about the Inuit centre in Winnipeg. They hear about the problems over there. Also at the Baffin region boarding home, Tammaativvik in Iqaluit, Mr. Keyootak hears about problems or complaints made by the patients. When we hear about the complaints and issues at Tammaativvik, who is going to resolve them? Is it your department or the management of the boarding home? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. It's both of us. It's collaborative. There are regular meetings

that do occur, minimum quarterly, but as issues arise, if there's a need to meet more frequently, we do. The next scheduled meeting is in March.

One of the main issues that I hear out of Tammaativvik.... The food was a new one, so that's something we're looking into. There is a schedule for meals that are available for people who are early risers. There are cereals, bagels, and toast and that that are available throughout the morning. There is a schedule for breakfast, lunch, and dinner. There are snacks in between, a mid-morning snack and a mid-afternoon snack that are available. Typically they try to have country food available at the afternoon snack as well there's another one around nine o'clock in the evening. There are a number of different avenues that way.

One of the most common issues or concerns that I get is the overcrowding and that is not an easily remedied challenge. The first recourse is to hotels. Iqaluit is a very busy city and there are a lot of different events going on that put strain on existing hotel infrastructure. There are bed and breakfasts that are utilized. Some of the members may have noticed a few weeks ago in the media that there was an article about Tammaativvik putting out a call for additional billets, people that have available bedrooms that they're willing to open their house to on a paid-for basis.

I do know that there have been some discussions of the existing contract holder to look at an expansion plan, so I look forward to hearing more information on that to address the need. The stats that I have are that the facility

is overbooked 30 percent of the year. They have approximately 23,000 room nights per year and it has booked over 30,000. It's a continual challenge just to have the room available.

I can't tell you how difficult it is when I see pictures from residents and colleagues of an elder sleeping on a blanket on a floor. The facility does request people to volunteer their bed for an elder. For people that are listening, I hope you seriously consider that out of your own medical needs taken into consideration, of course, if an elder needs a bed, they please help our elders. Thank you, Mr. Chairman.

Chairman: Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Chairman. I'll move on to another topic. Mr. Chairman, please advise me if I make a mistake.

I have a question about the healing centre that's utilized in Ottawa by Inuit, which was temporarily closed. At that healing centre they had a foundation of Inuit culture, language and beliefs. They had Inuit employees who worked at the healing centre and it was fully utilized by our government. I heard that we did spend quite a bit of money. Once it was closed, the employees were laid off.

Now I hear that there's another centre that has been opened and will be utilized by Nunavut. I have two questions that I would like to ask at this time, Mr. Chairman. Have those people who were employed at the old healing centre been rehired by the new centre considering their experience? The clientele are specifically Inuit. Does the new centre have the same Inuit culture and beliefs

as its foundation? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. My apologies; I don't have all the numbers of positions. I do know that some of the staff did return and it's under the direction of a board. There could have been some staff not available, whatever the case may be, but there have been some rehires. Thank you, Mr. Chairman.

Chairman: Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Chairman. Again, part of my question was in regard to the new centre and I do know that it's not under your responsibility. Since we're going to be using that new centre, are you satisfied with the foundation and if they will be using the Inuit culture and beliefs as the foundation of their organization? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I agree with the member. It's very important to have culturally grounded healing, especially with people that are going through treatment or addictions or counselling that's needed in that manner. It's very important. There's a strong recognition more and more so, not just from Inuit but also other First Nations and other indigenous people across the country, that there is a need to have that grounded base of healing within your cultural parameters.

We're still working with the facility that's in Ontario. I was just informed

that there were discussions even this morning still. From the way I understand it, it's just open to women right now. We're looking at how we can roll out more treatment availability to all of our residents.

I know I've had discussions with Natan Obed, the President of ITK, where he has brought up in presentations that there are no treatment facilities in any of the Inuit regions across the country. I know the federal minister is very aware of that. When she was here a few weeks ago, it was a topic of discussion that I had with her on not just accessing more Inuit culturally relevant facilities but also looking at the potential of locating facilities in the territory with Inuit trained counsellors. Thank you, Mr. Chairman.

Chairman: Mr. Enook.

Mr. Enook (interpretation): Thank you. I have a question on page H-6 regarding various services. There often is a discussion, for example, about medical professionals coming into our community for a very brief time and not everyone who wishes to be examined is seen. I can use an example about my daughter's two daughters who have been waiting two years to see an eye specialist without success. That's just an example.

What are you doing to possibly extend the specialized medical personnel travelling to the communities? What is your department doing about the special travel, be it dental services, eye care, or other types of services? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. The member brings again a very important initiative that I wanted us to focus on very diligently, especially the specialized services for kids' oral health. I know the member is talking about the eye care team and a number of different specialists going into the communities.

We take a very close look at the waiting lists as they occur and examine ways on how to increase visits. There is a mandatory amount of days in our contracts that the majority of specialists, specifically with eye care and dental care, have to spend in a community. Our first objective, obviously, is to make sure that they're maintaining that level of their contract.

I know the member is aware that a few years back where the federal government had contributed some access funds for kids' oral health where a number of people from his community were flown down to a facility in Manitoba to receive the oral care that they needed.

There are a number of different communications that we have amongst ourselves on waiting lists and to see how we can tackle that. In addition there are also opportunities for partnership with the federal government on specific initiatives. Thank you, Mr. Chairman. I hope that answers the member's question.

Chairman: Mr. Enook.

Mr. Enook (interpretation): Thank you. Going to another subject, we try to be prudent about spending money. One thing I usually bring up is the telehealth services where patients can be diagnosed

and it seems like we're not utilizing it enough. Is it because it's too expensive or we don't have enough equipment to operate telehealth? Maybe I just don't know about it, but I don't hear anyone saying that we're fully utilizing telehealth. Can you give us an update on what's happening with that? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I was hoping somebody was going to ask me this question. Telehealth is, I think, a perfect example of how we can provide better level of care for our residents without the necessity of travelling.

There are a number of different initiatives that are currently ongoing. Some of the things that I'm really excited about is we have actually put out new infrastructure across the territory in almost all of the communities. We're still waiting for a few communities, but we have new cameras for ear, nose, throat and skin conditions that have been involved in all community health centres and training is ongoing.

One of the other exciting initiatives that have been undertaken is telehealth equipment in all the mental health offices in the community health centres specifically for mental health so that there's no scheduling conflict for telepsychiatry and a number of different initiatives.

Are we doing everything that we can with the infrastructure that we have? No. I'm the first and I'm totally open. I believe that we can utilize the telehealth technology in more expanded roles. It's

something I know the director in charge of telehealth and I'm sure is hopefully listening and happy to hear that I'm a very supportive proponent of initiatives that they're undertaking. In addition to that we're continuously putting business cases forward to be able to expand the service delivery through telehealth. I look forward to championing those business cases moving forward so that we can really take a look at a more solid benefit.

Just some statistics from April 1 to the end of November last year, there were 737 clinical sessions. That's not just somebody communicating from the health centre of somebody on medical travel maybe here to have a baby or something. Those are clinical sessions, which is equivalent to 4,000 hours of telehealth. Statistically we are increasing our use. I believe, a couple of years ago when I was asking that question, it was up around the 2,500-hour range. There are increased uses expanding on the infrastructure and I look forward to more enhancements to the program. Thank you.

Chairman: Mr. Enook.

Mr. Enook (interpretation): Thank you, Mr. Chairman. This will probably be my last question. It's not really under the health care service delivery, but I have asked this question on more than one occasion.

To remind you, Mr. Minister, we had a doctor in Pond Inlet who was the same doctor for the High Arctic, Clyde River, and I don't know if Igloolik was involved, but Clyde River was one of the communities. She had to leave for some reason and has not been replaced.

Since I became an MLA, I have been asking repeated questions about how we can be more prudent with our expenditures. Since we don't have a doctor, we have to send patients out of the community to be provided a service that they require. It would be a cost-saving measure to have that doctor there. There are accommodations for that position. Has your department considered possibly getting a resident doctor up in Pond Inlet or if you could possibly look at relocating one of the doctors to the High Arctic? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I haven't been around long enough, I guess, to remember a physician travelling through the High Arctic. The member probably knows a lot more about it than I do.

One of the initiatives that I am proud of that we're undertaking is the nurse practitioner which has offset in Pond Inlet, as an example, 570 physician appointments just in one year. The higher level of care that a nurse practitioner can provide offsets a lot of needed physician appointments. I know that doesn't really answer the member's question. I do know that that will be a component of the model of care review that we're doing as well, making sure that the right care is being provided at the right place by the right person. That is something that will be examined.

I am very excited about the nurse practitioner that we have highlighted in the member's community of Pond Inlet, and I look forward to more continued success on that program across the territory. Thank you, Mr. Chairman.

Chairman: Thank you. The next name on the list, Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Welcome, Minister Hickes, Ms. Stockley, and Ms. Kabloona.

My first question has to do with mental health workers or psychiatrists. Have they all been trained through the Uqaqatigiilluk! (Talk About It!) initiative? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Sorry for the delay.

They wouldn't need that type of training through ASIST. Thank you. Just to clarify, they are actually trained at a higher level already where they wouldn't need that lower level of training. Thank you, Mr. Chairman.

Chairman (Mr. Mikkungwak) (interpretation) Thank you very much. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Maybe I will ask it this way. Are the mental health workers able to provide training on the Uqaqatigiilluk! suicide prevention initiative? Thank you, Mr. Chairman.

Chairman (interpretation): Thank you very much. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Some of them are trainers and more of them are becoming trainers right

now. I believe there are 15, if I recall the number correctly, that are in a trainer program. Thank you.

Chairman (interpretation): Thank you very much. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you. I also thank the minister for the clarification. We would like to see more training made available to Nunavummiut.

Mr. Enook already spoke about telehealth diagnosis. Last week in your opening comments you mentioned that psychiatrists are going to be providing more services to Nunavummiut through telehealth. When will this be initiated? I don't know where the psychiatrists are situated. How would they be utilized? Thank you, Mr. Chairman.

Chairman (interpretation): Thank you very much. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. That technology is already being used for telepsychiatry. It's an ongoing initiative that we're looking at growing more and more. We have relationships with a number of southern institutions already, Sick Kids in Toronto as an example, where we have a good relationship accessing telepsychiatry sessions out of there. There are additional facilities that we are looking at growing and increasing access to. A number of different reasons, one it addresses some of the backlog that we have with our mental health workers on the clinical psychiatry side of things. It just provides more access to our residents without the need for travel. Thank you.

Chairman (interpretation): Thank you very much. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Thank you for the additional response. I'm on page 129 of the business plan. Under Mental Health and Additions it was \$24 million last year and you're now asking for \$26,986,000. It is increasing in the following years.

I appreciate the mental health programs that they are budgeting for, but how can it be improved in our communities? Sometimes people's health conditions don't seem to change even after they see a mental health nurse and some of the clients think they need more help. How are you planning to improve this in the future? Thank you, Mr. Chairman.

Chairman (interpretation): Thank you very much. Mr. Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. That's going to be the focus of the 18 new positions that we are applying for under this budget. We want to make sure that there's more peer support at the community level where these workers are local people that are working that would be able to help people identify additional programming that they may need through self-identification in addition to clinical expertise identifying different programs that are available.

Again, if somebody feels that they're not getting the level of care, if they have questions about their care, they can contact the clinician that they're working with or they can also contact our patient relations office, which can get a professional to look at their file to adjust

any methods or access to programming. Thank you.

Chairman (Mr. Akoak): Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Thank you. Perhaps I'll move on to something else. He also mentioned the patient relations office for clients or when people ask for different services from their department. They can contact the patient relations office if they have an issue. Mr. Mikkungwak also mentioned this. When people approach me, I just direct them to that office. How has the operations of the patient relations office been to date? Are they shortstaffed? Can you update us on that? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. It's another question that I sincerely appreciate. We do have three PYs under our patient relations right now, of which two are filled, but with the amount of volume that I keep sending them, I'm sure they're going to be looking at applying for additional positions some time pretty soon.

We do have other languages. We have English and French right now. We do utilize other health care staff to provide Inuit language support. The third position where we've got somebody targeted for and I'm really hoping that we can make it work out that has some clinical background as well as Inuktitut speaking. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I also thank him.

Some people are probably angry when they call the patient relations office. How do they work with other people? Because anger does not help anybody, it won't solve anything. If they're in a bad situation and they're too angry when they approach the patient relations office, has this been a concern at any time? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I was just conferring just to clarify part of my response.

A lot of times while the situation might bring a lot of passion to, the staff at the patient relations office very clearly and very early in the discussion is advocating for the patient to be able to make sure that they can understand and just help them navigate through the health care system. There's not a lot of anger that's generated to them the majority of time. It may start off that way, but they're very good at calming the situation down.

Like the member states, acting in anger is not conducive to moving things forward in a way where people can get the services that they need. It's to identify an issue and to work with the patient and the health care system and team to make sure that the patient is getting the level of care that they need and deserve. That's what our role is as the department, to make sure that people are getting the level of care that they need.

There are candid and I'm sure there will always be differing opinions on what level of service that somebody needs, but in general they work very well advocating on the patient's behalf to make sure that the situation is resolved to the satisfaction of all parties involved. Thank you.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I also thank him. If Nunavummiut had a complaint or problem with the level of service provided by the Department of Health, it's not only the patient relations office that they approach. There are employees at the Tammaativvik Boarding Home and at the hospital. Perhaps you should set up peer support. Sometimes nurses are approached at work if there was a complaint about them. How can you get the residents in the communities, for example, to re-channel their anger and harness it for the better in the future? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I really appreciate the member's question because I just remember seeing something even recently where it's a national and probably an international issue of health care providers. The way they're treated by patients in some circumstances is very worrying.

I'm sure the member and most members have noticed signage in health facilities in general on how important it is that there's zero tolerance for disrespect and violence. We want to make sure that our staff are there.... They're there to try to help the patients or ourselves as circumstances arise. We want to make sure that they're treated with respect. We work very hard in our cultural competency within our health care

providers so that they can understand where some of this passion and maybe some of the anger come from and can work with the person in a way to alleviate their concerns.

Most people, I have found in life in general, but more specifically maybe in health, just want to be listened to with respect. Whatever the issue that they're going through, they want somebody to listen to them with sincerity and respect. If people do that, it tends to tone any type of aggression down. Health care staff, probably better than most, understand that and that is part of their everyday life to make sure that they're dealing with the patients with respect and professionalism.

I hope that answers the question, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. You answered my question. Representing my constituency, they want to be treated exactly the same way by their health care staff or service providers. Cultural differences can be a barrier, but before we become too far apart culturally, how can the community and health care providers get closer together? We all want to see the relationship improve. I'm just commenting on that on behalf of my constituency because I hear it from them. Respect has to go both ways.

Moving on to another area, in your business plan on page 129, the budget for medical travel has not changed. What do you think about that? Do you feel the amount is enough or if it's not going to be enough, what will be the reason for

you to ask for another supplementary appropriation this year? Thank you, Mr. Chairman.

Chairman: Thank you. Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. With medical travel it's an as-needed expense, so it's difficult to project until latter parts of the year on how much is actually being utilized. That being said, the member is correct. Last year there was a business case that was approved through the Financial Management Board of a \$5 million increase to medical travel. Again this year we are budgeted for around \$64 million. We're projecting for this fiscal year to go to \$73 million. That's, again, an argument we will have to bring forward in a business case for next year to look at either increasing the budget for it.

In addition, I think more importantly, is to identify ways to bring more efficiencies. Again, that's going be a large direction with the medical travel review to hopefully identify further efficiencies that can offset some of the increase in travel. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I'm sure you track the number of patients who use the medical travel budget. Can that \$64 million be broken down? It's getting close to \$64 million. Is there any way you can break it down into medical travel patients and monies spent on escorts? Is there a breakdown of the two that distinguishes the amount spent on

patients and the amount spent on escorts? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I know that in the 2015-16 fiscal year there were over 28,000 scheduled airline tickets that were booked and over 1,800 medical evacuations, or medevacs, like I had mentioned, at a cost of over \$70 million. I don't have the number breakdown in front of me for escorts versus medical patient travel.

Again, it's a continuous challenge that we have. I get challenged for not providing enough escorts and then I get challenged for spending too much on medical travel. It's a lose-lose scenario if you're sitting in my seat, but at the same time we have to do what is best for the client. That is the focus of not just the review, but the focus of the department.

We don't look for reasons to say no, but when we say yes, it has to fit within the parameters of the policy or through the individual circumstances to go through the appeal process to provide an escort. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. As long as our elders have proper medical escorts, then the money is well spent. That is just a comment. I'll stop here.

Chairman: Thank you, Mr. Joanasie. The minister had 80 minutes of questions already, so he may want to make a break. We will take a 10-minute break. Thank you.

>> Committee recessed at 17:53 and resumed at 18:06

Chairman: Welcome back to the meeting. We're on page H-6. The next name on the list, Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Chairman. The questions I was going to ask were asked. I just have a few questions, but I may have more questions later on. The first question I have is that health centres have certain furniture and equipment. Who is responsible for them? Is it the health centre administration or the people responsible for maintaining them? I would like to know who is responsible for that. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. It would depend on what the equipment was. Some equipment has maintenance contracts associated with the purchase of them, but generally it's the nurse in charge or the regional executive director that would continuously monitor any equipment or furniture needs to determine whether something would need to be replaced or repaired or could continue on the lifecycle. Thank you, Mr. Chairman.

Chairman: Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Chairman. The reason I'm asking that question is after Christmas festivities in our community, some people were going home and there was a snowmobile accident. It was an adult with children and an elderly person had broken a leg or something. It was in the

middle of the night and there was nobody in the health centre at that time.

Emergency workers would have something like a stretcher. They don't have anything like that in the community. Who would be responsible for something like that? I would like to know. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. It's a real challenge in some communities where we don't have vehicles or the ability like an ambulance service to be able to go pick up residents. I know on some occasions the RCMP attempts to assist. Some communities do have an ambulance service where they have funded through the hamlet or municipality the purchase of a used ambulance and stretcher and of trained staff. Those are pretty few and far between.

I'm not sure how to answer the member's question. Even if there was a stretcher in the facility, which is my understanding that all of health centres have stretchers in them, to be able to go to the health centre, grab a stretcher and go back to the scene, there might be.... I'm not sure if the volunteer fire department would have some initial first aid training and that type of thing where they can provide some type of splint support to get somebody to the health centre. It's an ongoing challenge across the territory and there's no simple solution. Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Chairman. That is one of my

concerns because it may happen again. We don't want it to happen again. It would be good if we had trained people that could handle things like that. That's a general comment.

The other question I would like to ask is on duty travel. Is this treated like medical travel by health officials? What committee or person decides on this kind of medical travel? I would like clarification on this question. Thank you.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. If I understood the question, whenever somebody is travelling for medical purposes, if they don't have an escort where they arrive first, if they were to be flying to Iqaluit as an example, there would be people from the boarding home that would pick them up unless they're ambulatory, which they would be picked up by an ambulance. What level of transportation would be provided would depend on where they're going. Thank you, Mr. Chairman.

Chairman: Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you. I'll ask a question in English so that I can get a clear answer. Who makes the schedule for medical travel patients? I hope I was understandable. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Whenever somebody is travelling for medical purposes, they would work with the medical travel coordinator at the health centre. In addition, we have a medical travel office

that looks after some of the bookings as well, but it's all coordinated with somebody local. Thank you, Mr. Chairman.

Chairman: Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you. You didn't understand me. If a person is going to go to a health centre in the community, I'll use myself as an example. I get into the health centre and I ask, "Can I get some help?" Then they tell me, "The schedule is full right now. Can you come back at another time?"

Even though the rules have been changed this past spring and we don't need to make appointments anymore or if you come in as a walk-in, does that mean you can do so without making an appointment? That's my question. Can people just walk in to receive treatment? That's my question, Mr. Chairman. Thank you.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Thank you for clarifying that question to the member. Whenever somebody goes in, depending upon the staffing of the health centre, there are going to be different options as far as scheduling patients in and triaging people as they walk in. The staffing would determine a lot of the parameters on how long in advance you would have to schedule an appointment or if you walk in off the street, they would take you in almost like an emergency room type thing where they would triage your need and evaluate whether you need to be seen immediately or whether you need to be seen later that day or whether it's something that can wait. There

would be medical personnel triaging or deciding how urgent your level of care need is.

With regard to whether it would be scheduled appointments or to walk in off the street, sometimes in some communities we have challenges with staffing to make sure we have the full complement on duty, so that would dictate some of them. I know during this latest flu epidemic that we had, some of the health centres were challenged and the nurses were getting sick. Some of the health centres were only open for emergencies. It does create a continual challenge.

Again, that's part of the model of care evaluation that we're doing, that we want to make sure that clinics like the well-man clinics, well-woman clinics, well-baby clinics at set times throughout the day, but we also want to make sure that through our model of care, again, we're evaluating the numbers of staff in some of the health centres. It's an issue that we recognize and we're taking a look at how we can solidify the level of care. Thank you, Mr. Chairman.

Chairman: Mr. Qirngnuq.

Mr. Qirngnuq (interpretation): Thank you, Mr. Chairman. Thank you for answering my question very clearly. This will be my final comment. This winter just after Christmas in Kugaaruk there were a lot of people with the cold and flu. There are really no cold remedies in the health centre. The nurse in charge came due to the flu vaccine. The nurse in charge in my community announced on the radio that everybody needs a flu vaccine, which was good to hear. I just wanted to point that out and I

don't have any further questions. Thank you, Mr. Chairman.

Chairman: That was just a comment. The next name on the list, Mr. Keyootak.

Mr. Keyootak (interpretation): Thank you, Mr. Chairman. Some of the questions I was going to pose have been asked already, so I'm going to ask a brief question. First of all I will elaborate on the Member for Tununiq's question in regard to the Tammaativvik Boarding Home. I have been talking about this issue for quite some time and the service needs to be improved.

It was recently announced that a bed was made for a senior citizen to sleep on the floor. This issue has been raised ever since I became a Member of the Legislative Assembly. Elders are a priority, as we keep saying in the House, especially for patients who cannot take care of themselves like people in wheelchairs, and they need proper space. Are you going to start dealing with that? As the minister had stated earlier, he seems to have heard about the elders sleeping on the floor and they are not supposed to be put on the floor to sleep because they are a priority and they should be provided adequate care. Are you going to start doing that? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. We work with the contractor to make sure that there are beds available and where there isn't, there's an attempt to find auxiliary through hotels, bed and breakfasts, billets, and that type of thing to be able to provide a bed. In addition to that, as I had

mentioned, there's usually a request that goes around the facility for people that would be willing to give up a bed to an elder. We do have wheelchair accessible rooms at Tammaativvik here in Iqaluit. We continuously work with the contractor to make sure that the needs of our patients are met.

It's unfortunate that that facility is continuously overcapacity. Like I had mentioned, over 30 percent of the year it's overcapacity. We do try to schedule specialist visits and that during lower times or when there's not as many events going on in the community, but it's a continual struggle. I do know the contractor, like I mentioned earlier, has shown some interest in providing an expansion to the facility. I look forward to discussions ongoing with the contractor to continue to improve the service delivery. Thank you.

Chairman: Thank you. Mr. Keyootak.

Mr. Keyootak (interpretation): Thank you, Mr. Chairman. I had asked this question earlier since our elders should be treated as a priority and given proper bedding, along with the physically disabled. We know the facility is full most of the time, but priority should still be given to elders because they need to be comfortable more than anyone else, along with the physically disabled. That is what I was trying to ask about, that the elders and physically disabled clients be given priority. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Obviously all of our patients or the level of care that we're providing

is important, but specifically to elders. I know if I was staying in a boarding home and there was an elder that needed a bed, I would gladly give mine up, but I can t speak for other people that already have a bed in the facility.

The other option going forward to do that would be to remove somebody from a bed and give it to an elder, and then you run into the argument of who has more medical need than somebody else out of mobility. It's not an easily overcome challenge. I would be the first to admit that, but we are working with the contractor to hopefully mitigate some of those occurrences.

I don't think it's proper that an elder is sleeping on a floor on a blanket either. We're going to continue to work with the contracting agency to work through some of these challenges. It's not going to be an overnight process. Thank you, Mr. Chairman.

Chairman: Mr. Keyootak.

Mr. Keyootak (interpretation): Thank you, Mr. Chairman. I would like to thank the minister for responding to my question. I will be expecting some resolutions to this issue.

Moving on to another question, although this was posed, I do want to get more clarification on it. This is in regard to patient relations. Some people don't know anything about that process in our community. Is this patient relations office available at the same phone number you gave to us last fall regarding requests for escorts? Is that the same phone number we have for the patient relations office where anyone, a medical client, their spouse, husband, wife, or

relative can call if they have any complaints? If a patient does not believe they are receiving the level of care, is that the same number we call? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes, it is. Just for the record, I'll read it out, but I will communicate to your offices direct. I'll forward this information on formally as well. It is 1-855-483-3003 by phone or email at patientrelations@gov.nu.ca. Thank you, Mr. Chairman.

Chairman: Mr. Keyootak.

Mr. Keyootak (interpretation): Thank you, Mr. Chairman. Thank you for clarifying that matter to me. One of my constituents in the other community has been quite concerned about medical clients being sent out and receiving inadequate care. I felt much empathy for this concerned individual.

Her spouse had gone to the nursing station many times and he was sick for a very long time. He was just given Tylenol. Every time he went to the health centre, they would just provide Tylenol to this individual, even though he was complaining about constant pain in his abdomen.

The couple believed he had a serious illness that needed better treatment and kept on insisting that he be sent out. He was finally sent out and after the doctors assessed him, he was diagnosed with hemorrhaging that had occurred for a long time and he passed away soon after. The wife was telling me about this case of inadequate care.

There are patients in the same community who have not been receiving the same level of care that they should be receiving. Often when patients go to the health centre, they are just given Tylenol when they complain about pain in their abdomen. More than one individual has passed away because of this. Can concerned individuals call the patient relations number to ask for more than just a prescription for Tylenol?

People know their own physical bodies, they know their pain, and they know when it's not just a stomach ache. Sometimes patients do not receive the level of care that they should be receiving in the other community that I represent when they go to the health centre. I believe that you need to look into this further to ensure that patients are receiving the level of care that they should be receiving. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I anticipate some forward benefits, I guess if I can put it that way, in the care. The cultural competency training that staff are going to be undergoing starting in April will help alleviate some of the challenges that the member talks about.

In addition to that, we're in the process of reminding staff Tylenol protocol across the territory. It's too common of a message, I think, we have all heard. When you're trying to communicate what your body is feeling to a health care professional, there seems to be some gaps that we're hoping the cultural competency training will help offset.

In addition to that, orientation for nurses as they come on board, we're looking at making some very serious improvements in that regard so that people know where they're working. I say that lightly, but it's very serious. People that come to Nunavut to work need to know where they are and the people that they're serving and that's the residents of Nunavut, just like we're all here to serve. Thank you, Mr. Chairman.

Chairman: Thank you. The last name on the list, Mr. Shooyook.

Mr. Shooyook (interpretation): Thank you, Mr. Chairman. To the Minister of Health, my constituents are quite concerned about the level of service with the optometrists, dentists, and doctors that come into our community annually to provide services.

There have been particular concerns in regard to dental services. When individuals make an appointment, some patients find that the dentist leaves before finishing the dental care that is required. The dentist is scheduled to stay for just a few days in Arctic Bay, for example, regardless of whether everyone with an appointment is seen. The dentist is told that it is okay if they leave even before they finish seeing all of the patients.

What kind of policy do you have when the dental professionals leave the community without seeing all the patients? That's my first question. Why is it that way? Can you clarify that matter for me? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Specifically with the dental contract that we have, there are an established number of days that they have to be in the community.

If I could just maybe get the member to clarify which community or if all the communities that he represents are experiencing the same thing, I could look into the specifics on the site visits.

One of the things that we want to make sure that we're adhering to is the contract basis for one, but also to examine waiting lists and to explore opportunities, if need be, to expand the amount of time that the specialists are visiting for.

I hope that answers the member's question; if he can clarify a specific community or if all communities feel the same.

Chairman: Mr. Shooyook.

Mr. Shooyook (interpretation): Thank you, Mr. Chairman. I'm talking about the community of Arctic Bay that I represent, not my entire constituency.

Moving on to another question, the waiting list is quite long and there are many people on the waiting list to see an optometrist because it takes a very long time for them to come to the community. My constituents are not very pleased about it. What is the status of that? Although we need to be seen and provided service frequently, are the optometrist services in the same situation as the dental services? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes, for any specialist services, there are an established number of days. Again, just as an example for dental in Arctic Bay, they're 68 days per year, so you're talking 13 weeks of the year that there are supposed to be dentists in town and I mean full weeks, a five-day week.

That being said, when you're talking about an optometrist or other specialists, when they come in, they're supposed to be there for a certain amount of days per year. If there is a backlog in a waiting list in particular like optometry or dental, I can have my officials look into it to see if there's a way we could get the dentist or optometrist to stay in town longer and we could explore that. Thank you, Mr. Chairman.

Chairman: Mr. Shooyook.

Mr. Shooyook (interpretation): Thank you, Mr. Chairman. I also thank the minister for clarifying that for me. Yes, there definitely has to be an improvement because there's no doubt the specialists leave without finishing their tasks.

We are thankful for medical treatment, but sometimes we have problems when we go to the health centre. I'll use myself as an example where this fall I decided to go the hospital twice because of stomach pain. I took advantage of being in town where there is no shortage of doctors. I was provided with a good interpreter and the doctor asked me where I was hurting. I told him it was in that area around my chest. He then poked me around the abdomen area and that's all he did. He said that I was done. He didn't even use a stethoscope or any

kind of instrument to check my illness. Sometimes that's the level of service that is provided to us.

In another incident, last year I went to see an optometrist as I needed a new pair of glasses. They told me that I had to go to Ottawa and that I would be getting reading glasses. To date when I'm reading for a long time, I get blurry eyesight. I have been waiting two years for those pair of glasses, even though I should have been given glasses not long after. That's basically what happens. It sometimes feels like we are forgotten in the process. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I'll have the department look into the specifics of why it's taking so long in this instance. One of the things that I just slipped my deputy minister a note as well is just in discussions on different specialists' waiting lists. I'm going to request some information from the department that we can review and look at a more coordinated approach, I guess if you want to call it that, to see if there's something that's ongoing in the same specialism, we can review our visits. Thank you, Mr. Chairman.

Chairman: Mr. Shooyook. Thank you. Second round of questioning, Ms. Angnakak.

Ms. Angnakak: Thank you. I just remembered something. Mr. Shooyook reminded me of something. Recently when I went to see the specialist and then I needed some medication, they had actually run out of that medication here because everybody was coming in to see that same specialist and it's the same

kind of medication. I had to wait over a week and so I asked, "How can we make this better? What needs to be done so that you don't run out?"

Both pharmacies had run out of the medication and they said that if the hospital would tell them when the specialist is coming, they would ensure to get more of those typical types of pills so that they wouldn't run out. They said that there was no communication between the hospital when the specialists were arriving and with the pharmacies.

It's not a question; I'm just saying that perhaps it's something that could very well be worked out just so that we don't have to wait a couple weeks for our medication. That's all. Thank you.

Chairman: It's just a comment. Thank you. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman, for recognizing me once again. I wanted to touch up on addictions. I don't know if the Department of Health knows which drug most people are addicted to in Nunavut. Do you keep statistics on that? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I'm sure our chief medical officer keeps track of instances and exposure to pharmaceuticals and non-pharmaceuticals that are abused. I don't have those stats in front of me.

I do know that nationwide there is a growing concern in fentanyl as an example. I believe there was some recent media coverage on cases going to the hospital here in Iqaluit with some unknown drugs that were making people very violent. We're hearing more and more of harder drugs coming to the territory.

I just want to really caution people. Sometimes you're taking something that you don't really know what all the ingredients are or what the side effects are if they're prescription pharmaceuticals not being used appropriately.

I don't have any detailed information on what specifically is more addictive in the territory to not, but I know our chief medical health officer follows very closely the circumstances in our health centres. Thank you.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. If it's possible, can the minister commit to getting that information for us? As you said, the chief medical officer keeps tabs on those types of statistics. Can he commit to providing that information to the House? Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. I'll see what kinds of statistics are available through the chief medical health officer. One of the challenges that we do have is not everyone reports what they're on. Some people don't even know what they're on when they present themselves in a health centre setting or a hospital setting.

I just do want to remind or make special note that with the outbreak, if you want

to call it that, of fentanyl cases across the country, there are naloxone kits that are available in all health centres and the hospital across the territory. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I will be looking forward to getting that type of information because I want to have an idea of what types of addictive drugs are most common up here. I'm sure there are different types of drugs that people can get addicted to. Everybody knows that alcohol and cannabis are the most common addictions and I wonder if that would be included in the study. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes and whatever statistics are available, I'll make it a point to share with the committee members. Thank you.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I also thank the minister. Moving on to another subject regarding medical transportation, there were approximately 28,000 airline tickets booked in 2015-16 and I'm assuming that includes medical escorts. I'm sure there is information on how many medical patients travelled. You indicated that there were approximately 1,800 medevacs that were utilized. I would like to get information on the numbers and the dollar figures that go with that. Thank you, Mr. Chairman.

Chairman: Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. Yes and we will work on breaking down the information with regard to patient travel, escort travel, and get those numbers to the committee members. Thank you.

Chairman: Thank you. We're on Health. Health Care Service Delivery. Total Operations and Maintenance, to be Voted. \$292,880,000. Agreed?

Some Members: Agreed.

Chairman: Thank you. Go back to page H-3. Department Summary. Health. Total Operations and Maintenance, to be Voted. \$353,387,000. Agreed?

Some Members: Agreed.

Chairman: Do members agree that we have concluded the Department of Health?

Some Members: Agreed.

Chairman: Thank you. I would like to thank the minister and his staff. Does the minister have closing comments? Minister Hickes.

Hon. George Hickes: Thank you, Mr. Chairman. It shouldn't take more than 15 or 20 minutes, but...

>>Laughter

...I would like to make some closing comments if the Chairman and committee members will indulge me.

I want to take this time to formally thank all the staff that work behind the scenes.

I was looking at a calendar the other day and I think it's one day over eight months that I've had this portfolio and you can only imagine the learning curve that goes along with that. I really want to thank not just the staff with me but the staff that are within the department that are helping to educate me, if you want to call it that. I know we tend to focus a lot on the issues and challenges that we hear about from our constituents, but there are a lot of good news stories coming out of the Department of Health as well.

I would be remiss if I didn't take this moment to publicly thank all employees from the Department of Health. Whether you're a receptionist in Kugaaruk or a doctor at the QGH, you're all part of the health care team that we're working very hard for Nunavummiut across the territory. I just want to take this time to thank everyone that works within the Department of Health. You have a lot of responsibility and I try to live my role as share the credit and take the blame. If there's anything that goes wrong, obviously members will bring them to my attention so that we can address them.

I really want to thank the Office of Patient Relations. There's a lot of work that we put to them and I commend their day-to-day efforts to make sure that Nunavummiut are getting the health care that they deserve. Thank you.

Chairman: Thank you, Minister Hickes. Sergeant-at-Arms, please escort the officials from the witness table.

We will now take a short five-minute break to set up for the next department. Thank you.

>>Committee recessed at 18:48 and resumed at 18:59

Bill 34 – Appropriation (Operations & Maintenance) Act, 2017-2018 – Education – Consideration in Committee

Chairman: Hello, Inuit. Welcome back. I would now like to ask the Minister of Education if he has officials that he would like to appear before the committee. Minister Quassa.

Hon. Paul Quassa: Yes, please, Mr. Chairman. (interpretation) Thank you.

Chairman: Thank you. Does the committee agree to let the minister's staff go to the witness table?

Some Members: Agreed.

Chairman: Sergeant-at-Arms, please escort the witnesses in.

For the record, minister, please introduce your officials.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. With me to my left is (interpretation ends) Deputy Minister Kathy Okpik (interpretation) and to my right is Assistant Deputy Minister John MacDonald. Also available in the gallery is Heather Moffett, Director of Corporate Services for the Department of Education. Thank you, Mr. Chairman.

Chairman: Thank you. Welcome to your staff. Please proceed with your opening comments, Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. I'll try to keep my comments short.

Good evening, Mr. Chairman. I am happy to appear before you and the committee today to discuss the 2017-18 proposed budget for the Department of Education.

I am pleased to be able to inform you about changes to our main estimates and business plan from previous years. My department has restructured in order to better meet its mandate and to support learners of all ages. You will notice that there are now nine rather than five lines of business. This change is a direct result of this restructuring.

I am excited to be able to summarize some of these important changes to my department, as I believe they will make it easier to understand how the department functions and how money is spent. I also believe that these changes will have a positive impact on staff and students alike. Please allow me to summarize some of the highlights:

- A new Educator Development Division to focus on providing training and support to school employees;
- A Student Achievement Division to coordinate services to students, including supports and assessments;
- Within Directorate, expanded capacity for support and coordination with education stakeholders as well as communications with the creation of Partner Support and Communications divisions.

For the 2017-18 fiscal year my department is requesting a total of \$206,472,000. This includes \$1,007,000 in new funding.

For the 2017-18 fiscal year my department is requesting a total of \$850,000 for contract services which will be targeted directly at students requiring supports in schools and will be used for things ranging from assistive devices such as hearing aids to providing specialized services such as diagnostic testing, speech language therapy, occupational therapy, and psychological assessments. This continues my department's efforts to expand the services provided to students in order to meet its inclusive education obligations. It is my intent that students receive more services more often and that they receive follow-up regardless of which region of the territory they study in.

To administer this increase in services and supports to schools and students, my department will be reallocating two existing positions and creating new education support services coordinator positions. Additionally it will be creating another new position to provide specialist support focusing on providing services to hard-of-hearing/deaf students.

My department is following up on its multi-year commitment to respond to the recommendations of the Office of the Auditor General and the external review, *Reaching and Teaching All Students*, and aims to develop a stronger inclusive education system for Nunavut's schools.

The Department of Education is also requesting \$833,000 to meet its obligations to make sure the territory's

student-educator ratio complies with the *Education Act*. The student-educator ratio is calculated yearly based on actual student enrolments and is used to determine the number of teaching staff for each community. The funds requested will be used to support the hiring of 10 additional educators in Arctic Bay, Baker Lake, Cambridge Bay, Coral Harbour, Iqaluit, and Whale Cove.

My department has been allocated \$210,000 to meet the provisions of the Nunavut Teachers Association Collective Agreement, which expires on June 30, 2017. The increase in teachers' salaries in the school year 2017-18 is 1 percent.

Mr. Chairman, our education system remains new and continues to develop, but great strides are being made to expand the services and supports available to our students and to ensure that those resources we do have are being used to the maximum effect. I thank this committee for its continuous support of the department, which is enabling us to carry out our mandate. With sufficient resources we will together provide the best possible education for our students.

Those are my comments in summary. I am happy to respond to questions. Thank you, Mr. Chairman.

Chairman: Thank you, Minister Quassa. Does the chair of the standing committee have opening comments? Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Welcome, Minister Quassa and your officials.

Mr. Chairman, as the Chair of the Standing Committee on Government Estimates and Operations, I am pleased to make opening comments as we begin deliberations on the proposed 2017-18 budget of the Department of Education.

Mr. Chairman, the Department of Education's 2017-18 operations and maintenance budget is almost \$206.5 million, which represents an increase of approximately \$1 million from its 2016-17 budget. The standing committee notes that the department is proposing significant structural realignments between its divisions for 2017-18 and anticipates that these adjustments will bring about some changes to the delivery of education services over the next fiscal year.

Mr. Chairman, the Department of Education's increased investment in inclusive education as well as a new focus on student achievement will hopefully address a number of concerns that have been raised in recent years. While members appreciate that supports for inclusive education can include such devices as hearing aids or specialized sound systems for classrooms, it is also recognized that specialist services such as diagnostic testing, psychological assessments, and speech language therapy are also much needed.

The standing committee notes that while new staffing positions will be established to assist with the delivery of inclusive education support, many of the required services will be provided on a contract basis. Members encourage the department to ensure that resources are in place so that students who receive specialized services continue to receive ongoing follow-up and support as they progress through the school system.

Members further support the department's ongoing work with Nunavut Arctic College to ensure that the Teacher Education Program at Nunavut Arctic College provides relevant training to upcoming educators to better enable them to address inclusive education issues within Nunavut's education system.

During the minister's appearance before the standing committee to review his draft main estimates for 2017-18, members received updates on the department's work towards developing a complement of Inuit language material, especially in the areas of guided reading and writing. The standing committee urges the department to continue in its efforts to create and adapt curriculum materials for the Nunavut context for all grade levels.

Mr. Chairman, the standing committee notes that one of the department's new divisions will focus on educator development, including training and other initiatives. Members strongly support and encourage the department in its efforts to increase the number of bilingual teachers who are actively teaching in Nunavut.

Mr. Chairman, for 2017-18 the department proposes to add a number of teaching positions for schools in certain communities across Nunavut. In recent years concerns have been expressed that the current student-educator ratio formula does not meet community needs or expectations with respect to the number of educators in schools or to address large classroom sizes. Members

would welcome the opportunity to review future proposals to amend the student-educator ratio formula.

The standing committee notes that the Minister of Education intends to bring forward a bill to amend the *Education Act* during the current sitting and members look forward to reviewing the legislative amendments that will be proposed with a view to improving the overall delivery of the education system across Nunavut.

Mr. Chairman, the standing committee recognizes that the Department of Education also offers programs aimed at supporting adults who wish to improve their educational qualifications, such as obtaining their High School Diploma under the new Pathways to Adult Secondary School initiative.

Members recognize that education staff work closely with their counterparts in Family Services to ensure that all adult Nunavummiut requesting or receiving services related to furthering their education or career opportunities are supported.

Members also feel, however, that greater effort could be made at the school level to better support and prepare students who may wish to pursue trades programs or alternative, non-academic career paths after they graduate from high school.

Mr. Chairman, that concludes my opening remarks. Individual members may also have questions and comments as we proceed. Thank you, Mr. Speaker.

Chairman: Thank you, Mr. Joanasie. Well read. The floor is now open for general comments. I want to remind

members that the contents of the minister's opening comments are covered in the different branches of the department. If you have detailed questions, please ask them under the appropriate branches. Comments? Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Welcome, minister. I'm trying to understand why you didn't talk about the amendments to the *Education Act*. I didn't hear it in your opening comments. Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. Let us all remember that what we are saying here and in the coming weeks are dealing with the estimates, the money that we will be planning to spend. That's why we're here. I think we have all heard while we're sitting here, we will introduce that at some point during the winter session. Thank you, Mr. Chairman.

Chairman: Thank you. We don't have the legislative proposal yet. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you. We will be expecting that then. In your business plan for 2017-2020 from page 89 to 90 it lists different priorities, but there is no mention of the Act there either. Thank you, Mr. Chairman.

Chairman: Thank you. We have no names for general comments. We will now proceed to the page-by-page review of the departmental estimates starting on page G-4. Education. Directorate. Total

Operations and Maintenance, to be Voted. \$3.9 million. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I was trying to ask about the priorities in your business plan for the coming year, 2017-18, that are outlined on pages 89 to 90 in regard to putting the *Education Act* under there. What is the opinion of the department's officials on that? Thank you.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. If I understand the question correctly, in the budget and in the financial plans, if I got his question right with respect to the legislation that the member seems to allude to, Mr. Chairman.

Chairman: Mr. Joanasie, rephrase your question.

Mr. Joanasie (interpretation): Thank you. The Department of Education has stated that they will be introducing amendments to the *Education Act*. However, in the business plan there is not much mention of it. I don't know why and that's what I'm trying to find out. Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. Let us remember that it has not been approved. We can't introduce it until the Act has been approved. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you. Maybe I'm expecting it too much and that's why I'm talking about it already. I can't wait to see how it's going to look. I just want to see what it will mean when it's being implemented. I'm trying to find out what changes we can expect, but I didn't find out much.

You are proposing changes in five areas, as I mentioned, but you are now proposing nine areas. Perhaps the minister can specify exactly what those areas are being proposed for your department. Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation):
Thank you, Mr. Chairman. Let me first say that this is about the education system and how it can operate more efficiently, how our staff can work together more smoothly, or how we can better present these things and result in operational improvements. That's our main goal and objective. We want to look at various responsibilities as well as new initiatives so that they can more effectively achieve their objectives. That is the main focus of this section so that we can better serve our students.

As I stated earlier, the Department of Education shouldn't be so compartmentalized and work more closely, as many of their responsibilities are basically the same. Sometimes being too compartmentalized, even in the same community, can result in operational problems. Let's be aware that departmental staff that don't work directly in the schools make up 53 percent of departmental positions. This is about how those staff can get better

involved and working closer together with frontline staff.

The member is really talking about realignment. That is why I wanted to talk about how we want to realign, if I understood the member's question correctly, Mr. Chairman. Thank you.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Are there going to be more divisions within your department after that realignment? Thank you, Mr. Chairman.

Chairman: Thank you. Before I go to the minister, your first round of questioning, just a reminder that the bill to amend the *Education Act* has not been introduced into the legislature yet. Thank you. Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. I believe we're misunderstanding one another. I'm talking about realignment and why there are changes occurring. Realignment is quite different from the amendment to the Act. I just want to make that clarification so that I can respond more appropriately to the member, Mr. Chairman. Thank you.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Your department is going to be doing some realignment with the various divisions. Once these have been realigned, do we expect more realignment in the future? I hope that's coming off clear enough. Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. I also thank my colleague for that clarification. Now we understand. If we remember, *Sivumut Abluqta* elaborates on how we can be more effective with the money that we receive, such as providing (interpretation ends) "Good government through the wise use of resources." (interpretation) That's our goal.

In regard to the member's other question, the changes we want to make have been identified. We're not looking at new realignments. The only things that we are considering for realignment are the ones that we have outlined. I know that there are three regions. How can the three regions work closely together as one? These are some of the various reasons why we want to make some realignment within the Department of Education, but there won't be any further changes after that. Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I also thank the minister for further explaining that the bill to amend the *Education Act* has not been introduced yet. I was expecting it. Is the Department of Education on track with the bill's introduction? Will it be tabled on time in the future? Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. Yes, it's proceeding according to plan and I believe everyone is aware that we will

be making a motion on March 9. Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you. We will expect the bill then. I would also like to move on to the Coalition of Nunavut DEAs. Have you had a close working relationship with the coalition since last year? What's the status of your working relationship? Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. We have good communication with the Coalition of Nunavut DEAs on the progress of what we're doing within the department. We first met with them in regard to the amendments to the legislation on October 28 and also within this month. the officials met with them and last week. We exchange correspondence and we communicate by telephone and through the Internet. That's how close we're working together. We consult with them constantly and also the chair. I was in Rankin Inlet just recently when I met with the coalition chair to provide an update on where we're at with the Education Act. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Can the minister elaborate on what the DEA coalition's position was when you met with them in regard to the legislative proposal? Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. I meet with various groups and when I met with the chair, I just stated to her what she should expect. I informed the chair during our winter session that the first reading will be done during this session in March. After the bill has been given first and second reading, it will become a public document.

The questions that were asked by the coalition are how the legislation will be set up and how the new amendment will be enacted. I explained to them that these are the issues that I want to request. They're in the amendment and I explained to them that we need to approve them in the House in order for the legislation or the bill to become enacted.

The provisions for the DEAs will be amended and I also explained it to the chair. The chair was very appreciative of the fact that we consulted with them and gave them information. Once the chair of the Coalition of Nunavut DEAs heard about our future plans, she was very appreciative. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Also in your business plan on page 87 one of your priorities for 2016-17, the middle bullet states, "Continue to develop online training modules for DEA members and Office Managers." This has commenced and is expected to be completed in 2017. Can you give me an update on how this will be completed? Thank you.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. I also thank my colleague for that question. Online training modules will provide support to the local DEAs and office managers so that they will be better informed on the progress of education everywhere.

Whenever new programs are introduced, DEAs will be the first to be informed. The will be provided with adequate support on how school operations can be improved in the communities. It's going to help with understanding the education curriculum and explain its benefits to the community.

The DEAs are establishing a new program for training the new members of the DEAs or package for the new DEAs so that they will have the DEA orientation program. It also provides support online. As we know, it's very expensive to travel by air, so this online training program eliminates the costs of travelling.

We have also put together a training program for DEA office managers and we allocate funding to the DEAs through agreements to provide support or training on how to do budgeting. It includes training on how to use the funding and what the funding means. DEAs can apply for funding annually. The online training program will have a lot of benefit in Nunavut and to the DEAs. It will be available to them. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Again on page 87, there are quite a number of initiatives for families, such as family engagement

initiatives. These are aimed at engaging the family in education. How is this running? Can you indicate to us whether families are more engaged with their children's education? Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation):
Thank you, Mr. Chairman. I would like to think so. We are not the only ones involved in the effort to further engage families. We are working with Inuit Tapiriit Kanatami and Nunavut Tunngavik on family engagement online. We're looking at how we can get parents to help their children's learning. Parents are actively involved, but there's no question that increasing their role can help improve academic achievement in everyday learning

We are also using theatre. For example, we have a theatre here in Iqaluit and we're looking at how we can improve family engagement through that activity. The DEAs are also looking at how they can improve the relationships between parents and schools. When I go to the communities, I have meetings with the district education authorities and I lobby for increased engagement of parents, such as through the family engagement initiative. I'll leave it at that. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Have you noticed that attendance has improved in schools since the family engagement initiative started? Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. I am very pleased when there are grade 12 graduation ceremonies and usually at those times they thank their parents for having given them the support they needed to stay in school. It's very enlightening when you hear the students thanking their parents for their full support for all those years. It's a whole community effort to keep the students in school.

Since we started doing the review from 2011, there has been an increase in attendance by the students. In 2011-12 attendance was at 71.4 percent, it increased by 3.8 percent in 2013-14 to 75.2 percent, and in 2014-15 it increased to 78.3 percent. There's a gradual increase in the attendance rates of the students from 2011. I can also say that there is also an increase in school attendance in Arviat. The DEAs have made a big positive impact in increasing the attendance rates of the students to date. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. I also thank the minister for that information. It's so good to hear news about the increase in attendance rates from kindergarten right up to grade 12, especially when I would like to see students stay in school.

Moving on to page 86 and something you brought up earlier in your opening comments regarding partner relations, can you provide further clarification on the role of the Partner Relations Division? Thank you, Mr. Chairman.

Chairman: Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. Thank you for that question. It's a new project that we're setting up in our department. It is in relation to communication and working together and we're offering it to DEAs and schools.

Just as an example, there's quite a lot of partnering organizations involved in education. We have the district education authorities, Nunavut Tunngavik, the Nunavut Teachers Association, and the Nunavut Employees Union. There are different organizations that are involved in the educational field, as well as parents.

Under the Partner Relations Division, it means engaging various organizations to give them the same, uniform information. If we're working on one specific task, they are given the same information, for example, so that the DEAs will be fully informed about what's happening in our schools. It involves different organizations that we would be working closely with, for example, Nunavut Tunngavik, the Nunavut Teachers Association, district education authorities, and involving the parents. Those are the different organizations that we work with and to make sure that they have all the same information that we're putting out. Thank you, Mr. Chairman.

Chairman: Mr. Joanasie.

Mr. Joanasie (interpretation): Thank you, Mr. Chairman. Again under partner relations, it involves the Elders Advisory Committee. Can you give us an update on what's happening with that? That will

be my last question as my time is running out. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Quassa.

Hon. Paul Quassa (interpretation): Thank you, Mr. Chairman. I understand your question clearly, my colleague. Yes, it will be pretty much the same organizations involved. Again, for example, the Elders Advisory Committee would be more involved with the directorate. The Elders Advisory Committee provides advice to the district education authorities on language and culture. They would be more involved with the directorate. Since we have realigned, the Elders Advisory Committee will be very helpful and they will be giving advice to our department anywhere. That's basically what the Elders Advisory Committee is going to be doing. Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Rumbolt.

Mr. Rumbolt: Thank you, Mr. Chairman. I would like to make a motion to report progress. Thank you.

Chairman: Thank you. We have a motion on the floor to report progress and the motion is not debatable. All those in favour of the motion. All those opposed. The motion is carried. I will now rise to report progress to the Speaker.

Sergeant-at-Arms, please escort the officials from the witness table. Thank you.

Speaker (interpretation): Report of the Committee of the Whole. Mr. Akoak.

Item 21: Report of the Committee of the Whole

Mr. Akoak: Thank you, Mr. Speaker. Your committee has been considering Bill 34 and the main estimates, and would like to report progress. Also, Mr. Speaker, I move that the Report of the Committee of the Whole be agreed to. Thank you, Mr. Speaker.

Speaker (interpretation): Thank you. (interpretation ends) There is a motion on the floor. Is there a seconder? Mr. Keith Peterson. The motion is in order. All those in favour. (interpretation) Thank you. Opposed. The motion is carried.

(interpretation ends) Item 22. Third Reading of Bills. Item 23. (interpretation) *Orders of the Day*. (interpretation ends) Mr. Clerk.

Item 23: Orders of the Day

Clerk (Mr. Quirke): Thank you, Mr. Speaker. Just a reminder that the Standing Committee on Legislation meets tomorrow morning at nine o'clock in the Nanuq Boardroom.

Orders of the Day for February 28:

- 1. Prayer
- 2. Ministers' Statements
- 3. Members' Statements
- 4. Returns to Oral Questions
- 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 36
 - Bill 42
- 19. Second Reading of Bills
- 20. Consideration in Committee of the Whole of Bills and Other

Matters

- Bill 32
- Bill 33
- Bill 34
- Bill 35
- 21. Report of the Committee of the Whole
- 22. Third Reading of Bills
- 23. Orders of the Day

Thank you.

Speaker (interpretation): Thank you. (interpretation ends) This House stands

adjourned until Tuesday, February 28, at 1:30 p.m.

(interpretation) Sergeant-at-Arms.

>>House adjourned at 20:03