



## Legislative Assembly of Nunavut

### *Speaker*

**Hon. Joe Enook**  
(Tununiq)

**Hon. David Akeegok**  
(Quttiktuq)

*Minister of Finance, Chair of the Financial Management Board; Minister responsible for the Workers' Safety and Compensation Commission*

**Tony Akoak**  
(Gjoa Haven)

*Deputy Chair, Committee of the Whole*

**Hon. Pat Angnakak**  
(Iqaluit-Niaqunnguu)

*Minister of Health; Minister responsible for Suicide Prevention*

**Hon. Jeannie Ehaloak**  
(Cambridge Bay)

*Minister of Justice; Minister responsible for the Qulliq Energy Corporation; Minister responsible for Labour*

**George Hickes**  
(Iqaluit-Tasiluk)

**Hon. David Joanasic**  
(South Baffin)

*Minister of Culture and Heritage; Minister of Education; Minister of Languages; Minister responsible for Nunavut Arctic College*

**Joelie Kaernerik**  
(Amittuq)

**Mila Kamingoak**  
(Kugluktuk)

**Pauloosie Keyootak**  
(Uqqummiut)

**Hon. Lorne Kusugak**  
(Rankin Inlet South)  
*Minister of Community and Government Services; Minister responsible for the Nunavut Housing Corporation*

**Adam Lightstone**  
(Iqaluit-Manirajak)

**John Main**  
(Arviat North-Whale Cove)

**Simeon Mikkungwak**  
(Baker Lake)  
*Deputy Speaker and Chair of the Committee of the Whole*

**Margaret Nakashuk**  
(Pangnirtung)

**Patterk Netser**  
(Aivilik)

**Emiliano Qirngnuq**  
(Netsilik)

**Hon. Paul Quassa**  
(Aggu)  
*Premier; Minister of Executive and Intergovernmental Affairs; Minister responsible for Aboriginal Affairs; Minister responsible for Seniors; Minister responsible for the Utility Rates Review Council*

**Allan Rumbolt**  
(Hudson Bay)  
*Deputy Chair, Committee of the Whole*

**Hon. Joe Savikataaq**  
(Arviat South)  
*Deputy Premier; Minister of Economic Development and Transportation; Minister of Energy; Minister of Environment*

**Hon. Elisapee Sheutiapik**  
(Iqaluit-Sinaa)  
*Government House Leader; Minister of Family Services; Minister responsible for Homelessness; Minister responsible for Immigration; Minister responsible for the Status of Women*

**Cathy Towtongie**  
(Rankin Inlet North-Chesterfield Inlet)

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**Iqaluit, Nunavut**  
**Thursday, May 31, 2018**

**Members Present:**

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

>>*House commenced at 13:34*

**Item 1: Opening Prayer**

**Speaker** (Hon. Joe Enook)(interpretation): Let us pray.

>>*Prayer*

**Speaker** (interpretation): Good afternoon, (interpretation ends) Premier (interpretation) and members. Nunavummiut who are watching the televised proceedings and listening to the radio broadcast, welcome to your Legislative Assembly, especially our elders in Nunavut. Welcome to your Legislative Assembly and I wish you a good day.

Let's proceed with the orders of the day. Ministers' Statements. Premier Quassa.

**Item 2: Ministers' Statements**

**Minister's Statement 027 – 5(2): Pilot Passport Service**

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I would like to take this opportunity to inform my fellow members about a new initiative between Government of Nunavut's Government Liaison Officer program, Service Canada, and Passport Canada.

I am pleased to announce that our organizations are collaborating to pilot a passport photo service in three Nunavut communities: Pond Inlet, Arviat, and Taloyoak. The pilot project launched in May, this month, and will be evaluated in October to determine its success.

Mr. Speaker, the equipment for the passport photos were purchased by Service Canada while the service is provided by our government liaison officers. This is an important service to provide to Nunavummiut and will help our citizens access a valuable program that would otherwise be difficult to receive given our territory's vastness.

This pilot project will be evaluated by Passport Canada and Service Canada and, if successful, we are hoping that this service will expand to the rest of Nunavut. Both our

parties recognize the resources associated with this initiative and want to ensure that it is a worthwhile investment going forward.

I would like to recognize the great partnership between Service Canada, Passport Canada, and our Government Liaison Officer program. Working together has meant improved service delivery and enhanced accessibility for our communities. (interpretation) Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Ministers' Statements. Minister of Economic Development and Transportation, Minister Savikataaq.

### **Minister's Statement 028 – 5(2): Nunavut Mining Symposium**

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

(interpretation ends) Mr. Speaker, the mining industry in Nunavut is growing. My department is committed to supporting it and ensuring that Nunavummiut are able to benefit from this industry.

>>Applause

Thank you. Mr. Speaker, just under 400 registered delegates attended the 21st annual Nunavut Mining Symposium in Iqaluit from April 9 to 12 of this year. They participated in sessions discussing Inuit involvement in mining and gender diversity in mining. The delegates also got to listen and ask questions to the leaders in the industry.

I'm proud to say an Arviat resident, John Tugak... The member informed us whose constituent he was, Mr. Main. John Tugak received the Individual Mining Award. I wish him success in his partnership with Agnico Eagle and his future prospecting. Congratulations to him and the other award winners. North Arrow Minerals received the Corporate Award, the Qikiqtani Inuit Association won the Government Award, and Stephanie Autut took home the Trail Blazer Award at the Nunavut Mining Awards during the Nunavut Mining Symposium.

Mr. Speaker, one of this government's priorities is to develop and manage our renewable and non-renewable resources for the long-term benefit of Nunavummiut. We are doing this by sponsoring the Nunavut Mining Symposium and ensuring all of the people involved in the industry get to meet and discuss important issues. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Ministers' Statements. Minister of Justice, Minister Ehaloak.

**Minister's Statement 029 – 5(2): Young Offenders Program**

**Hon. Jeannie Ehaloak** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I rise today to announce that the Department of Justice recently launched the Young Offenders Outreach Program in Iqaluit.

The Young Offenders Outreach Program is aimed at the successful rehabilitation and reintegration of youth back into our communities. The program allows youth serving a community sentence in Iqaluit to access the programming, tutoring and counselling services available at the Iqaluit's Isumaqsungittukkuvik Young Offenders Facility. Prior to the development of this program, these services were only available to those youth who were remanded or sentenced to incarceration at the facility.

The youth offenders facility has dedicated staff that are trained in delivering youth-oriented programs and providing services to at-risk youths. One of the services now available to youth serving community sentences is the Corrections Division's land program. The land program teaches these youth traditional Inuit skills and provides them with trips on the land to practise these skills.

I want to thank the justice staff involved in the development of this exciting new program. I look forward to its continued success in reaching out to troubled youth. Thank you, Mr. Speaker.

>> *Applause*

**Speaker** (interpretation): Thank you. Ministers' Statements. Minister of Health, Minister Angnakak.

**Minister's Statement 030 – 5(2): World No Tobacco Day**

**Hon. Pat Angnakak**: Thank you, Mr. Speaker. Good afternoon, everybody.

Mr. Speaker, today is May 31 and communities across Nunavut and around the world are celebrating World No Tobacco Day.

The World Health Organization estimates that six million people die from tobacco-related illnesses every year. This means that every six seconds, somewhere around the world, someone dies from a tobacco-related illness. In Nunavut we know that lung cancer is the most common type of cancer, and 85 percent of lung cancer cases are related to smoking.

The Department of Health's Tobacco Reduction Program is in place to prevent young Nunavummiut from starting to smoke or chew tobacco, protecting Nunavummiut from

the second-hand harms of tobacco use, and supporting individuals to quit or reduce tobacco use.

The Tobacco Reduction Program works with municipal organizations, societies, and groups in Nunavut to support community-led projects focused on reducing tobacco use in Nunavut. In addition, the Tobacco Reduction Team will be rolling out a new campaign called “Quitting Sounds Good to Me.”

Mr. Speaker, I was once a smoker; I smoked for many years. I quit for my own health and so that I would stay healthy for my family.

**An Hon. Member:** Hear, hear!

**Hon. Pat Angnakak:** Quitting was difficult, but it has been so rewarding in many ways and I believe anybody can find that kind of strength. I look at some MLAs when I’m saying this.

I encourage anyone who wants to quit to ask for help at their community health centre or public health. By working together, we can make Nunavut tobacco-free.

I invite my colleagues to join me in the foyer at the break to learn about the new tobacco reduction campaign, “Quitting Sounds Good to Me.” A public health nurse will also administer nicotine replacement therapy for anybody here at all who might want to quit smoking today.

For your information, as ministers and MLAs, we’re often looked upon as role models. I can proudly say today that this cabinet here never smokes. We are all non-smokers. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Ministers’ Statements. Minister of Environment, Minister Savikataaq.

### **Minister’s Statement 031 – 5(2): Territorial Parks Inuit Impact and Benefit Agreement Implementation Plan**

**Hon. Joe Savikataaq:** Thank you, Mr. Speaker. I would like to inform you that in the last year my department initiated the Implementation Plan of the Umbrella Inuit Impact and Benefit Agreement for Territorial Parks in Nunavut, IIBA. This implementation plan and accompanying 10-year budget of close to \$19 million was agreed by the Government of Nunavut, Nunavut Tunngavik Incorporated (NTI), and the three regional Inuit organizations back in March of 2017.

Mr. Speaker, to date, my department and the designated Inuit organizations have established the Nunavut-wide Joint Planning and Management Committee for Territorial

Parks. Also, community joint planning and management committees have been established in communities with territorial parks, such as Clyde River, Sanikiluaq, Kugluktuk, Cambridge Bay, Kimmirut, and Iqaluit. We are also in the process of establishing these committees in both Arviat and Rankin Inlet.

Mr. Speaker, my department is working in close collaboration with other GN departments and the parks joint planning and management committees, whose role is to provide guidance on all planning matters with regard to Nunavut parks, including the development of a Nunavut parks program, park inventory of resources, master plans, management plans, local heritage appreciation plans, and local Inuit tourism strategies.

Mr. Speaker, this territorial parks IIBA is intended to recognize and reflect that Inuit should fully benefit from and fully participate in parks-related employment and economic opportunities, and that the opportunities for Inuit provided by this IIBA should build capacity and encourage self-reliance, cultural and social well-being of Inuit. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Ministers' Statements. Moving on. Members' Statements. Member for Kugluktuk, Ms. Kamingoak.

### Item 3: Members' Statements

#### Member's Statement 051 – 5(2): End of School Year Success

**Ms. Kamingoak:** *Koana*, Mr. Speaker. Good afternoon, colleagues, Kuglukturmiut, and Nunavummiut.

Mr. Speaker, first of all, I would like to wish one of my constituents a very happy birthday. Mr. Speaker, Lena Pedersen celebrates her special day today, and it is an honour to wish one of my well-respected elders a very special day. Happy birthday, Lena.

>>Applause

I would also like to wish my mother in-law, Ann Akeeagok, a very happy birthday as well.

>>Applause

Mr. Speaker, I rise today to recognize the last day of school in Kugluktuk, both for the Kugluktuk High School, which I attended, and for the Jimmy Hikok Iihakvik elementary school, which is named after my late grandfather and where the last traditional qajaq he proudly made stands.

Mr. Speaker, I would like to congratulate all the students on a successful year. I would like to congratulate those who graduated from elementary school, preschool, and kindergarten as they are starting their education off on the right track.

Mr. Speaker, my own daughter, Skye Akeegok, missed her kindergarten graduation, but I am proud of her success all the same.

Mr. Speaker, I am proud of all the students for their efforts and I am especially grateful to the teachers and the principals who have such a positive impact on our children and on their future. Mr. Speaker, they are tireless.

Mr. Speaker, I would also like to take this opportunity to congratulate the high school students who participated in the territorial tournament for Skills Nunavut. Siobhan Brooks came in third in the baking event, Kendall Qaulluaq came in first in the northern fashions event, Star Newman placed fourth in the cooking event, and Darrien Evyagotailak came in second in carpentry.

Mr. Speaker, I would like to acknowledge the support from their chaperones, Christopher Smith and Bonnie Power.

Mr. Speaker, we should all be proud of the successes of our youth at the end of every school year. They are on the path of lifelong learning, and their education will lead them to a promising and successful future. *Koana*, Mr. Speaker.

>>Applause

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

#### **Member's Statement 052 – 5(2): Medical Travel**

**Mr. Mikkungwak:** Thank you, Mr. Speaker. I rise today to make a brief statement about the issue of medical travel and the flight schedules of the airlines which serve our community. I listened, with interest, to the exchange yesterday between the Minister of Health and my colleague from Rankin Inlet North-Chesterfield Inlet.

Mr. Speaker, as the MLA for Baker Lake, I can appreciate where my colleague is coming from as I am also committed to ensuring that the medical travel process is as painless as possible for our community elders.

Mr. Speaker, as my colleague from Netsilik pointed out earlier this week, we are extremely dependent on the airlines for the necessities of life, and medical travel is one of those necessities. It is very important to be mindful that a change in one airline's routing or schedule can have an impact on more than one community.

Mr. Speaker, we know that new contracts for medical travel are scheduled to be awarded within the next 18 months. I urge the government to be mindful of the need to fairly balance the needs of all our regions and communities when it is discussing medical travel contracts and schedules with the airlines. Thank you, Mr. Speaker.

>>Applause

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

### **Member's Statement 053 – 5(2): Turaaqtavut Mandate**

**Mr. Netser** (interpretation): Thank you, Mr. Speaker. Good afternoon. (interpretation ends) Mr. Speaker, my member's statement today is to correct the record of what I heard in this House yesterday that I feel do not reflect my own position on what the Government of Nunavut has stated.

Mr. Speaker, as a Kivallirmiut, I also want our sister region in the Kitikmeot to know how I support their efforts into creating opportunities for their people.

**An Hon. Member:** Hear, hear!

**Mr. Netser:** They are a part of Nunavut, Mr. Speaker.

I also want my fellow MLAs to know how the Kitikmeot Inuit Association was treated by this government in a disrespectful and unfair manner. It is a shame. This approach can also impact other regions. I am very concerned about that, and I will be watching and listening closely to how this government reacts to the concerns being expressed.

Mr. Speaker, in a tabled document, the letter dated March 26, 2018 sent by the Minister of ED&T to the Kitikmeot Inuit Association, which my fellow colleague to the right tabled the other day, about the Grays Bay road project states the following: "in light of the recent mandate, Turaaqtavut unveiled by the government on March 20, 2018, the Government of Nunavut has decided to withdraw our proposal under the National Trades Corridor..."

In question period yesterday, the minister stated in the *Blues*, "In Turaaqtavut, we came up with our priorities and we are all part of the *Turaaqtavut* Mandate. We all agreed to it." This is what he said yesterday. That's misleading. I don't appreciate my name being used to lie to the people of Nunavut.

He says we all agreed to this mandate up in Pond Inlet to drop the Grays Bay road project. We did not discuss that, Mr. Speaker. Do any of you remember discussing the project? None of us. He lied to us yesterday, Mr. Speaker.

My time is already up. I request unanimous consent to conclude my message.  
(interpretation) Thank you.

**An Hon. Member:** A point of order.

**Speaker:** We have a point of order. For members' information, there are certain phrases that are not allowed to be used in this House. We have to refrain from using certain phrases and words. Please be careful with the words and phrases that we use because we can be called to order. Premier Quassa, do you have a point of order? Premier.

### Point of Order

**Hon. Paul Quassa:** Yes, Mr. Speaker, I think when we're having Full Caucus, everybody has to agree to any mandate that this government is going to pursue. This is exactly what happened during the Full Caucus in Pond Inlet. I want to assure Nunavummiut that whatever came out of the priorities and mandate was the work in conjunction with all of the Members of this Legislative Assembly. Thank you, Mr. Speaker.

### Speaker's Ruling

**Speaker** (interpretation): Thank you, Premier. I don't believe it's a direct point of order. (interpretation ends) Your statement is a matter of interpretation and debate, and I don't see House rules being broken from that perspective. With that, there is no point of order on that one. Minister Kusugak, point of order.

**Hon. Lorne Kusugak:** Thank you, Mr. Speaker. One of our ministers was accused of lying. I believe that we can't be accusing Members of this House of lying. I would ask that an apology or retraction be done. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. You may have noted that I gave my warning to the members about the need to be careful of the wording and terminology used in this House and that we have to be very careful in adhering to the rules that are provided in relation to words and phrases that can be used. I have given my ruling already, but I would like to ask Mr. Netser if he can retract his statement. Mr. Netser.

**Mr. Netser** (interpretation): Thank you, Mr. Speaker. If I made a mistake, I apologize for it. However, what I spoke to was referring to the matter that was stated as being discussed, and this is the Kitikmeot priority project.

The Premier stated that all members agreed to the mandate during the discussions, and that the Grays Bay project would be removed from the list and that all members agreed to this decision. This is what was stated yesterday, and this is why I stated that I don't want my name used for nefarious reasons as we try to stand on behalf of our constituents. This is what I was speaking to, the statement that everyone agreed, Mr. Speaker. Thank you.

**Speaker** (interpretation): Thank you, Mr. Netser. I understand his apology and that he retracts his statement. Thank you. Mr. Netser, did you ask for unanimous consent to conclude your statement? I am very forgetful. Thank you. The member is seeking unanimous consent to conclude his statement. Are there any nays? Thank you. There are no nays. Mr. Netser, please proceed.

**Mr. Netser** (interpretation): Thank you, Mr. Speaker. I also thank my colleague.

(interpretation ends) It is all very interesting and it's called democracy. (interpretation) Thank you, Mr. Speaker.

(interpretation ends) Mr. Speaker, I quote in the *Turaaqtavut*. We came up with our priorities and we are all part of the *Turaaqtavut* Mandate, which we all agreed to in Pond Inlet at Full Caucus.

Mr. Speaker, for the record, these two statements imply that the Grays Bay road project was discussed by all of us here during our Full Caucus retreat. The issue of this project was never discussed in Pond Inlet at our Full Caucus retreat. Therefore we never agreed to withdraw our support for such an important project that Nunavut would benefit from. To imply and to rationalize the GN's withdrawal of support on the basis that we all agreed to in Pond Inlet is misleading and false. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Members' Statements. Member for Arviat North-Whale Cove, Mr. Main.

### **Member's Statement 054 – 5(2): Infrastructure Projects in Nunavut**

**Mr. Main** (interpretation): Thank you, Mr. Speaker. (interpretation ends) Well, I did have a statement prepared, but it has gone out the window at the moment. I guess I'll make my member's statement today on the topic of major infrastructure projects in Nunavut. Where I'm coming at this issue from is I'm not going to speak particularly on the Grays Bay project or any other infrastructure project in Nunavut.

I strongly believe that debate is healthy. Respectful, constructive debate is healthy. There have been examples of infrastructure projects. We regularly travel through one of those as MLAs here in Iqaluit. Major infrastructure projects have gone ahead in Nunavut without, to my feeling, sufficient debate. Going forward, I would like to encourage all Members of this House to express their opinions respectfully on major infrastructure projects because this is the type of thing that is expected of us as MLAs. We are here to represent our constituents and our fellow legislatures across the country are debating the exact same thing. They are debating major infrastructure projects.

That's pretty much all I have to say on this topic and I look forward to scrutinizing this government's plans for infrastructure development and making sure that we are indeed

investing government dollars where we will get the best bang for our government buck, Mr. Speaker. (interpretation) Thank you, Mr. Speaker.

>>Applause

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

**Member's Statement 055 – 5(2): Mini Fishing Derby**

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Speaker. I say “good day” to my colleagues, my fellow residents of Kugaaruk, and the residents of Taloyoak.

Mr. Speaker, I rise today to state that even though we deal with weighty matters in the House and our communities, we must also have to speak about matters that can lighten up our day. These are some of the things that can assist us to lighten up our lives and our fellow residents.

Mr. Speaker, on the weekend that just passed in our community...perhaps if I say it in English, (interpretation ends) mini-fishing derby, (interpretation) they held a mini fishing derby, so I wonder if they were targeting small fish.

Mr. Speaker, this event was brought back after a period of several years and they finally held a fishing derby this spring, which I am pleased to hear. It helps the families and people to enjoy the outdoors participating in a fishing derby in one place.

Mr. Speaker, when events like this are held by communities, the residents enjoy the activity and we also enjoy hearing about that. Obviously most people prefer other people to enjoy life and to be happy.

With that fishing derby, if I can mention the winners, I think there were ten of them. The last one caught was 93.2 centimetres. I won't bother mentioning the middle placers here as the winning fish measured 105.5 centimetres.

Mr. Speaker, as Members of the Legislative Assembly, we always enjoy hearing about fishing derbies in the House and about the results. We would like to see that kind of fishing derby annually.

Mr. Speaker, on behalf of my community, I ask the members to celebrate with my community. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Members' Statements. Member for Quttiktuq, Mr. Akeeagok.

**Member's Statement 056 – 5(2): Baffinland Employment Opportunities**

**Hon. David Akeeagok** (interpretation): Thank you, Mr. Speaker. There are several constituents celebrating birthdays today, with one person who is a fellow resident and another who used to be a fellow resident. Have a wonderful birthday, Ann Akeeagok and Johnny Flaherty.

Mr. Speaker, I am quite pleased to hear and to also inform members today that the Qikiqtani Inuit Association provided a news release that all of the regional communities will now be able to apply for employment positions at the mine, as initially it was limited to the five affected communities.

My constituency communities of Resolute Bay and Grise Fiord were not originally part of the group, but they have been included and I am happy to hear that. When I was in Grise Fiord, a question was raised about the mine by residents with past mining experience who wanted to work, but they ran into logistical barriers.

Now, in partnership they have initiated this addition, so I'm urging my constituents to ask for more information from the Qikiqtani Inuit Association. There's also a website now on available jobs. Please apply for jobs anywhere in Nunavut, not just to the Government of Nunavut but to all organizations that have openings. Thank you, Mr. Speaker.

>> *Applause*

**Speaker** (interpretation): Thank you. Members' Statements. Member for Rankin Inlet North-Chesterfield Inlet, Ms. Towtongie.

**Member's Statement 057 – 5(2): Mental Health Issues**

**Ms. Towtongie** (interpretation): Thank you, Mr. Speaker. Good day to Rankin Inlet North and Chesterfield Inlet.

On a matter relating to my son-in-law, Nanauq Issakiark, I extend my appreciation to the residents of Arviat for their support. He recently lost his mother, who is being laid to rest today. My thoughts are with my son-in-law and my daughter.

(interpretation ends) Yesterday I was talking about National Mental Health Week. What I meant to say is the prevailing authority in existence in the Inuit mind sometimes clashes with the institutionalized authority in dealing with mental health.

As I mentioned yesterday, I went to the mental health worker's office. Mental health workers should be mingling with the community. Before they come to Nunavut, they should have orientation so they will know the difference between our culture and their type of training.

I'll give one example. Inuit have a custom of adoption. This young man went to a mental health worker and came out more confused because the mental health worker asked him, so your grandmother is your mother and your sister is your mother? I believe the Government of Nunavut should have substance of orientation for mental health workers.

Also for elders, we should be mindful that elders are not just people with white hair, but they should be traditional knowledge holders with the ability to transmit their culture and their knowledge. One elder told me when a young lady started sewing kamiks and learned the skills, she stopped drinking.

I urge Government of Nunavut to define programs so these skills are transmitted and they will be on their way to mental wellness. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Members' Statements. Member for Aggu, Minister Quassa.

### **Member's Statement 058 – 5(2): Supporting World No Tobacco Day**

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. It was mentioned earlier that today is World No Tobacco Day. The way we say it in Inuktitut is a day where no tobacco should be consumed, which I am in full support. I rise today to express my appreciation to people who have become non-smokers.

Many of us can recall that in the past, when many of us were children, our parents, whether it be in an igloo, tent, or sod house, would wake up and light up a cigarette while still lying in bed. That was the traditional practice and we thought it was a normal practice.

In retrospect, Inuit were not informed about the effects of second-hand smoke, which has been proven to be quite dangerous.

Many substances have arrived into Inuit lands, which turns out many of them weren't healthy; not just cigarettes. Nonetheless, I am quite proud of the people who recognize the benefits of quitting smoking, and personally I found one can quit cigarettes.

As we have been previously informed, when we lived off the land, one can change practices if committed enough, and this applies to our smokers as well. Many of us have quit smoking due to having discovered that.

I am quite proud of the fact that many of us on this side of the House no longer smoke cigarettes. I further encourage all residents and fellow Inuit to quit smoking as it is possible to do so, and especially today being designated World No Tobacco Day. I just wanted to point this out again to my colleagues, fellow residents, and Nunavummiut. Please try to stop smoking cigarettes. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Members' Statements. I have no more names on my list. Let us proceed. Returns to Oral Questions. Recognition of Visitors in the Gallery. For the audience who are visiting via TV, good day. Oral Questions. Member for Hudson Bay, Mr. Rumbolt.

### **Item 6: Oral Questions**

#### **Question 077 – 5(2): Plans for Sanikiluaq's Community Learning Centre**

**Mr. Rumbolt:** Thank you, Mr. Speaker. My questions today are directed to the Minister responsible for Nunavut Arctic College.

Back in December I wrote a letter to the minister and his colleague, the Minister responsible for Community and Government Services, regarding the future status of Nunavut Arctic College's community learning centre in Sanikiluaq.

As the minister will be aware, Sanikiluaq's Community Learning Centre is currently located in Nuiyak School and the lease will expire at the end of June 2019. It is my understanding that the lease will not be renewed. Can the minister provide an update on what options are currently being considered for the future location of Sanikiluaq's community learning centre? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister responsible for Nunavut Arctic College, Minister Joanasié.

**Hon. David Joanasié** (interpretation): Thank you, Mr. Speaker. (interpretation) I thank MLA Rumbolt for his question. Mr. Speaker, I thank the member for his letter to the college and my colleague, Minister for Community and Government Services.

We are currently exploring all options with the situation in Sanikiluaq with the community learning centre. Right now, we are doing some preliminary assessments on all our community learning centres to see what states they are in, as well as the space requirements necessary. We are looking at it as a case by case scenario, but we are exploring all options. Thank you, Mr. Speaker.

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

**Mr. Rumbolt:** Thank you, Mr. Speaker. The fact that he is looking at each community on a case-by-case basis, Mr. Speaker, September is going to come quick. It is only a year away, and we are going to need a place for our adult educator to work out of. I think he answered part of my second question, but I will ask it anyway and see if he can add any other information.

As both the Minister of Nunavut Arctic College and the Minister of Community and Government Services will be aware, the lack of the infrastructure in Sanikiluaq is an

ongoing concern. The previous community learning centre was not adequate for the community needs, which is why they moved to a new location in the beginning.

Can the minister describe what communications he has had with his counterpart, the Minister of Community and Government Services, to address future needs for adequate space in Sanikiluaq for the community learning centre to deliver adult education and training programs in Sanikiluaq? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Joanasie.

**Hon. David Joanasie** (interpretation): Thank you, Mr. Speaker. (interpretation ends) Thank you for the follow-up question. Our staff are always working together on capital needs across the departments and crown agencies.

At this point, I will have to check into the exact details that our staff have come up with specific to the Sanikiluaq issue. I can come back to the member on that. Thank you, Mr. Speaker.

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

**Mr. Rumbolt**: Thank you, Mr. Speaker. As I stated earlier, Mr. Speaker, 2019 will come quicker than we may think. Will the minister commit to addressing the need for a new larger community learning centre in Sanikiluaq at the next available capital-planning meeting so that the community learning centre can run more programs than the space currently allows? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Joanasie.

**Hon. David Joanasie** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I cannot commit specifically to that, but what I can say is, at the college, we have a new capital planner on staff that filled the vacant position. We are working on the college's capital needs across the territory and we know there is a need in Sanikiluaq. What I can say is that their capital planner is working diligently toward a solution; we hope to provide some progress on that front in the future. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Oral Questions. Rankin Inlet North-Chesterfield Inlet, Ms. Towtongie.

### **Question 078 – 5(2): Accessing Additional Teaching Staff**

**Ms. Towtongie**: Thank you, Mr. Speaker. Mr. Speaker, I would like to direct my questions to the Minister of Education.

Mr. Speaker, the Department of Education's current formula for determining how many teachers are allocated to community schools each year is based on the number of students attending each year on a fixed date. Mr. Speaker, I have heard concerns that this

methodology is neither realistic nor effective. In some cases, I have heard concerns that it is often not applied correctly or accurately.

Can the minister provide a clear explanation of how his department determines the number of teachers that will be allocated to Nunavut schools in any given year? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister of Education, Minister Joanasié.

**Hon. David Joanasié** (interpretation): Thank you, Mr. Speaker. I also thank you for the question. (interpretation ends) This gives me a good chance to add on to the questions that MLA Main had asked on the student educator issue.

I had explained that the national student-educator ratio average that is applied is currently set at 13.8:1. However, in Nunavut, we always strive to be well below that national average. Like I said, the student-educator ratio formula is applied based on enrollment, but, of course, I want to say that this current SER formula can be very volatile with the enrollment numbers fluctuating from year to year.

So, with that, we are looking at possibly changing this formula. Right now, we are at the stage where we want to discuss this further with DEAs in the communities, and we'll go from there. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. First Supplementary Question, Mrs. Towtongie.

**Ms. Towtongie**: Thank you, Mr. Speaker. Mr. Speaker, our school staff work very hard to provide the best level of education possible; however, without adequate support, it is very difficult for them to go that extra mile and give our children the extra boost they need to prepare them to excel at the college or university level.

Can the minister indicate if any additional teaching supports are available that are not determined by his department's formula for allocating the number of teachers at each school? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Mr. Joanasié.

**Hon. David Joanasié**: Thank you, Mr. Speaker. Thank you for the question. Yes, I am going to say that the student-educator ratio formula currently only applies to principals, vice-principals, student support teachers, guidance counsellors, and teachers.

However, there is no formula that we use to assign school staff for learning coaches, language specialists, school secretaries, custodians, student support assistants, and *Ilinniarvimmi Inuusilirijiit*, the counsellors.

Along with that, I want to say too that it's very hard to make a case to approve any new positions outside of the student-educator ratio. We're trying to make changes to this and

hopefully we will have support all around and have a consensus. Thank you, Mr. Speaker.

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

**Ms. Towtongie:** Thank you, Mr. Speaker. It is my understanding that the Chesterfield Inlet District Education Authority has put forward a detailed and well-supported request for an extra teacher at the community's Victor Sammurtok School. This additional staff person would provide more support for both students and staff and thereby greatly enhance the school's ability to prepare the students for post-secondary education. And we are proud of the school.

Will the minister commit to giving full consideration to this request and approving an additional teacher for Chesterfield Inlet's Victor Sammurtok School? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Joanasie.

**Hon. David Joanasie** (interpretation): Thank you, Mr. Speaker. I also thank the member for that question. (interpretation ends) Mr. Speaker, we are trying to keep on top of all the requests that come to our department and we know there was a letter from the DEA from Chesterfield Inlet. Similar to what I had responded to MLA Main with the Arviat DEA, they had requested to meet with me on this specific topic. What I can do is try to set up a time, too, with the Chesterfield Inlet DEA at some point in the near future, to discuss this moving forward. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Oral Questions. Member for Iqaluit-Manirajak, Mr. Lightstone.

### **Question 079 – 5(2): Departmental Finance Reports**

**Mr. Lightstone:** Thank you, Mr. Speaker. I rise today to ask a question to the Minister of Finance.

During the Committee of the Whole review of the main estimates and business plan over the last two days, the department's inability to share actual expenditures hampered our ability to properly analyze and do our due diligence in passing the government's budget request.

Today marks two months since the close of the 2017-18 fiscal year. This month also marks the date in which departments must submit their year-end final budget and variance reports to the Department of Finance.

I'm asking for the government to move towards increasing transparency and for cabinet to share more information with the regular members and able to work together towards moving the government in the right direction.

I would like to ask if the minister will commit to sharing those reports with the regular members in order to assist us in properly reviewing and analyzing the government's budgets in order to pass them. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister of Finance, Minister Akeeagok.

**Hon. David Akeeagok** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I'm not prepared to commit to providing reports where they are still open. As I mentioned in the Budget Address and my colleague during the Committee of the Whole also referenced that 2017-18 is still open; the books are still open up until the end of June. There are no expenditures, but we still need to track these.

This government has taken good strides in getting the public accounts in on time and they come in the fall and those are very valuable documents that are available to the public and for public use.

For reports that will change. It's very difficult, as legislatures, to try to use that information to determine our budgets. Our budgets are built through our three-year expenditure forecast and our budgets. What we present to this House is exactly the same thing my colleagues go through. We are satisfied with the information that's in those in order to assess the budgets. (interpretation) Thank you, Mr. Speaker.

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

**Mr. Lightstone**: Thank you, Mr. Speaker. Now, I do understand that the public accounts have not been completed yet and I understand that there are still many accruals and year-end adjusting entries to be finalized, but that's not what I'm requesting. I'm requesting that the minister share with the members the projections that the departments have provided the Department of Finance for their year-end figures. Would the minister be able to share with us the projections for the year-end figures? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Akeeagok.

**Hon. David Akeeagok** (interpretation): Thank you, Mr. Speaker. (interpretation ends) At this point no. (interpretation) Thank you, Mr. Speaker.

**Speaker** (interpretation): Your final supplementary, Mr. Lightstone.

**Mr. Lightstone**: Thank you, Mr. Speaker. It's unfortunate that the minister is unwilling to share the information with the rest of the members here. I believe that openness and transparency is the way that the government needs to operate in order to be fully accountable to not just members but to every individual of the territory.

I'm not asking for solidified numbers; I'm asking for the projections that the departments have provided. May I ask why the minister is reluctant to share this information? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Akeeagok.

**Hon. David Akeeagok** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I'm reluctant on sharing projections because those are projections. They change and there's trending. We give our public service the authority to administer our budgets and through that they do their projections and through that they manage the budgets.

As legislators, I don't want to become getting into very fine details financially for the public service that we hire to run and administer these programs. I think we are sitting here and we've got a number of bills to consider, including the operations and maintenance. Through that, it's one that is where my reluctance is. Those are projections and those are used to help administer our budgets.

I don't see the relevance in terms of sharing it here and then the following month there are changes again, and the debate then becomes how many pens do we buy versus cups? I don't want to get into those debates in this House. (interpretation) Thank you, Mr. Speaker.

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

#### **Question 080 – 5(2): Office of Patient Relations**

**Mr. Main** (interpretation): Thank you, Mr. Speaker. Good day to the people who are watching the televised proceedings, as well as the residents of Whale Cove and Arviat.

I rise today to ask my question to the Minister of Health.

(interpretation ends) Mr. Speaker, since the beginning of our term, we have heard the Minister of Health many times regarding the Office of Patient Relations. The minister has been referring any number of issues to this office, from community concerns about travel routes, to arrangements with boarding homes, to complaints about diagnosis or treatment. It's very important work that this office does, as with the entire Department of Health.

Could the minister clearly describe how the Office of Patient Relations works, including how many staff work there, how many of them speak Inuktitut, and how they process the calls, concerns, or complaints that come in? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. I noticed that you asked three questions, but they're related, so I want to give the minister an opportunity to respond. Minister of Health, Minister Angnakak.

**Hon. Pat Angnakak**: *Qujannamiik*, Mr. Speaker. I recognize that you did ask a few questions, but I don't mind answering them as best as I can.

The Office of Patient Relations is definitely an important office. We want to use it as a way of figuring out what to do with problems as they arise. We need somewhere to put them in an organized way.

Currently, the office operates with three PYs. We have somebody there that speaks Inuktitut. It has been very hard to fill that Inuktitut-speaking position and so we have had to share a position. We are going to finally get our own Inuktitut-speaking person that is dedicated for that office in mid-June.

We currently have three PYs and another one who is fluent in Inuktitut is coming on. I think I have answered all of your questions, but if not, you can let me know. Thank you, Mr. Speaker.

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

**Mr. Main** (interpretation): Thank you, Mr. Speaker. I would like to thank the minister. Those are very important issues, I am sure. You have responded to my questions, but I would like to know. I will use an example. (interpretation ends) If a patient has a complaint and submits their paperwork into the office, what is the process that the complaint follows inside the Department of Health? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I do not work at the office myself, but from what I understand the pathway is: a concern will come in and it will go to the office, then we have a director that would take that complaint. He or she will delegate staff or do it themselves. Say they phone up, let's say it's a complaint in that I thought I should get a second escort, but I couldn't. I don't agree with it or whatever, you know, something like that.

They would phone the medical travel office and find out what is going on here. "There is this case that has come up. Can you give me the information on the file?" And then she would make a decision on whether or not it was a valid reason in whatever way they decided to go on a particular case, or not.

Sometimes changes are made. Sometimes an original decision could be overturned once it has been investigated. Basically this office is really just to investigate different kinds of issues that are coming in and then they get back to the person after the fact. If you had made a call and you were upset about something and it was investigated, then the Office of Patient Relations would call you back and say this is what we found out and why. Thank you, Mr. Speaker.

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

**Mr. Main** (interpretation): Thank you, Mr. Speaker. (interpretation ends) Given how complex the work that this office does, I am interested in understanding the issue of

effectiveness and performance. Can the minister explain how her department evaluates the effectiveness of the Office of Patient Relations? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Speaker. I guess there are two ways: the first one would be, you know, are we addressing these issues? Like, if people are still really upset, I usually hear about it and I must say, that is getting a lot less now because I think we are starting to use the office a little bit more often and they are doing their due-diligence and investigating things.

The other thing, too, that we do have there is clinical capacity. We have somebody who has a clinical background so, if you did phone up and you were not happy with, maybe even a diagnosis, you wanted a second opinion, or something in the clinical sense, we actually have somebody there that understands that as well. I think that's really helpful, I'm hoping it will be and I'm hoping that the office will be used more. It's just a more organized way of really dealing with problems when it comes to healthcare delivery in Nunavut. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Oral Questions. Member for Iqaluit-Tasiluk, Mr. Hickes.

#### **Question 081 – 5(2): Housing Allowance for Casual Employees**

**Mr. Hickes:** Thank you, Mr. Chairman. I'm going to revisit an issue that I brought up on March 7, my colleague next to me, Mr. Lightstone, has brought up as recently as last week. My question today is directed to the Minister of Finance.

Mr. Speaker, when we're talking about housing allowance for Government of Nunavut employees, what, in my opinion, is a discrepancy is the lack of access to that program by casual employees. In my previous line of questioning, I had mentioned and it's very clear publicly that since 2009 when this program was brought into place, it has never been increased or reviewed.

In 2009 the review mentioned, in response to my previous question back in March, stated that this is one of the blueprint for action items, and self-described by the minister is "one of the critical ones that relate to our employees."

Mr. Speaker, almost three months now have passed. Has the timeline for this review been established? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister of Finance, Minister Akeeagok.

**Hon. David Akeeagok** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I thank my member colleague for continuing to raise this, and I did mention it's one of the critical areas that we need to look at. It is part of the blueprint for action, and it's one that

I have asked my staff to give me a report by this fall. There is a lot of work that needs to get done and it's one that, with conversations with my staff, is doable if I let them go through that review and figure out what recommendations there are. Once those recommendations come, it will be my duty to get a decision made. (interpretation) Thank you, Mr. Speaker.

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

**Mr. Hickes:** Thank you, Mr. Speaker. In response to Mr. Lightstone's questions to the minister last week, the minister stated that there are many long-term casuals being prioritized for indeterminate employment, including positions not identified by the department. In the recent response by health alone to a written question, there are over 230 casuals in unfunded positions. Mr. Speaker, what steps are being done to address these casual positions? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Akeeagok.

**Hon. David Akeeagok** (interpretation): Thank you, Mr. Speaker. (interpretation ends) There are, as you mentioned, a large number of casuals. We are taking steps. If some of these casuals are filling in vacant positions, what we encourage the departments to do is put out a competition as early as possible, if they could.

One of our processes, called a restricted competition, is open with a shorter timeframe, and could be restricted to Inuit or government employees only. That makes for a speedier competitive process.

Also, as I mentioned, there is another process; direct appointment. For those that are over two years as casuals for filling positions, we've encouraged the departments to start getting the direct appointments process or if they're confident that it can go through to competition. Those are areas that we have been monitoring very closely. (interpretation) Thank you, Mr. Speaker.

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

**Mr. Hickes:** Thank you, Mr. Speaker. The minister and his response will lead to my next question. When you've got approximately 900-plus casual employees across the Government of Nunavut and like I stated, just from the Department of Health there are 230 unfunded positions, it's safe to say that there's a number of other unfunded casuals across the government right now.

The minister stated that there were a number of different avenues available to him to turn these casual employees into full-time, indeterminate employees or term positions. Can the minister provide to this House the numbers of how many casual...? Forgive me. It sounds like a number of questions, but it's only one at the end of it, Mr. Speaker. How many of these casual positions have been transitioned through restricted competition,

how many have gone through direct appointment, and how many have gone through any other type of competitive process? I'll leave it at that. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you (interpretation ends) and I forgive you. Minister Akeeagok.

**Hon. David Akeeagok**: Thank you, Mr. Speaker. I don't have it broken down in terms of which process was followed. For 2017-18, 138 casuals were converted into indeterminate staff and those are the stats that I currently have. For the casuals, when we look at the percentage of over...909 as of March 2018, those are the number of casuals. About 30 percent of them are greater than one and two years and 70 percent is less than a year. (interpretation) Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Oral Questions. Member for Aivilik, Mr. Netser.

### **Question 082 – 5(2): Mould in Public Housing Units**

**Mr. Netser** (interpretation): Thank you, Mr. Speaker. I'm not going to ask questions to the Minister of Economic Development.

>> *Laughter*

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

Earlier this week the minister made a statement in the House about mould remediation and I thank him for doing so because they do a lot of hard work on behalf of tenants.

(interpretation ends) Mr. Speaker, in his statement, the minister indicated that professional remediation of 35 public housing units need urgent intervention. It has been undertaken. Can the minister provide a general description of how the NHC classifies different levels of mould infestation? (interpretation) Thank you, Mr. Speaker.

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

**Hon. Lorne Kusugak** (interpretation): Thank you, Mr. Speaker. I also thank you for the question and for causing us to smile at times.

Mr. Speaker, the Nunavut Housing Corporation let RFPs to hire contractors to work on the mould remediation work, including the types of mould and the type of cleanup equipment required to conduct the cleanup work.

Apparently different types of moulds exist which we have learned about, as some mould can just be wiped off with a cloth, while some moulds are hazardous to one's lungs if inhaled, and they can also become airborne. These different types of mould require

different levels of remediation, and I believe there are three types of hazardous mould that the environmental protection investigators have identified, and this was done through the RFP.

This identified the types of mould that occur, and the levels of hazards associated with each type. Thank you, Mr. Speaker.

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

**Mr. Netser** (interpretation): Thank you, Mr. Speaker. Thank you, minister, for your response. Now, I have received concerns from residents in Coral Harbour and Nauyasat about mould infestation in their public housing units and in his statement, the minister indicated that all maintenance workers have been trained in 25 communities.

(interpretation ends) Can the minister indicate if he is receiving reports from these local HOs about remediation work that is being conducted at the local level, and if so, can he indicate how many units in the two communities that I am representing have been remediated. (interpretation) Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Kusugak.

**Hon. Lorne Kusugak** (interpretation): Thank you, Mr. Speaker. I am sure we have all seen the photographs of the mould infestation in the houses. Mould is a very serious business and I know some moulds you can just wipe off however, mould in public housing units has spread through all of Nunavut and there are many different kinds of moulds.

Right now, the remediation work is being done and also planned for other communities. Every community in Nunavut has a mould remediation specialist now. For the more dangerous moulds, we will bring in expert help to do that.

In his communities that my colleague is representing, I don't have the information in front of me as to how many units have been cleaned and how many units still need to be done. I will keep the House informed about these statistics. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Oral Questions. Member for Gjoa Haven, Mr. Akoak.

### **Question 083 – 5(2): Grays Bay Road and Port Project**

**Mr. Akoak**: Thank you, Mr. Speaker. Good afternoon, colleagues, (interpretation) as well as those that I represent and those who are watching on TV.

(interpretation ends) Thank you, Mr. Speaker. My questions today are for the Premier.

Last week I tabled an excerpt from the magazine *Aboriginal Business Quarterly*, which contained an interview with the Premier. I recommend this to all members today for good reading and I would ask the Premier and a certain minister to read the interview with care.

Mr. Speaker, in the interview, the Premier is quoted as saying that “The Government of Nunavut needs to work together with Nunavut’s regional Inuit organizations if you want to see big projects like Grays Bay be successful.”

Mr. Speaker, the Government of Nunavut made a unilateral decision to withdraw substantive support from the Grays Bay Project, which is vital to the long-term economic future of Kitikmeot and Nunavut.

Mr. Speaker, can the Premier please explain how this can be considered as “working together” with the regional Inuit organizations? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you, Premier Quassa.

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. I would like to thank my colleague for bringing out the glossy and beautiful magazine. Just kidding.

>>*Laughter*

Yes, I can speak further to this matter regarding the Kitikmeot Inuit Association and the relationship with the Nunavut government, as we have worked closely in the past. I wanted to clarify that point firstly. We have worked together for many years. Further, we agreed (interpretation ends) jointly (interpretation) that the Kitikmeot Inuit Association would become the sole protagonist or, to say it in English (interpretation ends) the sole proponent of the project.

(interpretation) This is the agreement we came to, and this is what we mean when we say that we support their project, and as we all know, in the *Turaaqtavut* Mandate, we have identified that need, and we have also spoken to the fact that the Inuit associations, the federal government and private businesses are the organizations we want to work with.

Our statement is true in that regard. Further, I wanted my colleagues, and Nunavummiut that we have acknowledged the benefits of this area which probably has an Inuit place name which we call the Grays Bay road and project. We will continue to support this initiative, and we will not withdraw our support for the project. We are in support.

We have stated we will support this project, and believe the Kitikmeot Inuit Association is quite capable of undertaking this project. They have the capacity to complete the project and with the work required to initiate the project, they can complete the work themselves if they wanted to do the work themselves. That is what they requested from the government, to become the sole proponent and (interpretation ends) we now jointly agree that the KIA will assume the role as a sole proponent of the project.

(interpretation) Nonetheless, I want my colleague to be aware that we will keep an eye on this development and (interpretation ends) monitor (interpretation) the situation and if required to provide more support in any means, we will provide the required support. As a matter of fact, what I can say here to my colleague and Nunavummiut that (interpretation ends) development (interpretation) and economic potential will be the basis for undertaking this project, and we will look to all avenues to develop economically.

I just wanted to clarify that point, Mr. Speaker. Thank you.

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

**Mr. Akoak:** Thank you, Mr. Speaker. The Government of Nunavut's current position appears to be that it supports Grays Bay, again appears to support the Grays Bay project in principle. Can the Premier clearly describe exactly what "in principle" means? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Premier Quassa.

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. Perhaps I can refer back to what the Minister of Economic Development and Transportation responded with, as his response was perfectly appropriate and I thank him first of all for that response as this is the goal of our mandate.

And further, this is (interpretation ends) in principle (interpretation) so, for example, if they will try to initiate...actually what we state here in this case is the beginning step, personally I used (interpretation) in principle (interpretation) as meaning the first level. There is also a (interpretation ends) final (interpretation) which we call the final level.

This is just the first level of initiation, however, if I were to use an Inuktitut phrase: we still support the project. We are still in support. I want Nunavummiut and colleagues to know that development that will occur have our support. However, my cabinet colleague clearly stated that this is listed in the *Turaaqtavut* Mandate, as priorities we want to pursue, and which areas will be the priorities.

We already identified these priorities, as a Full Caucus to debate and set the priorities, with all members. If you recall, we were in Pond Inlet that the Speaker maintains is the jewel of the Arctic. While in the community, we agreed on the listing of the priorities to be included in the mandate.

We were trying to follow these principles, and thusly why the Minister of Finance tabled the budget following the *Turaaqtavut* Mandate, and he set his budget accordingly. We have to follow the priorities we listed, and this is how the priorities are listed in this document.

However, we have also been quite clear in our statements that any projects that can help enhance our territory are written underneath. So, yes, we will support development that helps to benefit our territory. These are the priorities we will be attempting to implement over the upcoming four years of our mandate. I just wanted to reiterate that point. Thank you, Mr. Speaker.

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

**Mr. Akoak:** Thank you, Mr. Speaker. As I noted earlier, the Premier has gone on record as saying that the Government of Nunavut needs to work together with Nunavut's regional Inuit organizations if we want to see good projects like Grays Bay being successful. My question for the Premier is this: if the Government of Nunavut is no longer prepared to provide financial support for the Grays Bay project, how can it be successful? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Premier Quassa.

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. In our Turaaqtavut mandate, it elaborates that we work together and that we will work together with the regional Inuit associations.

This will continue on various levels. We'll work with them on various different levels as we speak about the elders in Nunavut on behalf of Nunavut elders because we have been sending the elders out of the territory for their care. How can we provide that service within the territories?

We'll work closely with the regional Inuit associations. We are working with the regional Inuit associations on different levels and with other entities. We will work with all of them to work on various projects, as we have stated on large projects, as we have stated in our Turaaqtavut mandate that we have stated that we have set our priorities on which areas that we'll spend our funding.

The Minister of Finance has spoken about this, as has the Minister of Economic Development. Those are the things that, together, we had agreed. That's how we're going to follow the mandate that was set.

As my colleague is aware, under the environmental assessments at this time, we have agreed with Kitikmeot Inuit Association's work that they would like to do. We've already written a letter to them so that the member can be aware of this. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Oral Questions. Member for Kugluktuk, Ms. Kamingoak.

**Question 084 – 5(2): Grays Bay Road and Port Project**

**Ms. Kamingoak** (interpretation): Thank you, Mr. Speaker. (interpretation ends) My questions today are for the Minister of Economic Development and Transportation concerning the Grays Bay Road and Port project.

During yesterday's sitting of the Legislative Assembly, the minister stated that the Government of Nunavut's proposed financing commitment for this project under its original submission to the National Trades Corridor Fund "would have been 25 percent of roughly \$550 million, it would have cost to build the Grays Bay road and port."

Mr. Speaker, can the minister clarify how much this amount was to have been provided in direct financial support, and how much was to have been provided through a guarantee related to the bond market? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister of Economic Development and Transportation, Minister Savikataaq.

**Hon. Joe Savikataaq**: Thank you, Mr. Speaker. I have never heard of any bond market, but our 25 per cent share would have been \$138 million through this project from the beginning to the end. Thank you, Mr. Speaker.

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

**Ms. Kamingoak**: Thank you, Mr. Speaker. I was browsing through the government and KIAs joint submission to the National Trades Corridor Fund, and it states, "Initially, the Grays Bay Project will utilize the National Trades Corridor Fund monies to leverage access to third party bond capital."

Of the total cost of \$138 million intended to come from a capital market's financing in the project bond market that is secured by the project's revenue contracts and supported by the proposed guarantee from the Government of Nunavut. The guarantee would be subject to consideration by the new Nunavut government. That is the bond that I am talking about.

My question is, on April 13, 2018 the minister announced that the Government of Nunavut will "monitor development of the Grays Bay Road and Port Project, and provide support, where applicable." Can the minister clarify what specific types of support are applicable? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Savikataaq.

**Hon. Joe Savikataaq**: Thank you, Mr. Speaker. Just to take a step back. As the member pointed out, any revenue that the road may have generated more than likely would have come as a toll-road, in terms of once the road is done. We would have had to put our share of the money out to make sure the road is done.

As to the member's question about any we can help, we do not know what state this project it is in as it was in the news recently that the Kitikmeot Inuit Association has requested the process be halted for now. We are still there to help as we are in any other projects.

To date, the Government of Nunavut has contributed over \$3 million to this project since its conception up to now. Thank you, Mr. Speaker.

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

**Ms. Kamingoak** (interpretation): Thank you, Mr. Speaker. (interpretation ends) In June 2017, the Legislative Assembly approved \$2 million in funding to enable the completion of environmental and engineering activities for the Grays Bay Road and Port Project. Can the minister confirm if these studies have now been completed? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Minister Savikataaq.

**Hon. Joe Savikataaq**: Thank you, Mr. Speaker. Some of the studies have been completed, and some of them will be completed this summer. Thank you, Mr. Speaker.

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

#### **Question 085 – 5(2): Increased Funding for Inuktitut in the Public Service**

**Mr. Mikkungwak**: Thank you, Mr. Speaker. My questions are for the Premier.

The Premier had a minister's statement, which I will be asking toward increased Inuktitut Language funding for public servants. *Turaaqtavut* is to continue to promote the Inuit language as the working language of the Nunavut public service. In the minister's statement, it identifies seven communities that have been offered Inuktitut courses and had about 159 participants in 2017-18.

Mr. Speaker, my question to the Premier is this: will the increased Inuktitut language funding for public servants be rolled out to the other 18 Nunavut communities, as 7 communities within Nunavut have already received it? Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Premier Quassa.

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. I also thank my colleague for asking that pertinent question related to this matter. This again relates to the Inuktitut language.

It is important and appropriate, and based on the statements we have made previously, that all Nunavut government employees should learn Inuktitut, as we all know that here in Iqaluit and not in the (interpretation ends) decentralized stations (interpretation) as many employees are here.

We also know that the majority of government workers in the decentralized communities can speak Inuktitut fluently. However, with respect to any worker needing training in Inuktitut, yes, this initiative will be open to them, Mr. Speaker. Thank you.

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

**Mr. Mikkungwak** (interpretation): Thank you very much, Mr. Speaker. I thank the Premier for his response. My next question now: will this language training be open to every category of government employees, whether they are casual, or this word I can't say in Inuktitut (interpretation ends) indeterminate (interpretation) category or the permanent government employees. Will this training be applied to all categories of government employees? Thank you very much, Mr. Speaker.

**Speaker** (interpretation): Thank you. Premier Quassa.

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. I don't quite understand. I apologize. Maybe he can clarify his question. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Mr. Mikkungwak, please clarify your question. Mr. Mikkungwak.

**Mr. Mikkungwak** (interpretation): Thank you very much, Mr. Speaker. I was asking whether all the different levels of government employees will receive this training. Here I mean positions that are: casual, term and permanent. (interpretation ends) Casuals, indeterminate and permanent, (interpretation) will this training apply to all these different categories of employees, as long as they are working for the government? Thank you very much, Mr. Speaker.

**Speaker** (interpretation): Thank you. Premier Quassa, perhaps that's clear now.

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. Thank you for clarifying that. As per my previous statements, we received Uqausivut funding over a number of years from the Department of Culture and Heritage. The funding is provided towards this initiative, and based on the funding; we then look at what initiatives we work towards.

Yes, this is the path I want to work towards, to ensure that all government employees are able to understand or speak in Inuktitut, and the reasoning is that the majority of the population in the territory speak primarily in Inuktitut. We have to remember who our clientele is, so this is our goal here. Thank you, Mr. Speaker.

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

**Mr. Mikkungwak** (interpretation): Thank you very much, Mr. Speaker. This type of language training is something we can all support, as we have to preserve our language to keep it alive.

My last question now is: the training will be provided in the communities. Both in the short-term and future training locations as the other 18 communities will eventually get this training, I believe. I would like to understand if decisions have been made on the locations for this training?

Will it be in the Nunavut Arctic College facilities, in our local schools, or in the municipal government offices? Where exactly will this training be offered, if the information has been provided as to where the training would take place? Thank you very much, Mr. Speaker.

**Speaker** (interpretation): Thank you. Premier Quassa.

**Hon. Paul Quassa** (interpretation): Thank you, Mr. Speaker. I can elaborate with a few more details. We made an announcement that for our employees who don't understand a word of Inuktitut. There is a program for them specifically. Another program is for beginners, and another for increasing one's Inuktitut fluency, as these programs are geared toward the various levels which we try to provide training on.

Further, we look for any material that can assist us in providing this training, so this is one aspect. Another area where we receive assistance is the Inuit Uqausinginnik Taiguusiliuqtiit, the language authority that conducts Inuktitut proficiency testing to see if they have improved. So testing takes place.

Now, with respect to the training in the communities, that is our preference. This would apply to all categories of government employees, and not just to focus on the ability to speak Inuktitut, but also being able to be literate in Inuktitut. There are different levels of training provided, and further, this training would be provided in whichever facility is chosen by the community. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Members, please note that the time for question period has expired. We will proceed with our orders of the day. Mr. Savikataaq.

**Hon. Joe Savikataaq** (interpretation): Thank you, Mr. Speaker. I am asking if we could go back to Item 5. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. The member is seeking unanimous consent to go back to Item 5 in the *Orders of the Day*. Are there any nays? There are no nays. We will now go back to Item 5, Recognition of Visitors in the Gallery. Premier Quassa.

### **Revert to Item 5: Recognition of Visitors in the Gallery**

**Hon. Paul Quassa** (interpretation): Thank you for the consent and for being put first. Thank you.

I would like to recognize someone who has been a resident of Iqaluit for a long time. For those of us who are a little bit older, we used to listen to him and we've heard him on the

radio. For those who listen on the weekend. Moses Atagoyuk has helped for a long time and he is now an elder. He was the younger brother of my late father in-law.

Not just to us but to all Nunavummiut, he talks about the proper use of our language and he works hard for that. He has always told me to use this terminology and pronounce it properly and that helps a lot. Thank you very much.

>>Applause

**Speaker** (interpretation): Thank you. Mr. Atagoyuk, welcome to your House. Recognition of Visitors in the Gallery. I have no more names. Mr. Savikataaq.

**Hon. Joe Savikataaq** (interpretation): Thank you. Mr. Speaker. I would like to recognize Moses Atagoyuk. When I was a young person, I was staying at the Ukiivik and he was a supervisor and I know him. I have even visited his house. I also remember Mathew Putulik, who is not with us anymore. They were the supervisors. I would like to recognize him and welcome him. Everybody here knows that there are cellphones. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Welcome, Mr. Atagoyuk. Recognition of the Visitors in the Gallery. Mr. Kusugak.

**Hon. Lorne Kusugak** (interpretation): Thank you, Mr. Speaker. It was unfortunate that others first recognized the person, as my colleagues acknowledged him. I am speaking about the same person as he is currently the only visitor here.

I would like Iqalummiut to visit the House when we are sitting in session.

The reason why I wanted to acknowledge him was due to the fact we were co-workers at CBC many years ago. While we were living in Iqaluit the first time I was elected, Moses and his wife were very welcoming. All the elders in Iqaluit are very hospitable. I am very grateful to him, which is why I wanted to acknowledge him again. Thank you, Mr. Speaker.

>>Applause

**Speaker** (interpretation): Thank you. Recognition of Visitors in the Gallery. I have no more names on my list. Let's proceed. Written Questions. Returns to Written Questions. Replies to Opening Address. Replies to Budget Address. Petitions. Responses to Petitions. Reports of Standing and Special Committees on Bills and Other Matters. Tabling of Documents. Minister of Culture and Heritage, Minister Joanasie.

**Item 14: Tabling of Documents****Tabled Document 024 – 5(2): 2016-2017 Inuit Uqausinginnik Taiguusiliuqtiit Annual Report**

**Hon. David Joanasié** (interpretation): Thank you, Mr. Speaker. I am pleased to table today the 2016-17 *Inuit Uqausinginnik Taiguusiliuqtiit Annual Report*. Please read it carefully. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Tabling of Documents. Member for Aivilik, Mr. Netser. Tabling of Documents. Moving on. Notices of Motions. Notices of Motions for First Reading of Bills. Motions. First Reading of Bills. Second Reading of Bills. Consideration in Committee of the Whole of Bills and Other Matters. Bills 4 and 5 with Mr. Rumbolt in the Chair.

Before we proceed to the Committee of the Whole, we will take a 19-minute break.

Sergeant-at-Arms.

>>*House recessed at 15:23 and Committee resumed at 15:53*

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

**Chairman** (Mr. Rumbolt): Good afternoon, members. I would like to call the committee meeting to order. In Committee of the Whole we have the following items to deal with: Bills 4 and 5. What is the wish of the committee? Mr. Mikkungwak.

**Mr. Mikkungwak**: Thank you, Mr. Chairman. We wish to commence with the review of Bill 4 with the review of the Department of Health. Thank you, Mr. Chairman.

**Chairman**: Thank you, Mr. Mikkungwak. Are we in agreement that we first deal with Bill 4?

**Some Members**: Agreed.

**Bill 04 – Appropriation (Operations & Maintenance) Act, 2018-2019 – Health --  
Consideration in Committee**

**Chairman**: Thank you. I would now ask Minister Angnakak, do you have officials that you would like to invite to the witness table today?

**Hon. Pat Angnakak**: Yes. Thank you, Mr. Chairman.

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

**Some Members:** Agreed.

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

Should I do this all in one, introduce officials and their openings? That's mine, right?

Oops. I didn't realize I was on TV saying them words.

>>*Laughter*

Thank you. For the record, Minister Angnakak, please introduce your officials and then please proceed into your opening comments. Thank you.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. I am pleased to present here our health main estimates. Also with me today is my Deputy Minister, Colleen Stockley, and also my Associate Deputy Minister, Karen Kabloona. Thank you. I shall begin.

For the 2018-19 fiscal year, the Department of Health proposes a budget of \$392,660,000. This represents an increase of \$39,270,000, or 10 percent, from last fiscal year and includes the creation of 26.5 net new positions.

Mr. Chairman, the department embraces the commitments and priorities set out in *Turaaqtavut*. Through *Inuusivut*, the department's focus will be on the enhancement of health care services for all Nunavummiut and the promotion of healthy communities.

The main estimates and business plan before you today outline how we will provide a diverse suite of clinical expertise, health care services and facilities to all Nunavummiut. They set out how we will expand our public health and mental health and addictions services. They commit us to continuing the work begun by the Quality of Life Secretariat to coordinate the implementation of the territorial action plan for suicide prevention.

### **Provision of Health Care Services**

The Department of Health is continually seeking new ways to improve access to health care services for Nunavummiut. For fiscal year 2018-19, Health is requesting support for the following health care initiatives:

#### **Tuberculosis Elimination in Nunavut**

Nunavut continues to have the highest incidence of tuberculosis in Canada. TB occurs in Nunavut at this high rate for reasons that are outside of Health's control. These are called the "social determinants of health" and include poverty, food insecurity, and overcrowded housing. Screening and treatment of TB is complicated by the history of forcibly removing Inuit from their families for treatment in the south. Many Canadian leaders are committed to the elimination of TB and I will work with them to this end.

I am sure my colleagues agree that the incidence of TB in Nunavut is unacceptably high. In 2014 it was approximately 60 times higher than the national average and almost all cases in Nunavut occur in Inuit. Over the last five years 17 of 25 Nunavut communities have had one or more case of infectious TB.

This past winter Health opened a dedicated TB clinic in Qikiqtarjuaq to screen all community residents and to treat those identified as carrying the bacteria. This clinic has taught us a lot about repairing the relationship with Inuit, working with the community to screen and treat TB locally, and understanding the resources needed.

Health requests \$1,583,000 in fiscal year 2018-19 to take the next steps towards eliminating TB in the territory. The department will work with the Government of Nunavut and Inuit Tapiriit Kanatami to accelerate our plans using federal resources. However, to eliminate TB in Nunavut will require long-term investments from all levels of government.

#### Mental Health and Addictions

The department continues to maintain a focus upon mental health resources at the community level. Health is continuing with the second phase of our mental health programming initiative, which will help to expand mental health and addictions services across Nunavut. Specifically Health is seeking \$2,748,000 to support mental health service delivery in fiscal year 2018-19.

These funds will allow us to expand and standardize community-based mental health and addiction treatment options, from medical detoxification to peer support. In addition, the department will also aim to offer alternative service delivery options and approaches by increasing access to psychiatric sessions using telehealth.

#### Public Health Nurse Capacity

Mr. Chairman, the Department of Health remains committed to strengthening public health nursing in Nunavut. Strong public health programming and public health nurses are effective in both preventing illness and decreasing the demands on our community health centres.

In the past two years new public health nurse positions have been created in Arviat, Gjoa Haven, Naujaat, and Kugluktuk. For 2018-19, Health proposes to build its capacity in this area with two new public health nurses, one in each of Coral Harbour and Taloyoak, at a cost of \$423,000.

#### Qikiqtani General Hospital Surgical Services

Health is requesting \$396,000 to hire two registered nurses to support and enhance surgical activities at the Qikiqtani General Hospital.

Mr. Chairman, acquiring two additional nursing PYs will enable the two operating rooms at the hospital to be used simultaneously and for extended hours during the day. This will further address and mitigate the risk of long surgical wait-lists and allow surgeries to be done in Nunavut rather than the more costly option of sending clients out of territory.

#### Enhanced Qikiqtaaluk Audiology Capacity

Access to timely assessment and treatment of hearing loss is of vital importance to the youth of Nunavut. Even though the incidence and complexity of hearing issues among Nunavut children are far higher than the Canadian average, children are not screened for hearing loss at birth and many hearing issues go undiagnosed throughout a child's preschool years as a result.

At present there is only one audiologist employed by the Government of Nunavut to service the entire Qikiqtaaluk region. It is not feasible for one individual to provide adequate service to this large region. Health is requesting \$433,000 in 2018-19 to hire an additional audiologist to focus exclusively on early intervention for newborns and preschool children.

#### NunaFam

NunaFam is collaboration between the Department of Health and the Faculty of Medicine at Memorial University of Newfoundland to train family physicians and have them work in Nunavut. To date 27 residents have completed their training in Nunavut. As a recruitment and retention vehicle, this program has positively influenced physician length of stay, and two of the NunaFam residents have signed contracts to work in Iqaluit after obtaining their licence.

The current NunaFam project was funded externally through Health Canada and expired in June of 2016. Health is requesting \$423,000 in fiscal year 2018-19 to facilitate the creation of a full-time program coordinator position.

#### Cannabis Assessment, Management, and Control

On April 13, 2017 the federal government tabled Bills C-45 and C-46, the *Cannabis Act* and *An Act to Amend the Criminal Code*. Once passed, these bills will legalize the recreational possession and consumption of cannabis in Canada. The federal government intends to have legislation come into force through the summer to fall of 2018.

Currently there is no dedicated funding to address the urgent need for public health programming related to cannabis use in Nunavut. The department is requesting funding of \$490,000 in fiscal year 2018-19 for two positions, as well as program funding for the development of a Nunavut-specific cannabis public health program.

### **Quality of Life Secretariat**

This year will see an increase in the grants and contributions program for suicide prevention. This program was launched in 2017-18 and is designed to grow as our community members become trained in delivering programs, such as Makimautiksat, men's groups, and bereavement groups. An additional \$458,000 in contribution funding is requested for fiscal year 2018-19.

Let me share with you a few examples of projects funded last year under this program. Coral Harbour hosted a youth celebration camp for six days attended by more than 50 youth, elders, volunteers, mentors, and counsellors to foster natural peer support systems and promote self-esteem amongst the participants. In Baker Lake, Mianiqsijit was provided base funding for their two counsellors and also for the counsellors to work at the high school weekly and during crises.

In Pangnirtung, Inuit Ilagiit and Pujualussait held healing workshops and community planning for suicide prevention. In Kugaaruk, after the devastating loss of their only school, the community put together a project, Live to Love Life, to support youth resilience, develop coping skills, and forge new relationships through sports, art, music, and social support groups.

Mr. Chairman, there is so much good work happening in communities, and this program allows communities to lead their own solutions.

### **Uncontrollable Cost Budget Allocation**

The department has been managing budgetary allocations in some program areas that are insufficient as a result of increasing and uncontrollable health care delivery costs. Such deficits result in repeated, sizable annual supplementary appropriation requests and restricting delegations on controllable expenditures within budgets. To address this, Health is requesting an additional \$31,175,000 for the following uncontrollable expense categories:

- Medical travel – \$14,510,000
- Mental health and addictions treatment – \$11,010,000
- Operational funding for elders' homes – \$855,000
- Operational funding to support the care of elders out of territory – \$4.8 million

The cost of health care delivery is steadily increasing across Nunavut. In 2016 the Canadian Institute of Health Information reported that Nunavut was forecasted to spend \$14,301 per capita on health care, a 3.1 percent increase over 2015. A remedy for these uncontrollable budget items is needed to offset the increasing costs being incurred by the department.

### **Environmental Health Services**

Environmental health officers work to identify and protect Nunavummiut from a variety of health hazards and ensure safe water and food and sound waste disposal. An additional environmental health officer is required in the Kivalliq region to support the officer currently responsible for regional management of the Environmental Health Program. Health is requesting \$122,000 in 2018-19 to staff a regional environmental health officer for the Kivalliq region based in Rankin Inlet but mobile throughout the region.

### **Conclusion**

Mr. Chairman, a priority for the department in the coming year is to promote the well-being of all Nunavummiut and foster healthy communities. This means working on solutions for those of our elders who need long-term care. It means helping Nunavummiut who need treatment by mental health specialists. It means being nimble and responsive to emergent medical needs and ensuring that appropriate and efficient services are provided to all Nunavummiut by an increasingly strong and capable complement of health care professionals.

While we may face many unique challenges brought on by our geography, demographics, and technological constraints, it is important to recognize the advances we have made on behalf of all Nunavummiut. Our aim is to continue to build a well-governed, integrated, collaborative health care system that is innovative and responsive to the needs of all Nunavummiut. The department envisions a health care system that embraces Inuit societal values and empowers Nunavummiut to live healthy lives.

Mr. Chairman, that concludes my opening comments. (interpretation) Thank you.

**Chairman:** Thank you, Minister Angnakak. Does the chair of the standing committee have opening comments? Please proceed, Ms. Nakashuk.

**Ms. Nakashuk** (interpretation): Thank you, Mr. Chairman. The Members of the Standing Committee on Social Wellness have reviewed the 2018-19 Main Estimates and Business Plan of the Department of Health.

The standing committee notes that the 2018-19 operations and maintenance budget for the Department of Health is approximately \$392 million. This represents nearly one-quarter, 24 percent, and the largest share of the government's total operations and maintenance budget for 2018-19. The Department of Health will be receiving almost \$40 million more than it was allocated in its 2017-18 budget. While members support this increase in allocated funding to meet ongoing operational as well as critical and urgent needs in 2018-19, it is noted that the Department of Health received close to \$50 million in supplementary appropriation funds for this past fiscal year. This brings the revised budget total to over \$402 million for 2017-18, which is almost \$10 million more than what is being requested for 2018-19.

Mr. Chairman, the standing committee recognizes that the minister and her officials are in ongoing communication with federal counterparts to address health care needs across the territory. There is a desperate need for substance abuse, addictions and mental health services all across the territory, from communities in the Kitikmeot and in the Kivalliq to communities in Qikiqtaaluk. Members appreciate that Indigenous Services Canada has provided funding of approximately \$388,000 for a feasibility study for a treatment facility in Nunavut. Members encourage the government to work with its partners to address this issue without delay.

During the minister's appearance before the standing committee to discuss her department's draft budget for 2018-19, members were given to understand that some consideration has been given to repurposing the Piqusilirivvik Cultural School in Clyde River into a residential treatment facility. Members look forward to updates on developments in this area.

Mr. Chairman, in 2017 the federal government announced \$9 million for Inuit-specific mental wellness programs and in 2018 a further \$27.5 million in federal funding was committed over five years to address tuberculosis in Inuit Nunangat. According to the federal government announcements, these funds are to be administered through Inuit Tapiriit Kanatami. Members strongly urge the minister, along with her government colleagues, to work closely with ITK at the earliest opportunity to provide assistance and direction with a view to ensuring that these funds are adequately and appropriately distributed in a timely manner. Members note that tuberculosis rates in Nunavut remain consistently and worryingly high. The community-wide screening project held in Qikiqtarjuaq last year was a very successful step towards identifying and treating cases of tuberculosis. However, it is important that the momentum not be lost. Ongoing tuberculosis screening, treatment and awareness programs are critical to containing the spread of the disease.

Members recognize that such programs and services as boarding homes and dental care are also determined to a large extent by funding and contracts arranged through the federal government's Non-Insured Health Benefits program. The Auditor General of Canada's recent report on oral health programs for First Nations and Inuit makes a number of observations and recommendations in this area. The standing committee encourages the minister to work with her federal counterparts to address issues and concerns which have been raised with respect to the conditions and quality of service in these areas and to closely monitor steps which are being taken to improve them. The issue of security at medical boarding homes is a steadily growing concern.

Members appreciate that there are unique challenges in providing health services across Nunavut's enormous geographic expanse, with limited and expensive transportation options and within the unique social, economic and demographic circumstances of our northern communities. Members look forward to receiving an update on how the department's revised "Model of Care" plan will take into account individual community needs and expectations as well as incorporating the knowledge and expertise of elders in program areas.

Mr. Chairman, the standing committee notes further that a number of new positions will be added to the department in 2018-19, even though many of the department's current positions remain unfilled and the revised "Model of Care" has yet to be implemented. The standing committee appreciates that there are significant challenges in staffing full-time health care positions and recognizes that the ongoing reliance on casual and agency staff has a financial impact on the department's operations.

Mr. Chairman, the need for long-term care services across the territory has been discussed at some length in recent years. Committee members urge the minister to increase her efforts to develop a long-term plan to support Nunavut's growing elder population within the territory. Members noted with some concern that oversight of one of the elders facilities, which was transferred from the jurisdiction of the Department of Family Services to the Department of Health, has resulted in the facility being temporarily closed for renovations. Members encourage the minister in her efforts to ensure that as many elders as possible are able stay in Nunavut to receive care. The standing committee appreciates that some levels of care, especially in the area of dementia care, require specialized supports and services that are cannot currently be provided in the territory. During her appearance before the standing committee to discuss her draft budget and business plan for 2018-19, the minister indicated that one of the department's new positions will be dedicated towards considering ways in which additional elder and long-term care services can be established in the territory.

Mr. Chairman, health-related initiatives at the community level can be greatly enhanced with the support and participation of Health Committees of Council. The committee notes that 2018-19 funding allocations for health committees remain unchanged from previous years. While a number of programs are available to provide additional funding in such areas as counselling or food security, in some cases community groups require additional support to access them. The department's Office of Patient Relations has been suggested as a contact point for communities and individuals requesting additional services and programming at the community level. However, it has been noted that more work needs to be done to promote the office's role in addressing such matters.

Mr. Chairman, that concludes my opening remarks. I anticipate that individual members will have questions and comments as we proceed. Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Nakashuk. I will now open the floor for general comments, but before I do, I would like to remind members that wherever possible to save your detailed questions when we get to the page-by-page review. Are there any general comments? Mr. Hickes.

**Mr. Hickes:** Thank you, Mr. Chairman. I would first just like to take a little quote from the budget address that was read on Monday. In the Inuusivut on page 3 of 13, it states, "along with our recently approved capital plans and existing operational budgets, we will be taking steps to bring back our elders to our territory by seeking partnership arrangements to build facilities and services in Nunavut. As a start, we will increase operational funding for the existing elders' homes' by \$855,000 annually."

Mr. Speaker, that statement led me to believe that there were going to be increased services, maybe potentially more beds available, yet in the minister's opening comments on page 6, it speaks to uncontrollable cost budget allocation, where on page 7 it states operational funding for elders' homes, \$855,000.

Mr. Chairman, what is the story behind this \$855,000? Is it something we're celebrating as the government projected in its budget address, or is it just meeting the status-quo due to unforeseen uncontrollable expenditures? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Hickes. I will allow the question. Minister Angnakak, if you could, please.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. In response to the member's question, we got a million dollars from Family Services when we took over the homes, but we required more money than that to raise the standards because when assessments were done on the facilities, when we took them over, work needed to be done. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Hickes.

**Mr. Hickes:** Thank you, Mr. Chairman. I'm aware of that. My issue is with the government selling this increase in the budget and allocation as an increase in service as a positive selling feature of their budget, yet it's classified here as an uncontrollable expense. I have an issue with the terminology that is used on behalf of the government. What other aspects of the budget address are uncontrollable expenses that are hidden in with good news stories? Thank you, Mr. Chairman. It's just a comment.

**Chairman:** Thank you. Comment taken. Mr. Main, you had an opening comment. Go ahead please.

**Mr. Main:** I have a question to the minister's opening comment, is that allowed?

**Chairman:** Thank you, Mr. Main. We were hoping not to ask questions on the opening comments. If you can refer the question that you have on opening comments to a specific page in the budget, then you can ask your questions at that time. Right now, we're asking for general comments. You're okay? Mr. Akoak.

**Mr. Akoak:** Thank you, Mr. Chairman. I just need a clarification on sentence. I don't know if it is complete. It's on page 3. It says these funds will allow us to expand and standardize community-based mental health and addiction treatment options from medical detoxification to peer support. I'm having a hard time understanding that, whether it's a complete sentence or not. Thank you.

**Chairman:** Thank you, Mr. Akoak. Minister Angnakak, if you could please clarify your opening comments.

**Hon. Pat Angnakak:** Thank you. This refers to extra PYs in the community. Thank you, Mr. Chairman.

**Chairman:** Thank you. Were there any more opening comments? Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. As was stated in 2017-18, the Department of Health had come forward for supplementary appropriation of \$50 million, which brought last year's budget up to \$402 million, which is 10 million less than the budget is requesting. I would like to quote Ms. Angnakak in her previous role as asking, "Can we expect the budget will be sufficient or if the Department of Health will be coming back for a supplementary appropriation later in the fiscal year?" Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Lightstone. Again I want to remind members that we were not trying to ask questions during this; it was going to be opening comments and you to ask your questions when we get into the budget itself. Minister Angnakak, if you want to answer that, please.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. I guess that's the one very difficult thing about health. It's very hard to control how sick or how well or whatever people are going to be. It's something that you never know from year to year. Are you going to need 95 medevacs in one month again or are you going to do two? These kinds of things are hard to control. It's one of these expenses that you really hope that you don't have to come back for more. You hope people are going to be healthy enough that you can live within the budget that you have, but it's very difficult to do that with health. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak, you had an opening comment? Please go ahead.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. I just have an opening comment on your first paragraph, "For the 2018-19 fiscal year the Department of Health proposes a budget of \$392,660,000...from last fiscal year, and includes the creation of 26.5 net new positions."

My comment here is there are 25 communities within the territory of Nunavut. The concern that I have and the comment I have is 26.5 net new positions, will that be widespread in all of Nunavut and it's just a comment. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Mr. Main.

**Mr. Main:** Thank you, Mr. Chairman. Just as an opening comment, I think we all understand how important the work is that the department does. As we begin this consideration, I would like to acknowledge all the hard work that's being done across Nunavut by public health professionals, be the nurses or doctors. It's incredibly important work and the importance of that work that they do extends to our work here in the House.

I would like to echo my colleague's comments. A note here in the opening comments says, "...the department's focus will be on the enhancement of health care services for all Nunavummiut," all Nunavummiut meaning residents of Whale Cove, meaning residents of Arviat, even though neither of those are regional centres.

I really look forward to working with the department in terms of addressing the needy communities in terms of where the real health crises are occurring across Nunavut. It may not be in regional centres and it may be more expensive to address them at the source, but I believe that it needs to be needs-driven. That's the end of my comment. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Main. We will now move on to the page-by-page review of the Department of Health, starting with the Branch Summary of Directorate on page H-4. Ms. Kamingoak, you had a question? Please go ahead.

**Ms. Kamingoak:** Thank you, Mr. Chairman. Concerns are consistently raised about the services provided under various contracts held by the Department of Health for such programs as medical boarding homes, emergency medical travel, and scheduled medical travel. What process does your department follow to ensure that services, conditions, and other obligations are being properly provided for by the different contractors? Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Kamingoak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Thank you to the member raising this. This is something I have talked about in the House before. It's not always an easy thing to manage. As everybody knows, we administer the contract, so it's not ours. We try to hold contractors accountable to the agreement that we have with them through meetings, through letters, and through follow-up. We try to have regular meetings and on top of that, if concerns come up, then we call for a meeting to discuss that concern. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. We are on Directorate. Mr. Akoak.

**Mr. Akoak:** Thank you, Mr. Chairman. Good afternoon minister, staff. One of the priorities in your draft business plan for 2018-19 indicates that your department will work with partner departments to determine options to invest in infrastructure such as addictions treatment and elder care. Can you provide further details on what options are currently being considered in these areas? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Akoak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. One example I could give is, we are working with NTI and the federal government. We are doing a feasibility study on addictions, and so, this is a combined effort and we want to look at building an addiction

centre. We are in partnership with that and looking at how we are going to work together for the goal of building the addictions facility in Nunavut. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Akoak.

**Mr. Akoak:** Thank you, Mr. Chairman. I am always referring to my community, as before, and will keep referencing my community towards mental health. Are any such facilities coming up sometime soon, within the area of mental illness. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Akoak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. That is a capital question. Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Akoak, you have no other questions? Okay. That's fine. Moving on, Ms. Towtongie.

**Ms. Towtongie:** Thank you, Mr. Chairman. Your draft 2018-21 Business Plan lists a number of priorities which focuses on expanding or enhancing healthcare services such as tele-health. Can you provide some examples or services that may be expanded or enhanced in the coming year? Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Towtongie. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Some examples can be our OR expanded services, tele-health, like psychiatric services, and audiology. So, those are the kinds of services that we are looking at right now. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Ms. Towtongie.

**Ms. Towtongie:** Thank you, Mr. Chairman. Concerns are consistently raised about the service provided under various contracts held by the Department of Health for such programs as medical boarding homes, emergency medical travel, and scheduled medical travel. What process does your department follow to ensure that services, conditions, and other obligations are being properly provided for, by the different contractors? Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Towtongie. I just want to remind you that that question was already asked by another member. So, with that, if the minister has anything to add, I will let her do that. Ms. Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Yes, I did answer, but I could answer it again and I could even add to it, perhaps.

The first thing we do is we ensure that we have proper meetings. We administer the contracts. If there are problems with the service under the contracts, we need to address those right away. We have regular meetings and if concerns are brought up, then we make sure that we have a meeting with the contractor to ensure that these concerns are being dealt with.

We also do a few other things and, that is, reviews of some of the programs that complement some of the contracts that we have, such as the boarding home, like the *Medical Travel Policy*. We're doing reviews there and we're also reviewing the programs under medical travel.

How we're addressing things is having meetings, making sure that we're doing proper reviews, and making adjustments when we need to because we need to move forward. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Netser, you had a question? Please go ahead.

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

I believe we're talking about medical travel clients who are sent to Winnipeg or Ottawa. Can we ask those questions on this page, Mr. Chairman? Yes, he nodded.

With that, the medical travel line item is increasing every year and the Department of Health requests supplementary appropriations for over-expenditures on medical travel. I keep hearing repeatedly that when people are running out of their medication, they go to the nurses to say that their medication is going to run out. They try to let the nurses know that before the medication is gone. Once they run out and the community doesn't have any particular medication available, they have to send the patient out of the territory. It's very expensive because life is valuable.

Mr. Chairman, I believe that we would save money if the nurses know when the medication is going to be depleted. If they pre-ordered, they would save a lot of money. Mr. Chairman, I don't know what the process is with the nurses. I know they do very good work. How can we help to improve their work to save costs? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Netser. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Chairman. Yes, you are entirely truthful with that. We have to keep monitoring the problematic areas that cause issues. We want to lower the funding levels currently required, as obviously all members want to keep a control on the health funding.

However, there are many issues that aren't obvious, and the only way to know is to be informed of concerns and myself as the minister, I want to be kept informed by my colleagues, and in that manner, we can work to resolve these challenges.

With respect to the issue you mentioned, I can perhaps use this example. Perhaps we can discuss it further, outside of the Chambers, as some issues surrounding privacy require that they not be divulged, as we have to keep it confidential. If you know of an actual individual who felt that they didn't receive the services or assistance required, or if they need extra help I would like to be informed so that we can deal with the issue. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Netser.

**Mr. Netser** (interpretation): Thank you, Mr. Chairman. I also thank the minister. Mr. Chairman, we don't just voice concerns that crop up in our minds, as these are individuals who have experienced them, and we try to speak to these concerns in the House.

If the supervisors or managers worked more closely with the local nurses, as many nurses are extremely capable and dedicated. We are proud of our nurses and grateful for their services, as they spend many hours working, and sometimes have emergencies to deal with.

Perhaps, it is due to this tremendous workload that finer details are forgotten, Mr. Chairman, but we also have to believe in the parents when they complain after taking their child or themselves to the health centre as they are trying to explain what is ailing them to the nurses.

Perhaps in some manner, some people are no longer believed or perhaps the issue slips from their minds. I wonder how we can further improve this situation so that it does not have to be dealt with by the MLAs, as we tend to deal with problems. If the process ran smoother within the health system, we would not have to deal with these issues. Thank you, Mr. Chairman.

**Chairman** (interpretation): Thank you, Mr. Netser. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Chairman. Indeed, what I can say here is: yeah, these are serious issues that are important. If any problems are experienced by any of our residents, we can only resolve the issue if we are informed about the issue as well as the exact cause of their concerns. It can apply to any matter, and we can only fix problems if we are informed. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak** (interpretation): Thank you, Mr. Chairman. Madame Minister and your officials, welcome. My first question is: in your department, there are 26 new PYs

identified for fiscal year 2018-19, this is despite ongoing difficulties in filling positions that already exist, or positions that have never been filled.

Now, with the *Turaaqtavut* Mandate now in effect, and the numbers of Inuit employees that need to be hired to reach the representative level, but yet the percentage has never passed 58 percent and it has never increased. Can you describe the steps being taken to address the lack of full-time staff? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Chairman. Yes, this is very important to us as well. We urge Inuit to take training or further their education for nursing, optometry, or any positions that are in Nunavut within the health field. We will always try to support them. We support them through funding for the people who go to the Arctic College courses. We also work with Arctic College, and since 2016-2017, we have created 89 positions. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak** (interpretation): Thank you, Mr. Chairman. Yes, I am aware that new positions were created in the past years, nonetheless, I want to use this example specific to the Kivalliq region.

As one of the MLAs from the Kivalliq region, obviously we speak to health concerns consistently, as concerns related to the health system abound with many patients in the Kivalliq region experiencing these issues, or so it seems when speaking about health issues.

I believe that part of the problem within the system is the need to understand Inuktitut medical terminology related to health care. Now, I would like to ask: out of these 26 new PYs, which positions are identified in this area? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Chairman. I'll read through it, they are written. Some of them will be filled by Inuit. (interpretation ends) Two public health nurses, two OR nurses at the hospital, two PYs for cannabis work. That's going to be at the headquarters here and they might be filled by Inuit as well. That's the target. We have an environmental health officer for Rankin Inlet, audiologists for the Baffin region, and a half-time NunaFam coordinator position. That's the 26.5 positions. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak** (interpretation): Thank you very much, Mr. Chairman. I thank the minister for clearly identifying the positions. During the question period today, I queried

the Premier on the usage of Inuktitut in responding to residents and to increase the usage of Inuktitut.

The Inuit of Nunavut are the clientele being serviced by our government employees, and Health incurs the largest expenditures out of our budget. Now, with respect to these new PYs being created, will it have a requirement for bilingualism where they have to speak both Inuktitut and English, or are they still under consideration? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. This is a difficult question because we want to promote the language. We want people to speak it because we're in Nunavut, but it's going to be very difficult for the Department of Health when it comes to some of our staff. I think that's a challenge, but maybe it's something that could be worked out over the coming months. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

Mr. Mikkungwak (interpretation): Thank you very much, Mr. Chairman. Due to that reason, this is why we maintain that we want more Inuit employees within our government, and we continue to voice this concern.

This is why I am asking about this matter here. Further, we have to ensure that Inuit understand especially the unilingual Inuit, as they require a better understanding and I support this initiative. As well, since Nunavut was created, several language related legislation has been passed, and that is why I am asking about the positions, that are new.

Sometimes, and I will use this example here: mental health professionals who arrived into the community and who can only speak English, and when complex medical terms are used, many patients don't understand the discussion taking place. Also, some Inuit prefer to use their mother tongue as they can open up about their health concerns especially when experiencing stressful situations.

With that in mind, that is why I am asking questions on this matter. As well, privacy issues and confidentiality have to be better explained to Inuit, and to use this example related to the health centre. There are pieces of legislation and policies related to confidentiality in all departments and nothing confidential can be discussed in the workplace. With health being so intrinsically linked to one's life, they need to better understand this matter. That's why I'm saying that.

This other issue I want to ask about here, and I will use this example. I was a member of the Fourth Assembly, and I actually experienced it firsthand. Kivalliq residents have to fly down to Manitoba, while Kitikmeot residents fly to Alberta, and Qikiqtaaluk residents are flown down to Ontario.

However, my question which I want to ask relates to Inuit who require medical services, and when funding separate from the federal health funding is required to address their health concerns at a different hospital. If they are being sent to a different hospital, it is usually due to their medical condition.

I wonder how the federal government has been apprised since you work together to address health services for Nunavummiut, has the government submitted funding requests, or developed plans for future funding improvements to our current health system? Thank you, Mr. Chairman.

**Chairman** (interpretation): Minister Angnakak.

**Hon. Pat Angnakak:** Thank you. Maybe I would like to respond to the language thing a little bit more. (interpretation) If we had a mental health professional or other health related professions, if they are Inuit or can speak Inuktitut fluently, and are capable of providing these services, we would prefer to hire them and they would be prioritized.

However, to use the example you used related to mental health, we don't have that category of health service provision, which is why we usually have to hire a non-Inuk or a professional from down south to provide mental health services and sometimes that is our only choice.

We prefer not to do that, but when you have no choice you have to take what is available. Since there is currently no mental health professional who is fluent in Inuktitut that is impossible. Further, related to your comments about confidentiality and privacy issues, all employees have to sign a confidentiality agreement that outlines these requirements.

If one is to work at a health centre, then certain rules apply. Many cases are confidential, and medical matters should not be discussed in any matter. They are well aware of that requirement. Now, if you became aware of an actual incident that occurred, or if confidentiality was breached, you have to inform us immediately.

Regarding the last part of your question, perhaps you can clarify what you meant or to rephrase the question as I didn't quite grasp your question. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. I thank the minister for the responses. When we look at major concerns of health services for an individual going into a hospital and being diagnosed with cancer, and the treatment program is, for example, in Kivalliq. There is supposed to be a cancer-care program in Manitoba, but it is not meeting the needs, so the client has to be transferred to an Ontario treatment program. How do you work with your federal counterparts to access additional health funding in that regard? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. I was just advised that there is no extra money. It is something that is part of the funding that we get from Health Canada. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. When you look at no additional health funding from the federal government, where do Non-Insured Health Benefits come in? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. That is extra things. Like, we have health care, running of the hospital, and then we have extra, such as dental, vision, medical travel. Those are all under NIHB. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. Moving on, regarding your opening comments on page 3, what my colleague had mentioned regarding mental health and addiction treatment options from medical detoxification to peer support. With that sentence line do you have established treatment facilities that are currently providing treatment for people with addiction problems and is that made available and known to residents of Nunavut? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. One of the things I mentioned earlier was our work with NTI. We're looking at expanding services, including the addictions centre that we want to build, but on top of that, we're looking at developing mobile mental health treatment that we can go into the communities with.

We also have on-the-land addiction programs currently. We provide contribution agreements to the hamlets to provide addiction services as well, for those that want to access it. If you look at H-7 of the main estimates, you'll see two areas there, and there are alcohol and drug treatment programs in the Nunavut suicide prevention strategy. Within those, we also provide mental health counselling. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. Thank you to the minister for providing a heads-up on a particular branch summary, which we still have yet to get to. The question I have when I refer to that, your opening comments, I'll rephrase.

You could have all these infrastructures, treatment centres and whatnot in place and what Department of Health and NTI are working towards for the future and the benefit of

Nunavummiut. The question I have now is in that particular sentence, it states, “standardized community-based mental health.”

Are you indicating that you have mental health and addictions workers in each and every Nunavut community? On top of that, so that Nunavummiut can understand, do you have bilingual staff to ensure that they are aware of those services that are available to Nunavummiut? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you. No, not everybody can speak Inuktitut; mental health workers, but if they’re hired from the community, then yes, most often they are, but sometimes we can’t do that. We have community mental health and addiction workers and they provide practical help and individualized support for clients.

There’s a whole range of services that they could provide, and almost all communities today have a mental health nurse or somebody that can provide counselling and our healthcare, except for Chesterfield Inlet, but that position will be filled June 10. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak, you’re okay? Moving on. Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I’ll start off by following up on my colleague’s questions. How many of those mental health staff are permanent employees, how many are casual, and how many are contract? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. We don’t have the information on whether or not they’re indeterminate or casual, I’m afraid, but we do have the total number of positions filled, and filled is 92. Last year, at this time there were 73 positions filled, so now we have 92. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** (interpretation) Thank you, Mr. Chairman. (interpretation ends) I thank the minister. That’s great to hear that the numbers are increasing because I think we can all agree that’s very important work in terms of mental health.

In terms of the picture, looking at it territory-wide, you mentioned in your opening comments, in terms of public health nurses, decreasing the demands in our community health centres. What type of statistics does the department track in terms of the Directorate to look at the territory and say, “Look, we’re making progress on our health issues or we are not making any progress or things are getting worse.” So what types of key indicators are we looking at and if she could share some of those? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. It's an area that we need to work on. We are not where we want to be. We are not able to track what, at this point, but we are working on it. We are coming up with a system that can better track things. Apparently we track diabetes and cancer but there's a whole range of other things that we are unable to track at this time. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** (interpretation) Thank you Mr. Chairman. (interpretation ends) If the minister could maybe elaborate a bit further on that. What prevents you from tracking the key indicators? With regards to the ones that are tracked, cancer and diabetes, if she could share the trends. (interpretation) Thank you Mr. Chairman.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. We just don't have the infrastructure in place to do it right now but that is what we are working towards. There are some regulations that will require us to track some of these statistics. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you. With regard to cancer and diabetes, if she could share the indicators and maybe the trend? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. They're available online. Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Main.

**Mr. Main:** Thank you. The main estimates are also available online, I believe. Can the minister share with us what the trends are in terms of cancer and diabetes? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Colorectal cancers and lung cancers are the highest cancers we have here. Diabetes, I think is slowly rising. It's something to watch. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you. I thank the minister. It mentions on the Branch Summary here that Directorate is responsible for leadership and coordination in the area of overall departmental quality assurance, so again, I'll ask for indicators. What types of indicators are being tracked in terms of overall departmental quality assurance and I would appreciate whatever numbers the minister could share. Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. The program is actually just starting so I don't have a lot of numbers for you. We are just trying to staff-up the unit so that we can do better tracking and that. So, it's a little too early to provide you with that. The next time we are sitting here, maybe a year from now, we'll have enough time to really give some stats. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you. That would be very useful. When it comes to contracts, because my understanding is that the contracts fall under this branch. Particularly boarding homes, when Department of Health staff go to visit boarding homes in terms of administering contracts, how frequent are the visits to the boarding homes in terms of inspections? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. There's a meeting every quarter. As I said earlier, if there's a concern that comes up that we feel that the contractor is not doing a good enough job at, then we will call a meeting on top of those. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you. Are those quarterly visits to the boarding homes scheduled or are they spot, like unscheduled? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. They are scheduled, but if an issue arises, then you don't know when that's going to happen. When it does occur, that's when they have additional meetings. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you. I wonder if the department would be able to look into the practice of unscheduled spot checks in terms of these medical boarding homes. It has been brought to my attention that when special visitors are anticipated for boarding homes, things such as very thorough cleaning and special things happen for special people, but

then for the ordinary medical travelers who are going there on a regular basis, they don't necessarily get the same treatment. Would the department be able to look into putting this practice into place? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Yes, that's very important and that's why we have our environmental health officers meet and they don't tell anybody they're going there, and then they go there and make spot checks. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** These are environmental health officers. Are those the folks who are administering the actual contract or are they specifically just looking at things like the kitchen and whatnot? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. No, they don't administer the contracts. They're there to do specific tasks, to see how clean things are or other things like the kitchen. They will go in and make sure that rules are being followed because there are rules to follow when you operate a kitchen such as that. Every jurisdiction has their own environmental health officers and in fact that's one of the asks. One of the 26 positions that I mentioned was the environmental health officer. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you, Mr. Chairman. I'll keep on the topic of contracts. When it comes to dentistry contracts, is there a lot of competition that's happening for the dentistry contracts? I don't want my constituents to be getting the bottom of the barrel when it comes to a dentist. I want to see multiple companies in there competing to serve my constituents. Does the department have any indicators or information to share in this regard? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. I know this has been a subject that's of interest to many people. We issue an RFP out. That's how we choose at the end of the day as to who is going to administer dental care within Nunavut.

Somebody could go into a community and set up a private business and be there, and they would bill the federal government. Where our dental contracts come into play is for a lot of the communities that don't have their own private dentist...well, all of them. Iqaluit is the only one that has a private dentist here.

We maintain three contracts, one in each region, and they provide dental services in all Nunavut communities, with the exception of Iqaluit because, like I said, we have two private dental clinics here. In the Qikiqtaaluk and Kivalliq regions dental services are provided by Nunavut Innovative Health Solutions, and that's through two separate contracts. Both contracts were extended to May 31, 2018, that's today. The Baffin contract has been extended for one additional year until May 31, 2019. A new RFP for the Kivalliq region was issued on October 27, 2017. It had a closing date of November 30, 2017.

Subsequent to that RFP, a new three-year contract for the Kivalliq region was awarded to the Nunavut Innovative Health Solutions, with provision for the possibility of three one-year extensions, and it will begin June 1, 2018, that's tomorrow.

In the Kitikmeot region, dental services are provided by the Aqṣarniit Dental Services. This three-year dental service contract ends August 31, 2018. However, there is a provision in the contract for a possibility of three one-year contract extensions. This contract has been extended for one additional year until August 31, 2019. Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Angnakak. We appreciate all the information you provided us, but you did not answer his question. His question was when you issue an RFP, how much interest do you get in the RFP in replies? Is there like only one reply to these RFPs, or there are dozens? How much interest do we have in this? Thank you, Ms. Angnakak.

**Hon. Pat Angnakak:** We're not sure if we could disclose that or not. Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Angnakak. It's an RFP, I think once an RFP is issued, doesn't it show up somewhere in the contract's award that you could see who exactly bid on these contracts? Thank you, Ms. Angnakak.

**Hon. Pat Angnakak:** We don't have that information, so we'd have to get back to you. I'm sorry, we didn't know if he asked about how many people applied on the RFP. We can get back to you on that. Thank you, Mr. Chairman.

**Chairman:** Thank you. We weren't asking for exact numbers, I think he was more or less trying to get a feel for if there was multiple that want it, but we'll leave it at that. I'll go back to Mr. Main. Mr. Main.

**Mr. Main:** Thank you, Mr. Chairman. I guess I'll get specific. Under that new contract, will my constituents be able to access root canal services? The issue my constituents are facing is a dentist comes to town and they have an infected tooth or abscess tooth, and the dentist tells them we only do extractions. It's quite sad, actually. Under this contract, is a root canal covered, and where would it be offered? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Yes, it really depends on the person and the treatment plan. If the dentist is part of the treatment plan was to do a root canal, then they should be able to do it. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you, Mr. Chairman. I'll follow up on that specific issue at a later date perhaps. In terms of the department as a whole, this is all about the department's expenses. Has the department looked at, when it comes to encouraging things like healthy eating, has the department looked at any initiatives shared with the Department of Finance such as looking at the idea of a tax on sugar? It's maybe not the most popular idea, I admit that I enjoy soft drinks once in a while. I know that it's being looked at in other jurisdictions. Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. I, too, have heard of that in other regions. In fact I have heard some people talk about it here, but we ourselves haven't had that discussion with Finance, who would be the one to impose that tax. Maybe it's something that we should be looking at. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you, Mr. Chairman. I'll be careful how I talk about this next one because I understand that every dollar that we can put into our health care and the health of our residents is a dollar well spent, but this is close to \$400 million we're talking about. Are there any areas within the department where opportunities for less expenditure have been identified? We look at that \$400 million. I don't think that we would imagine for a second that every single one of those dollars is equally important in terms of what they go towards. In terms of areas within the department that may be discretionary or targeted for efficiency, maybe we can do the same job but do it cheaper. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. There are no discretionary funds, but we are working towards using less if we can and that's through telehealth. If we can do more through telehealth, then it means less people are travelling out of their community, which means we don't have to pay for so many airfares, boarding home fees, and such. As I stated in my opening comments, we also opened a second OR. Instead of sending more people away, we want to do it in-territory. It's cheaper that way. We're looking at other contracts too to see where we can save money.

Did I have any other ideas on this? Did I forget anything? Okay. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you, Mr. Chairman. Continuing with that line: how does the availability of services provided out of Churchill, Manitoba fit in? Is there any opportunity for us to, again, provide the same level of service or better, maybe? How is Churchill being considered? It's my understanding that the department currently operates a boarding home in that. It's a GN asset. That's my understanding. I would like to understand if it's being looked at in terms of improving things for my constituents. Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you. Yes, Churchill is on our radar. We're looking at it and we're discussing things with Churchill. It's not always the cheapest place to go to. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main:** Thank you. Thank you, minister. If Churchill isn't necessarily the cheapest place to go, just to make sure I understand correctly: under the costs that are being charged to the department by folks running health services in Churchill, is it cheaper to send people to Winnipeg in some cases? Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. It really depends on what kind of service we're talking about. For example, when it came to the children who go there for their dental care... I think it has already happened where this summer we're sending children to Hay River. They did a cost analysis. It was a lot cheaper to send the Kitikmeot children to Hay River than it was to go Churchill.

We often talk in the House about where we can save money. Well, we've got to look at those things too. Where can we save money? If it means going to Hay River rather than Churchill, then that's what we should be doing. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. I'm very proud of the Department of Health. You were looking for ways to save money, so that's great.

My last question will be about privacy, like my colleague asked about earlier. How often does the Department of Health get notified about privacy related complaints? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): We don't hear very many of those, but if we do hear that, then the privacy commissioner is notified right away as to what happened and the complainant is spoken to. Thank you.

**Chairman:** Thank you, Minister Angnakak. Mr. Main.

**Mr. Main** (interpretation): Thank you. (interpretation ends) My last question is on medevacs. Again, trying to do things as cheaply as possible; medevacs cost tens of thousands of dollars as soon medevacs are called in.

Is there a tracking of medevacs? What I'm thinking of is there a list anywhere that says: medevac, reason: ATV accident or heart issues. Is there a list of that sort? In my mind, that would allow for an analysis to see, in hind sight, where we could've sent that person out three weeks earlier and avoided sending them out on a medevac. Thank you.

**Chairman:** Thank you, Mr. Main. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Yes, we are tracking that, and it's looked at frequently. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Qirngnuq, you had questions? Please go ahead.

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. First of all, I would like to welcome the minister and her officials. I have a question under page 4. In 2018-19, the budget for the Department of Health has increased by approximately \$15 million. Can you explain that a bit for me? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Qirngnuq. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Our increase from our budget last year to our increase to our budget this year, under that is the reason for the increased amount. Thank you.

**Chairman:** Thank you, Minister Angnakak. Mr. Qirngnuq.

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. Is the increase for the PYs or is it for materials and supplies, such as computers? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Qirngnuq. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. It was for the boarding homes. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Qirngnuq.

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. I keep hearing questions and responses in regard to the cost-saving measures. Due to lack of knowledge, I believe the other way around. If the department doesn't spend as much money, I believe there would be more illnesses out there. I believe that the public would be less healthy if the department received less funding. Let's be careful with that. This is just a comment.

Secondly, I would like to ask a question. In your business plan on page 136 under HR, can the minister explain further how this will provide support? I'm asking that question to get clarification, Mr. Chairman. Thank you.

**Chairman:** Thank you, Mr. Qirngnuq. Minister Angnakak.

**Hon. Pat Angnakak:** I'm not really sure what the question is. Thank you, Mr. Chairman. Under HR that's all our hiring of our nurses. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Qirngnuq.

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. Yes, now I understand what this will be used for, for the hiring of nurses. We call the nurses "munaqhiit" rather than "najanguaq." I believe we shouldn't decrease the number of nurses as there is a possibility that there could be more illnesses out there. That's what I envision if we reduce the number of human resources.

I'm not sure if we're on the appropriate page to ask this question, but I believe it would be better if I ask this question on the next page in regard to TB. Mr. Chairman, let me know if I'm on the wrong page. In regard to tuberculosis outbreaks that we have seen and looking back to 1946, there have been TB patients that have been sent out from the north. I believe that TB was almost eradicated, but it's coming back now.

What kind of work are you doing to prevent the spread of tuberculosis? I know that your department is working on it. What kind of work are you doing on TB prevention? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Qirngnuq. Just a reminder that we are on Directorate and you're asking a question under Public Health, but that being said, because your preamble was quite long and I don't want you to repeat it when we get to that department, I will allow the question for now. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. (interpretation) Yes, the issue of tuberculosis is very important. We will continue to work on that issue in partnership with ITK and the federal government. We will work together in partnership because I know that we can eradicate tuberculosis. I'll read in English as to what we do as the Department of Health to deal with tuberculosis.

(interpretation ends) Nunavut has a multifaceted tuberculosis prevention and control program following the Canadian TB standards. Components include management of

active TB disease cases, contact tracing, and outbreak investigations. We do screening for latent tuberculosis infection and active TB disease. We provide surveillance and data management. We do laboratory diagnostic capacity. We also provide education and training of health professionals when it comes to TB. We also do community-based awareness programs. We monitor and provide evaluations. We provide measures in high-risk settings. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Qirngnuq.

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. Thank you, Madame minister, for explaining that. Just to supplement the question that was posed by the Member for Arviat in regard to dentists. I know that the minister spoke about having two private dentists that they utilize. Have you considered in Cambridge Bay or Rankin Inlet in Kitikmeot and Kivalliq, and looking at them since they are the centre points of the whole area? Have you considered getting dentists in those communities? I hope I am coming across. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Qirngnuq. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Chairman. If the community wanted to get a dentist themselves, then they are able to obtain their own private dentist. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. Before I get down into the nitty-gritty questions, I just want to say “hello” to Ms. Angnakak and her officials, Ms. Stockley and Ms. Kabloona.

I would like to point out something that I noticed recently; the Department of Health had advertised an ADM interim position, which I was very happy to see. I applaud the Department of Health for taking the initiative and putting out an interim for such a senior-level position. I hope you will find a great candidate for that position.

For my next question, I will switch over to the Inuit employment plans for the department on page 150 of the business plans. I have to state that, although you have taken some initiatives, it seems the department is very ambitious in their Inuit employment plans, as you have set a target by the 2018-19 fiscal year of 602 Inuit employees within the department, which is an increase of 263 new Inuit employed within the department. I would love to see that happen, but I would find it very difficult for the department to accomplish.

I would also like to point out the return to my written question on education leave; the Department of Health had a total of six employees on education leave as of March 31. Unfortunately, only one of those employees was a Nunavut Land Claims Beneficiary. Is

the department going to take any initiative in the upcoming fiscal year to try and increase that ratio? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Lightstone. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. Yes, we always want to support our staff if they want to go education leave, and we have a program to do it, then that is something that we would support.

Our target this year for 2018-19, 125 positions we have targeted to hire. Thank you. Oh, I should also add in these numbers here, we have a lot of Inuit that are in casual positions that we want to put into indeterminate. That's part of the story that we see before us. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. I'd like to continue on the education leave questions. Of these six employees that are currently on education leave, what type of courses are they taking? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Lightstone. Minister Angnakak.

**Hon. Pat Angnakak:** Can you hold on one second? We don't know all the positions but one is a nurse for sure, just about to graduate and one is taking an Admin course in the south. Thank you, Mr. Chairman, and we could get the other information to you later on. Thank you, Mr. Chairman.

**Chairman:** Thank you Minister Angnakak. Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. Looking at the December 31, 2017 Nunavut employment numbers, there is a total of 89 percent of those are Inuit and 28 percent in the para-professional positions. What are you doing to encourage those lower level positions to take advantage of the Education Leave Program in order to move up? Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Lightstone. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. We encourage them through the Education Upgrade Program and also mental health counsellors in the communities. We want to try and encourage that. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. I'd like to return to Mr. Mikkungwak's Inuktitut training for the department. It's been stated that it's a priority for this government to have a fully bilingual public service. I was wondering, of the 159

employees that took advantage of Inuktitut courses in 2017-18, how many were from the Department of Health? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Lightstone. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. We don't have that information but we can get back to you on that. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. The reason why I was asking is because I understand it would be extremely difficult to allow employees to take the time off, especially in healthcare centres or hospitals or public health centres. I was wondering how the department plans on encouraging their employees to take advantage of these language-training programs. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Lightstone. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. It will be challenging. We have a lot of overtime dollars already by nurses now. The shortage of our nurses across Nunavut is a concern, and where you can fit in language training will be a challenge. Yes, thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. I definitely agree it definitely is going to be a challenge, especially for the Department of Health. My next question is: when comparing the breakdown of the lines of business and the business plan to the accounting structure chart of the Department of Health, it's not an exact match where the programs outlined in the business plan don't line up exactly with the breakdown provided in the main estimates. I was wondering why that is the case. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Lightstone. Minister Angnakak.

**Hon. Pat Angnakak:** Can you give us a minute, please.

Mr. Chairman, could I get my Associate Deputy Minister, Karen Kabloona, to answer that question to do with Quality of Life? Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Angnakak. Ms. Kabloona.

**Ms. Kabloona** (interpretation): Thank you. (interpretation ends) I believe the member is speaking to the difference in the structure for the Quality of Life Secretariat. That is a correction that we will make in next year's processes. It is a new program area and we will work to make that improvement. Thank you.

**Chairman:** Thank you, Ms. Kabloona. Mr. Mikkungwak, you're on your second round and I'll advise you that on your first round you used over half of your time on preambles, so you could have asked all your questions when you had a chance. Please go ahead, Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman, for that reminder. The preambles really help to make the minister understand the situations that we have within our respective communities.

With that, my question to the minister is on her business case plan on page 136, third bullet of priorities for 2017-18, "Implement the transition of responsibility and accountability for elders' residences...Status...Arviat, Baker Lake, and Iqaluit." Can the minister elaborate a little bit more on the elders' residences regarding those respective communities? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. As the member might remember, the elder long-term care was under the Department of Family Services. That was transferred over to us and so that has been completed. I'm just reading my briefing note here.

The transfer of elder homes, the Department of Health provides a clear focus on seniors' care by assigning responsibility for the entire continuum of seniors' care to one department. Right now we have operational funding for the three elder homes and that's obtained through service contracts. For example, the one in Arviat is through a contract; it's run by a contractor. Renovations to the Iqaluit Elders' Home were completed in the spring of 2017. Additional work on Arviat's elder home is planned for the summer of 2018. The Baker Lake facility is also scheduled to have renovations there this summer as well.

In order to better support the elder homes in the delivery of services, the overall funding that was provided to the service providers by contracts, we increased it by 25 percent. This is the funding that was requested by a business planning process and that was for 2018-19 and ongoing and the supplementary funding processes for 2017-18. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. I thank the minister for her response. When we look at the Baker Lake one, when do you anticipate the renovations to be complete? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. We expect them to be complete late summer. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. So, with the renovations anticipated to be completed in the late summer, will the department, as part of operations and maintenance budget start working on the RFP so that contracts can be awarded prior to the completion of renovations, then you would have it all set in place prior to completion of renovations? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. I hear what the member's saying, and we're going to do that as much as we can. But, we've got to make sure that at least some of the renovations have been started to ensure that that is actually going forward before we do the other RFP, but we will try and monitor that so that they coincide with each other. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. Thank the minister for her response. Moving on to page 137 of your business plan, which refers to the elders' facility site, I presume. On the very first bullet, it also indicates prioritized new builds and renovations. So are there considerations of expanding the Martha Talirug Centre in Baker Lake, because on the property, there is room for the expansion of that facility. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. I think we're trying to address what is needed right now so that we can get elders back into that facility. We don't have any preplanning money set aside to do that, and that's what will be required if we are going to look at an expansion. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. When we're looking at operations and maintenance and renovations; the chairman can cut me off or the minister if she doesn't want to answer, can answer or state; on the south entrance, there definitely needs to be a wheelchair access ramp or a bed wheelchair ramp because sometimes they have to transport the elders from the centre to the health centre. Is that in the renovation plans, yes or no? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. We are now talking about capital projects, but if the minister wants to answer. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. All I can say is we'll consider what we can do with the money that we have. When we start adding all sorts of stuff, if it's not already there, we have to keep within our budget, right? Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak:** Thank you, Mr. Chairman. I'll move on. Business plan, page 137, third bullet from the top, "Evaluate medical travel programs to ensure effective service delivery." The minister will very well, undoubtedly, understand where I'm coming from, because I have brought up a lot of medical concerns and medical travel issues in question period in the House during the Fourth Assembly up to now, and having informed my constituents of Baker Lake regarding the Office of Patient Relations. When you're looking at the medical travel program policy review, will you get the Office of Patient Relations information to take a serious look at policy review, and maybe revising the medical travel program? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak:** Thank you, Mr. Chairman. We are doing a review. The review of the *Medical Travel Policy* is actually nearing completion. We're now focused on developing recommendations for a comprehensive, revised policy.

In the summer of 2017 we did public consultations in Iqaluit, Yellowknife, Winnipeg and Ottawa boarding homes. We also did public surveys in all official languages issued to Nunavummiut via the web and through paper copies. A jurisdictional scan was also conducted to evaluate medical travel policies in relevant provinces and territories to assess the best practices. The new Medical Travel Policy will be implemented April 1 of 2019.

Furthermore, we also did a medical travel review and we are currently assessing medical travel operations, practices, policies, staffing, organizational structures, and training. We want to ensure development of strong recommendations. Consultations are underway and we're doing that with key stakeholders both within and outside the territory. We have done site consultations with regional offices, health centres, and out-of-territory referral centres. That was completed in September.

The recommendations from this review will result in standardized management practices, consistent operational standards across the regions, consistent use of administrative forms, standardized and improved communications. We want a documented workflow that complies with the *Medical Travel Policy* and to identify training required for the Government of Nunavut's staff to comply with all recommendations of the review. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak** (interpretation): Thank you very much, Mr. Chairman. The fact that the *Medical Travel Policy* will be renewed is very rewarding since it is good news. If it can help assist our medical patients who need to undertake medical travel, and the reason why I raise this issue, is that in representing the residents of Baker Lake, sometimes you hear local radio announcements for fundraising for people preparing for medical travel.

They require funds for the travel to Winnipeg, accommodations, meals and taxis, and we are hearing more requests locally for this. I wonder why the Nunavut Health Care card isn't used to pay for these expenses. If this is getting improved, then that is good news.

Nonetheless, with the renewal of the policy, most Nunavut communities have existing hamlet health committees. Will this information be provided to the committees, so they understand the needs, or will local health centre staff provide this information in Inuktitut? For example, to use the Qikiqtani, Kivalliq and Kitikmeot regions, we all have different dialects so we need local knowledgeable Inuit who can provide this information in understandable Inuktitut? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Chairman. Yes, I agree with you. We will do that. To add further, we also have it on the website in regard to medical travel so that they can look it up if they require more information. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Mikkungwak.

**Mr. Mikkungwak** (interpretation): Thank you very much, Mr. Chairman. This will be my last question on this subject. Now, for our elders, there are two drivers that provide the transportation for them and some people are scheduled for surgery. The nurses provided instructions that prior to their surgery, they could not carry anything over 10 lbs. They get questioned if they have a person who can carry their luggage and this sometimes leads to misunderstanding.

I have seen cases where people who are unilingual in either English or Inuktitut sometimes face linguistic barriers when dealing with medical issues. What improvements have been contemplated for instructions from a doctor they need to follow? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Mikkungwak. Minister Angnakak.

**Hon. Pat Angnakak** (interpretation): Thank you, Mr. Chairman. Yes, we have heard about cases like that and we will also include it in the review. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Angnakak. Mr. Akoak.

**Mr. Akoak:** Thank you, Mr. Chairman. At this time I would like to report progress. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Akoak. We have a motion on the floor to report progress. The motion is not debatable. All those in favour of the motion. Thank you. Opposed. Thank you too.

>>*Laughter*

The motion is carried. Sergeant-at-Arms, if you could please escort the witnesses out. I will now rise to report progress. Thank you.

**Speaker** (interpretation): Thank you, Sergeant-at-Arms. Going back to the orders of the day. Report of the Committee of the Whole. Mr. Rumbolt.

### **Item 21: Report of the Committee of the Whole**

**Mr. Rumbolt:** Thank you, Mr. Speaker. Your committee has been considering Bill 4 of 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. Is there a seconder? Ms. Towtongie. Thank you. The motion is in order. All those in favour of the motion, please raise your hand. Thank you. All those opposed. The motion is carried.

Going to the orders of the day. Third Reading of Bills. Item 23. *Orders of the Day*. (interpretation ends) Mr. Clerk.

### **Item 23: Orders of the Day**

**Clerk** (Mr. Quirke): Thank you, Mr. Speaker. Just a meeting update, the Management and Services Board will now meet this evening at 6:15 in the Tuktu Boardroom and not tomorrow.

*Orders of the Day* for June 1:

1. Prayer
2. Ministers' Statements
3. Members' Statements
4. Returns to Oral Questions
5. Recognition of Visitors in the Gallery
6. Oral Questions
7. Written Questions
8. Returns to Written Questions
9. Replies to Opening Address

10. Replies to Budget Address
11. Petitions
12. Responses to Petitions
13. Reports of Standing and Special Committees on Bills and Other Matters
14. Tabling of Documents
15. Notices of Motions
16. Notices of Motions for First Reading of Bills
17. Motions
18. First Reading of Bills
19. Second Reading of Bills
  - Bill 7
20. Consideration in Committee of the Whole of Bills and Other Matters
  - Bill 4
  - Bill 5
21. Report of the Committee of the Whole
22. Third Reading of Bills
23. Orders of the Day

Thank you.

**Speaker** (interpretation): Thank you. This House stands adjourned until Friday, June 1, at nine o'clock in the morning.

Sergeant-at-Arms.

>>*House adjourned at 18:01*

