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If I may, Mr. Chairman and Member, in response to your last question, Member, we got two different approaches, so these are really well performing departments, and what's happening in Health is they are paying their person enough that they're happy to stay there so they can build that experience and knowledge, plus leadership from the top. It's a great combination. That's why Health is functioning well.

Community and Government Services did have a specific person before, but that person retired. Now the responsibility is primarily on the desk of a manager, but that's okay because that is somebody who really understands government, understands their department. A manager can typically be more efficient about how they go about responding to the request because they know exactly where to look and what they need to do, and then they can provide guidance to the policy analysts who are actually doing the hands-on work.

Two different approaches and then we're now on the verge of a third approach, which is the one that Executive and Intergovernmental Affairs is doing, and that is recognizing that the very small departments simply do not have the ability to follow the law properly. They just don't because they're not big enough, and access and privacy is something they might do once in a while. They don't develop that experience. They don't develop that feel for the files. The reason why the budget has gone up is so that they can have a central unit so that there are, for example, people who maybe develop that experience. If somebody goes on vacation, the files don't stop; there's

የዎታዎ ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል።

**ጠቅላይ ልማት ሚኒስትር:** ግን ይህንን።

**ጋራ:** (ጋራ ጉዳይ): ማረጋገጫ፣ ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል።

ማረጋገጫ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል።

**ጠቅላይ ልማት ሚኒስትር:** ግን ገልጼዎልኝ።

**ገልጼዎልኝ:** (ጋራ ጉዳይ): ማረጋገጫ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል።

**ጠቅላይ ልማት ሚኒስትር:** ግን ይህንን።

**ጋራ:** (ጋራ ጉዳይ): ማረጋገጫ፣ ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል። ልማት ሚኒስትር ለሰጠው መረጃ ለሌሎች ማሳተፍ ምን ዓይነት ስልጣን ለሰጠው ማረጋገጥ ይቻላል።



says that you have 25 business days to respond. Now, if it is a big request where they're asking for a lot of information or if they need to consult with another department, then they can maybe get another 25 business days, but that's what the law says is allowed.

As I said, Health always meets that deadline, so you know it's possible, but other departments sometimes, for reasons that I don't understand, don't even get started. They don't even seem to think about responding to the request until like day 20 or day 25, or I have had some files where a couple of months go by and they don't even touch it, and then it comes to my desk and I say, "What happened here? You know there's a deadline that you're supposed to answer. How come you didn't start working on it for two months?" There's not usually a good answer to that question. It's capacity; they were busy; they forgot; it was difficult, but those are not acceptable reasons under the law for not meeting the deadlines.

On the privacy side, it is totally different. Privacy, depending on what the problem is, is something that you need to deal with right now, like right away. If somebody is releasing information that they shouldn't release, you've got to stop that now. That part of the law says...the emphasis is really on acting quickly and they have to report it to me, like right away. When I say quickly, I'm talking about within hours, maybe within a day or two for the most serious ones, but no longer than that so that I can watch how they are responding to the request because the first thing to do when there's a serious privacy breach is to stop it and stop the information from getting out however it is getting out, doing whatever you can to contain the problem.

ፈጣሪ ለሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል።

**ፈጣሪ** (ጋንታባታ): ሰዓት ይጠይቃል። ገንዘብ ስጦታ።

**ገንዘብ** (ጋንታባታ): ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል።

ለሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል።

የሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል።

**ፈጣሪ** (ጋንታባታ): ሰዓት ይጠይቃል። ገንዘብ ስጦታ።

**ገንዘብ** (ጋንታባታ): ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል።

ፈጣሪ ለሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል። ሌሎች ጥያቄዎች ለመሰጠት ሰዓት ይጠይቃል።

We've had some files, I am pointing over to the folks from Community and Government Services because they're the ones who run the Government of Nunavut's computer systems, and for certain kinds of breach, the answer is to shut down a process or system or some kind of leak, or if I can call it a back door that somebody has found, and shut it down as quickly as possible, within hours. And they are very good at that stuff, I may say.

Do you see what I mean, Member, that on the access side, the deadlines are very different from how quickly you have to respond to a serious privacy breach. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you for that response. I feel there is a bunch of different rabbit holes I could go down. However, I just want to focus right now on something that you said regarding the \$25 fee. Is this something that is easily accessible to most Nunavummiut in terms of their ability, number one, the charge? Is that kind of the norm? Is there really a need for that fee? Number two, how easy is it to make that payment? Can a person pay it in cash? Can they pay it by credit card? Do they have to get a bank draft? Can they pay by debit?

The reason I ask these questions is because I have had constituents raise issues of concern about being able to access copies of birth records and other records that require payment that it's nearly impossible to request from Iqaluit without having somebody who can go over and make a payment because they don't take credit cards. If I could get a response to that, I would appreciate it. Thank you, Mr. Chairman.

**Chairman:** Mr. Steele.

ካህኑ ከሚሰጡት ሰነድ ጋር ማቆራረጥ ለማድረግ ለሚገቡት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

ርዕሰ ጉዳይ ሆኖ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

**ጠቅላይ ሚኒስትር (ጋኒትባህሪ):** ወይንም ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

**ጠቅላይ ሚኒስትር:** ወይንም ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

**ጠቅላይ ሚኒስትር (ጋኒትባህሪ):** ሲኒት 15 ምሳራ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

እነዚህ ሰነድ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። 10:30 ምሳራ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። 11:03 ምሳራ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

**ጠቅላይ ሚኒስትር (ጋኒትባህሪ):** ወይንም ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

**ጠቅላይ ሚኒስትር:** ወይንም ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል። ለምሳሌ ለሚገኙት ሰነድ ላይ ማስጠንቀቂያ ማሰጠት ይቻላል።

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**Chairman:** Thank you for clarifying that, Mr. Steele. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you, Mr. Steele. I'm happy to hear that the fee can be waived. That was another question I had written down.

Is the public information about how to access information and privacy as an individual sufficient? Do enough people know that it's free and immediate service related to concerns about breaches of privacy? Is there sufficient knowledge out there in the territory about people's ability to access their information? Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Steele.

**Mr. Steele:** Thank you, Mr. Chairman. I realize, Member, that I had forgotten to answer the second part of your previous question, so if you don't mind, I'm going to start with that briefly, and that was about payment methods.

Mr. Witzaney, I think, is probably better positioned than me to address that question because the payments go to the Government of Nunavut. If somebody wants to file an appeal that comes to me, there is no fee, so I'm not handling any money. I know there have been issues about payment methods, exactly the sort of issue that you talked about, Member, where somebody assumed that it is going to be easy to pay the \$25, and it's not. Finance is getting better about payment methods, but I don't think it's just quite as easy yet as it should be. Mr. Witzaney may have more information on that.

Your question this time, Member, was about: do people have enough information about their rights of access and their right to file a privacy complaint? I do not know the answer

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ᑲᑲᑦᑲᑦᑲᑦᑲᑦ ᑲᑲᑦᑲᑦᑲᑦᑲᑦ ᑲᑲᑦᑲᑦᑲᑦᑲᑦ

**ᐃᕐᕈᑲᑦᑲᑦ** (ᑲᕐᕈᕈᑲᑦ): ᕐᑲᑦᑲᑦᑲᑦ. ᑲᑦᑲᑦ ᑲᑲᑦᑲᑦ.

**ᑲᑲᑦᑲᑦ** (ᑲᕐᕈᕈᑲᑦ): ᕐᑲᑦᑲᑦᑲᑦ, ᐃᑦᑲᑦᑲᐅᑲᑦᑲᑦ.  
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**ᐃᕐᕈᑲᑦᑲᑦ** (ᑲᕐᕈᕈᑲᑦ): ᕐᑲᑦᑲᑦᑲᑦ. ᑲᑦᑲᑦ ᕐᑲᑲᑦᑲᑦ.

**ᕐᑲᑦᑲᑦᑲᑦ** (ᑲᕐᕈᕈᑲᑦ): ᕐᑲᑦᑲᑦᑲᑦ, ᐃᑦᑲᑦᑲᐅᑲᑦᑲᑦ. ᑲᑲᑦᑲᑦ  
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**ᐃᕐᕈᑲᑦᑲᑦ** (ᑲᕐᕈᕈᑲᑦ): ᕐᑲᑦᑲᑦᑲᑦ. ᑲᑦᑲᑦ ᑲᑲᑦᑲᑦ.

**ᑲᑲᑦᑲᑦ** (ᑲᕐᕈᕈᑲᑦ): ᕐᑲᑦᑲᑦᑲᑦ, ᐃᑦᑲᑦᑲᐅᑲᑦᑲᑦ. ᑲᑲᑦᑲᑦ  
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to that. There's no way of knowing for sure. Certainly, people who are regularly involved with government, like journalists and businesspeople who are maybe putting in bids for contracts, understand how government works and they would know.

Does the ordinary citizen have any idea about the access system or what to do if they believe their privacy has been breached? I don't know and it's not really for me to say because I consider myself to be like the referee in a hockey game. It's not for me to go out and advertise the access to information system. You don't see referees on TV saying, "Hey, buy tickets to the game." A referee is a referee. If somebody breaks the rule, the referee blows the whistle.

The people who run the system is the government and the departments, for example, the Department of Health. Do patients know that if they believe their privacy has been breached, there is a system and a process for receiving, investigating, and reporting on their complaints? I don't know, but that's really up to the Department of Health, not up to me. I am the referee; I am not the one who's actually running the game. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster, did you want me to go to the Executive and Intergovernmental Affairs witness to get the payment information?

**Ms. Brewster:** Sure, that's helpful, Mr. Chairman.

**Chairman:** Mr. Witzaney.

**Mr. Witzaney** (interpretation): Thank you, Mr. Chairman. (interpretation ends) If I can take a moment to clarify as well, we have two broad categories of requests for information. We have people who are

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**ልማት** (ጋንታቢ): ወይንም፣ ገንዘብ ነው።

































time for the government to respond to, yet we hear that in most instances, they're not meeting that deadline. Capacity issues can't always be an excuse all the time. I would like to get the government's position on why they can't meet the 25-working-day deadline. When the legislation was drafted, the government obviously thought that 25 days was a reasonable amount of time. Thank you.

**Chairman:** Thank you. Mr. Suvega.

**Mr. Suvega** (interpretation): Thank you, Mr. Chairman. (interpretation ends) *Qujannamiik* to the Member for that question. I think that the practices that have been used are fairly consistent with most jurisdictions. I'll start off with that.

On the capacity side of it, yes, there are a variety of examples of some departments that might not have capacity and those that have excellent capacity. I have also alluded to some of the work that we're trying to do as a central agency is to try to help to build that capacity and set some of those standards, but I think that what we have tried to do is adhere as best as we can to national standards, help each other out, and ensure that departments are meeting their obligations. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Savikataaq.

**Mr. Savikataaq:** Thank you Mr. Chairman. Sticking with the government side, we heard earlier that there is only one of the five positions for access to information that is filled. Is Executive and Intergovernmental Affairs fulfilling their obligations and capacity with only one permanent position out of five in that category? Thank you.

**Chairman:** Thank you. Mr. Suvega.

ბოლოდან დასრულებულია. წესდები, დროებით.

**დასრულებულია** (იხილეთ): წესდები. დარბაზის წევრებთან, კომისიის ბიუროსთან და მდიანთან. კომისიის წევრებს შეუძლია დაეხმოს, როდესაც დაეხმოს, როდესაც დაეხმოს. როდესაც დაეხმოს. როდესაც დაეხმოს.

**რო** (იხილეთ): წესდები, დასრულებულია. დასრულებულია. დასრულებულია. დასრულებულია. დასრულებულია. დასრულებულია. დასრულებულია. დასრულებულია.

**დასრულებულია** (იხილეთ): წესდები, რო. რო. რო. რო.

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have the ability to share that information because it is protected or private under the Act. What we really do focus on is ensuring that there's good education, promotion, communication, and prevention so that individuals and communities are making good decisions around how they can protect themselves and how they can promote good health behaviours. An individual, though, could ask for access to their own personal health information around their health status and that would be appropriate.

We have the rule of five. Especially in small communities where the potential of exposing individuals' information by sharing certain data, if it's under five, could risk that to an individual and so we wouldn't share that information, but often communities are very small and there is the trail of discussion and there is information and assumptions out there. Thank you, *Iksivautaaq*.

**Chairman:** Mr. Savikataaq.

**Mr. Savikataaq:** Thank you, Mr. Chairman. My understanding is that the person who has a communicable disease that no one else would know because it's private information, and I don't have an issue with that; it's private, but that person is not obligated to inform the people around them that they meet regularly that they could potentially be spreading a communicable disease? For example, if one of us here had tuberculosis, we're not obligated to tell anyone here that we have it then, eh? Thank you.

**Chairman:** Ms. Hunt.

**Ms. Hunt:** Thank you, *Iksivautaaq*. Thank you to the Member for further clarification. An individual does not have to tell the public about their health status. However, when they are receiving diagnosis and treatment, they are asked information and there's a

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privacy issues, if they are making too much money, they would have to support families, would be part of it. For example, you could look up my salary to the penny how much I make. It's tabled. It's published. Everyone in Nunavut knows how much each MLA, Minister, and the Premier make. It's public information.

I would like to get the government's position on what's the difference if they can publish all the MLAs', Ministers', and the Premier's salary, why can't they publish civil servants' salaries that are over a certain amount, whatever the amount, either it would be \$100,000 or \$150,000, whatever that amount is? Thank you.

**Chairman:** Thank you. To supplement the Member's question, who would make that decision? Mr. Witzaney.

**Mr. Witzaney (interpretation):** Thank you, Mr. Chairman. (interpretation ends) As to who would make that decision, it would be a policy decision on the part of the Department of Human Resources and possibly the Department of Finance, who is responsible for pay and compensation.

There are additional considerations when it comes to the volume of staff that we would be doing this with. It would be based on sort of some of our privacy-protective parts of the legislation. As well, the privacy section does outline harms when it comes to privacy breaches. We would look at that when making that determination to see which harms could apply, but further to that point, the discussion also is different when it comes to public servants and the volume of public servants because each person has sort of a different home life, they have different pressures and different situations than the Members of the Legislative Assembly. There

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are certain factors that we have to take into account.

At the time, it was decided by the departments responsible that they didn't want to continue on that approach. (interpretation)  
Thank you, Mr. Chairman.

**Chairman:** Mr. Savikataaq.

**Mr. Savikataaq:** Thank you, Mr. Chairman. It's interesting about the volume of workers. Would the government official be able to say whether the volume of workers in Nunavut is less, equal, or more to Ontario, who does have a sunshine list? Thank you.

**Chairman:** Mr. Witzaney.

**Mr. Witzaney** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Volume is more speaking to the comparison between Members of the Legislative Assembly and members of the public service, not necessarily comparing our public service to the Government of Ontario. Wages are much higher here than in Ontario, so there would be more people who would meet that higher level. It would have to be a fairly extensive discussion and analysis piece by the departments responsible. I can't commit for them to look into this, but I'm sure they're watching and hearing that this is a concern to bring forward to their departments. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Mr. Savikataaq.

**Mr. Savikataaq:** Thank you. Staying on that same information that I note, is there any rights for Nunavummiut to know, for example, if they put a request to ATIPP for a person's salary, would that ATIPP request be obligated to, like if someone put an ATIPP for someone's certain salary? Thank you.

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**ᓄᓂᓪᓄᓪᓂᓪ:** ᓄᓂᓪᓄᓪᓂᓪ.

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**Mr. Sammurток:** Thank you, Mr. Chairman. Department of Justice, has the department entered into any information-sharing agreements with the independent investigative bodies and other entities? Thank you, Mr. Chairman.

**Chairman:** Mr. MacLean.

**Mr. MacLean:** Thank you, Mr. Chairman. Not at this time. Thank you.

**Chairman:** Thank you. Mr. Sammurток.

**Mr. Sammurток:** Department of Justice, as of today, what is the government's timetable to bring the new *Police Act* into force and publishing new regulations under the Act? Thank you, Mr. Chairman.

**Chairman:** Mr. Suvega.

**Mr. Suvega** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you, Member, for that question. I was wondering if I could, through you, Mr. Chairman, ask Mr. Witzaney to respond to that. Thank you, Mr. Chairman.

**Chairman:** Please go ahead, Mr. Witzaney.

**Mr. Witzaney** (interpretation): Thank you, Mr. Chairman. (interpretation ends) My understanding of where the Department of Justice is, is that they are currently working on the regulations and also engaging with various third party entities. That's hard to come to a timetable when there are factors outside of our control. It will depend how long it takes to enter into those agreements, how complicated it becomes with the negotiations, and then the basic sort of process to pass regulations. There's quite a lot outstanding from my understanding and so it would be difficult to provide a firm

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brand-new onboarding program for IMIT that's being used across different departments.

We also have released a new security awareness program that has new modules come out every couple of months, maintaining all the security that is current with the new information that we have. We roll out a new module every couple of months as well. Now with the access to low Earth orbit satellite bandwidth, we've got access to new, better and more improved tools. Even though I just mentioned about training for all staff, we do keep our IMIT staff really up to date on new tools that we are deploying ahead of time as well.

We have adopted what they call a zero-trust policy, which means we don't trust any individuals or organizations that we deal with or we connect our network to. We always have to evaluate very clearly if we're dealing with another organization out there, that we do a really in-depth review of what their network looks like and what kind of impact it would have on the Government of Nunavut's network as well.

We have learned a lot from our experience in 2019 and I think that, because of that learning with the Qulliq Energy Corporation, we brought a lot of the new lessons learned knowledge to them as soon as they started to rebuild. It took us a few years to learn that, but we brought that knowledge with us to that organization. Thank you, Mr. Chairman.

**Chairman:** Thank you. I know we have been doing a pretty good job of avoiding acronyms, but Information Management and Information Technology is IMIT. No problem, Mr. Wells. Mr. Lightstone.

**Mr. Lightstone:** Thank you, Mr. Chairman. My first question is going to be for the

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The important thing, in my opinion, is to develop a culture where everybody understands how important privacy is, and that everybody's objective is to improve the system to reduce the number of privacy breaches.

I'll use the same analogy I used the last time I was here. One of the best safety systems that we know of is in the airline industry, and that is because there's a culture of self-reporting, because they know that if something happens and they report it, there is going to be no consequences. Everybody says thank you very much; what can we learn from this so that that kind of incident doesn't happen again? It makes the airline industry one of the safest modes of transportation in the world, because of that culture.

That is, I think, what we're aiming for in privacy where people are not afraid to report, they're glad to report so that everybody can learn from whatever mistake they had made. That really is the answer, I think, Member rather than changing this law or that law. It's creating that culture that is the answer. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you for that response. This is to I suppose the Executive and Intergovernmental Affairs. I have here stronger policy development is one of things somebody said in a response, and that Privacy Breach Policy, I can tell you as an employee receiving a phone call from our Health ATIPP coordinator saying, Janet, did you mean to save this on the Y-drive at the end of a day, would really remind me to remind my team of the importance of not saving documents on the Y-drive if you don't have to. A lot of that, and I would be embarrassed, but I would share it because it's a learning.

That would often happen with I guess orphan documents that aren't saved into a specific folder, where an employee might not have access to specific folders so they choose to share or save something really quickly so that they can print it off or for whatever reason. And so the questions I have are around you know whether or not that Privacy Breach Policy includes things as important as doing daily audits on, having employees who specifically go in and check the Y-drive every day for those, you know, small actions that could turn out to be really huge if the document contains a significant amount of personal information.

Do those policies include that, so that there's that extra level of daily action and protection? Does that policy include the issue that I raised just now about reporting regularly, whether or not a team might consider something reportable to the privacy commissioner? and we talked about sort of the levels of concern. Is there a tracking mechanism so that internal audits can happen where managers and directors and up to DMs can look at what's going on in their teams that might be a cause for concern and an impetus for additional training? Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Witzaney.

**Mr. Witzaney** (interpretation): Thank you, Mr. Chairman. (interpretation ends) The Privacy Breach Policy is pretty simple. It talks more about reporting to the territorial access to information and protection of privacy office, and we do keep some statistics and we keep track of all of the breaches that are occurring, regardless of whether or not they meet that standard for material breach. In trainings that I do with the employee orientation program and with ATIPP coordinators -- sorry, access to

information and protection of privacy coordinators, I really stress that all privacy breaches, no matter how big or small, should be reported to my office.

One of the big reasons for that is when we are looking at whether or not a breach is material, one big criteria that we are looking for is whether or not the breach is a symptom of a systemic issue, and you can't really know that unless you had adequate tracking, and you're looking at breaches more regularly.

These are great suggestions that you have, and when we are looking at the policy, things that I keep in mind to better look at privacy and reporting publicly on how we're doing with privacy, and how we're doing with access and information, there are things I want to look at improving for our department. So those are all good suggestions. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. I would like to add another issue of concern and that is the issue, we heard about permissions for certain folders and certain access, and what we know is that often, especially if there are casual employees, that sometimes closing the loop on their employment doesn't always happen when it comes to permissions. We might grant an employee permission to access certain files and programs, and when they leave, we might forget to take those permissions away. Can I just have some reassurance that that is part of the policy, and that there is some mechanism to ensure that that's occurring? Thank you, Mr. Chairman.

**Chairman:** Mr. Seeley.

**Mr. Seeley:** Thank you, Mr. Chairman. If I could through you have Mr. Wells, our CIO, respond to that.

**Chairman:** Thank you. Mr. Wells.

**Mr. Wells:** Thank you, Mr. Chairman. Thank you, Member, for the question. There are a few things that we have been doing to improve and reduce the risk of casual employees and relief workers being able to exit from the GN or change jobs and leave those, I guess, unclosed, or things that are not closed off for them. One of the things is the onboarding program, the training, the new onboarding program that we talked about. It's really clear in training them about how when they exit what they need to do to inform their manager to inform HR, to start with them and I guess explain how the responsibility is not only on government but also on the individual itself, that when they leave, to do it properly.

We also work really closely with HR, and we've got a process set up now with HR that we provide them reports of people that have not logged into our network in 30 days, 60 days, 90 days, and we go into the departments and the departments work with us and say, sorry, we did actually miss this person, could you please close the account.

In the event we do not get responses back -- people could be on holidays, sick, that kind of thing -- we will temporarily move the account to inactive status until we are notified and until we get clarity from the departments that those accounts are actually active. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you for that response. I can say wholeheartedly that the annoyance and

discomfort that comes from being locked out from your GN system for a day or half a day is worth it when it comes to protecting people's privacy.

Mr. Chairman, I would like to go back to the discussion earlier about the Police Act and specifically about the Department of Justice working to identify a civilian investigation partner to undertake the review of serious incidents in Nunavut, and what I didn't hear from the response is, from what I recall, is that they're working with Alberta, perhaps because they also work with the RCMP or they also have the RCMP as their main policing force. What we know is that there is a civilian review and complaints commission for the RCMP that is an independent agency that reviews complaints made by the public about the on-duty conduct of RCMP members. And so I wonder if that's also being taken into account as the department does that work to establish that independent review committee. Thank you, Mr. Chairman.

**Chairman:** Mr. Witzaney.

**Mr. Witzaney:** Sorry; I thought that was someone else.

(interpretation) Thank you, Mr. Chairman.  
(interpretation ends) I'm drawing a blank. The *Police Act*, my apologies I was anticipating that going to Justice and not myself. Would the Member mind repeating the question?

**Chairman:** My apologies for putting you on the spot, Mr. Witzaney. Mr. MacLean is prepared to respond, I believe.

**Mr. MacLean:** *Qujannamiik*, Mr. Chairman. A challenge that we identified at the time the *Police Act* was being presented to the Assembly was that some of the independent police bodies in the provinces are not

allowed to do work outside of their own jurisdiction, due to statutory restrictions there, so it limits the number of organizations that we can work with. But I do not have a specific answer for you today about whether we are discussing with the RCMP I can take that back to our department and commit to providing a more fulsome answer.

I know the conversations are ongoing, or at least have not been finalized on who our external body will be because right now, independent investigations are typically coordinated through a police service and it's the RCMP that engages them. And as Member Lightstone mentioned earlier today, there's a lack of transparency there that we as a government acknowledge and understand, but there was a legislative limitation in how we can make it more transparent and more civilian-led and that prompted the amendments to the act, to create the *Police Act*. The legislation development has not moved quickly, I acknowledge, but it is still ongoing. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. MacLean. Just before I go back to Ms. Brewster on her line of questioning, I would like to recognize a delegate that just walked into the room, someone who I spent a great deal of time with on the phone a few years ago during the COVID pandemic.

I would like to take this opportunity to personally thank Dr. Tam for a lot of the recognition in helping Nunavut combat the COVID-19 pandemic and assist us in many different avenues when it came to vaccine rollout, when it came to recognizing the nuances of Nunavut's individuality and unique challenges we have with bringing health care to remote communities. I'm very pleased to hear that she is here not just in Iqaluit but in other communities in the territory to discuss tuberculosis, which will

probably be a topic of some of the ongoing discussions that we're having here today.

Dr. Tam I know we spoke on the phone many, many times over the pandemic. I personally wanted to thank you for your support that you provided to Nunavut and to all Nunavummiut. I would really like this house to join me in recognizing Dr. Tam and the great work that she's contributing to proceed with here in Nunavut, and obviously with Minister Main's support as well, too, along with Nunavut Tunngavik Incorporated and Inuit Tapiriit Kanatami. So welcome very much to this House.

>> *Applause*

**Chairman:** Thank you. With that I will go back to Ms. Brewster for her line of questioning.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you and welcome, Dr. Tam, to our House.

I would like to go back to the discussion earlier about the missing persons act and ask Commissioner Steele whether or not he is aware that the federal government is currently engaging in consultations on the creation of what they are calling now a red dress alert. This red address alert would be developed, or is under consideration to be developed similar to the -- and it's not coming to me, the name of the alert that goes out when there's a child missing -- an amber alert. It's similar to that idea where if an Indigenous woman goes missing anywhere in Canada, that there would be a red dress alert that would go off on telephones in the area where the person is missing. And I wonder if the commissioner has been approached for consultation on that red dress alert yet. Thank you, Mr. Chairman.

**Chairman:** Mr. Steele.

**Mr. Steele:** Thank you, Mr. Chairman. Thank you, Member, for the question. No, I have not been approached or consulted, nor would I necessarily expect that I would be by the federal government, if it's a federal initiative.

But I'll say the same thing that I say about most of these ideas, and that is that it's not for me to say whether this legislature should do it or not do it, whether it's a good idea or not, whether it would work or not. What I can do is I can say, "How does this fit with Nunavut's existing privacy law?" At the end of the day, the main thing that I want is clarity, just so that there's never any question that if one government does this and the other government does something different, let's at least make clear about whether such an alert would be in keeping with the Nunavut's privacy law or not.

So that would be my suggestion to the government if some initiative like this is moved forward, is let's at least please have clarity about how it meshes with the existing privacy law in Nunavut. (interpretation)  
Thank you, Mr. Chairman.

**Chairman:** Mr. Seeley.

**Mr. Seeley:** Thank you, Mr. Chairman. Just to build off the commissioner's comments, the public alerting system, the national wireless public alerting system is a topic around the emergency management table nationally, and how that contract is managed to administrator different types of alerts, whether it be an amber alert or a public emergency, is administered through a series of MOUs with agencies in each jurisdiction. We do quarterly public alerting tests of the public alert system, and any consideration of additional access to that public alerting

system via other agencies for other purposes. We would include consideration of the relevant legislation before signing an MOU with another agency for access to the system for a different purpose, and certainly, give full consideration to the privacy considerations for any number of types of alerts that might try to access the system. So that would be built into that review through that table and through that mechanism. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. I thought that important to bring that issue up, because of the discussion about the potential of creating a missing persons act, and I appreciate those responses.

Commissioner Steele, you indicate on page 18 of your 2022-23 annual report that the *Access to Information and Protection of Privacy Act* is adequate to deal with information and privacy in the health system. Almost every other Canadian jurisdiction has health-specific legislation. There is no reason that Nunavut should be so far behind.”

How do specialized statutes of this type differ from general access to information and protection of privacy legislation? Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Steele.

**Mr. Steele:** Mr. Chairman, our health system holds a tremendous amount of personal medical information about each and every one of us. There are now only two jurisdictions in Canada that do not have a law specifically addressing privacy in health care. There’s Nunavut and British Columbia. Every other jurisdiction in Canada has a detailed law about privacy.

Nunavut's existing privacy law applies to the health system. It does apply to the health system, but it applies to everything else at the same time. And so there's a lack of detail, a lack of clarity, a lack of guidance that could be provided by a law that was strictly about the health system and could get into detail about how the different parts of the health system can play their part in protecting privacy in health care. That's the main difference. It's the level of detail and being specific.

Another difference, Member, is that health-specific privacy legislation doesn't deal just with the government; it deals also with other health care providers. Now, the reality in Nunavut is that we don't have a very large private health care sector. We don't have private physiotherapy clinics, we don't have a lot of dental offices. We don't have very many pharmacies, and so on, and so on. But all of those entities, they are not Government of Nunavut, but they are all handling medical information in one way or another. So the law would, the umbrella of the law would expand to include them as well. That would be another major difference.

I'll stop there, Mr. Chairman. Those would be the two main differences and why I believe that it's long past time that Nunavut had a health-specific privacy law. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Steele. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Mr. Steele, you just stated that Nunavut doesn't have a lot of these other health care providers that the different jurisdictions do have, where there isn't, there aren't a lot of or any private clinics anymore. My home phone number is Dr. Netcher's old clinic number, so I still get calls for Dr. Netcher

from time to time. However, what we do know, Commissioner Steele, is that the Government of Nunavut has engaged in a Memorandum of Understanding to share data specifically on tuberculosis with Nunavut Tunngavik Incorporated, and so I am a little, I'm interested to know in the absence of that specific health information legislation what is protecting our citizens and their health information in the absence of that legislation. Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Steele.

**Mr. Steele:** Mr. Chairman, probably the Department of Health is better placed than I am to answer specifically what exactly is shared with Nunavut Tunngavik Incorporated under the tuberculosis information sharing agreement. I am doubtful that it includes any personal medical information. I believe it is more community-level, perhaps statistical, but the Department of Health can speak to that.

The only other comment I have about that agreement, as the Member knows, I think as all members know, about two years ago I issued a decision saying that the Department of Health should release more information about tuberculosis than it actually does release. That recommendation was rejected by the Minister of Health. That's fine. That's it's way the law is written. The Minister of Health has the last word.

What they have done is they have agreed to share information but only with Nunavut Tunngavik Incorporated, but part of that agreement is that Nunavut Tunngavik Incorporated will not share it with anybody else. So that's not exactly being more open. Let me emphasize: It is a great thing that the Government of Nunavut and Nunavut Tunngavik Incorporated are working closely

together in the fight against tuberculosis. That is a fantastic thing.

Now, instead of having one entity that's holding information secret, you have two entities holding information secret. That's not, from a public-information point of view, that's not in my view a huge improvement -- strictly from an information point of view. I want to emphasize that, Mr. Chair. I am sure you understand. It is great in terms of the fight against tuberculosis, but in terms of informing the public and holding the government to account for its anti-tuberculosis strategy, it's not helpful when it is shared with another organization which also has to keep the information secret. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you, Mr. Steele. I guess I'll ask then the Department of Health. We know that that information-sharing agreement with Nunavut Tunngavik Incorporated on tuberculosis data was tabled in February of this year, 2024, and I would like to hear from the Department of Health what is the status of administering the agreement. An open-ended question, to begin with. Thank you, Mr. Chairman.

**Chairman:** Thank you, and if I may add on to the member's question, does Nunavut Tunngavik employees get privacy training associated dealing with medical information. Ms. Hunt?

**Ms. Hunt** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you. I think I heard a couple of questions. One of the questions was do our partners in Nunavut Tunngavik have training in privacy, was the first question? The last question, sorry. I'm going backwards. I don't know the exact day answer to that and I will check into it. I think,

Susan, you may know whether through the FAC (ph) process that that occurs. Just one minute. I have to ask our Chair first to allow you the opportunity to respond.

**Chairman:** Thank you. Ms. Patterson.

**Ms. Patterson:** We share the tuberculosis data statistics with the Public Health Agency who is recognized as the agency of the federal government to aggregate outbreak information, including TB, syphilis and all the STDs, etcetera. Our reporting goes through that mechanism. We have direct engagement through an MOU between Nunavut and Public Health Agency around publishing those statistics. It's not just NTI that we share information.

At the federal level, then, you can see across all the jurisdictions in terms of rates of outbreak or rates of infection, and it's that basis, for example, the discussion about Nunavut as being significantly higher on TB outbreaks than the other jurisdictions from that standpoint.

**Chairman:** Thank you. I'm not sure if the full response was provided. Ms. Brewster, go ahead.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you for that response. However, I'm still not clear on how this MOU is being -- this agreement is being administered. What I do see in looking at the agreement that specific information that I and others have requested in this house is being shared, and that's numbers, or it says numbers only, no rates by community, current year and time trend, the numbers and rates by age and sex.

There are many reasons why I think it's important to share that information publicly, and of utmost importance is to engage people in helping us to eradicate those rates. We

know that the Department of Health does release rates and numbers data related to numbers of different communicable diseases. We know that recently there was an information item about the rates of syphilis in a particular community and the reason we know that the Department of Health decided to release those rates is in order to encourage people to take action if they feel that they might have symptoms or may have been exposed.

I struggle to understand why, stigmatism aside, I don't know if there's any greater stigma related to somebody's health than a sexually transmitted infection or disease and we're seeing those numbers. When it comes to tuberculosis, what we know is that public-facing information can help to encourage people to access health care and to learn and talk to each other, importantly, about tuberculosis. Whether it's latent tuberculosis or active tuberculosis, we know that we want people to seek medical treatment for both active and latent tuberculosis because it's a public health risk.

I know in my own family that I have family members who were impacted by tuberculosis in the '50s, '60s, and that there is this message that the Department of Health is putting forward that we don't want to stigmatize or traumatize anybody related to sharing this information. What I can tell you is, in my experience those people, especially those elders who have personal experience, lived experience with tuberculosis in their youth, are amongst the strongest advocates to providing as much information as possible in order to eradicate tuberculosis. The target is 2030, and it's 2024.

I would just like to hear more from the Department of Health about the rationale to sharing information and data sets with Nunavut Tunngavik Incorporated and not the

general public, who are most impacted by tuberculosis. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Hunt.

**Ms. Hunt** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you to the Member. I think this is a really important conversation and I know we're all committed to the elimination of TB. One of the questions, and I'll just walk through each of yours and I think I've tried to capture each of the --members' questions, was do we provide individual, patient-specific information to Nunavut Tunngavik Incorporated, and the answer is no. We would not provide an individual's specific health information to our partner.

We do provide, as you noted, community, territorial, and regional-level information. We are quite public about regional and territorial statistics, and I think recently as we had the community-wide screening and kick-off and Dr. Tam here, that was also part of the media campaign sharing that information.

We have committed to continuing to look at information that would be released from a statistical standpoint by gender and age. That hasn't yet happened, but we are continuing to have those conversations and look at how that could be released in a good and wise way.

A lot of our work has been with the hamlets and our partners to really understand from communities directly what is important to them in terms of information, not just as you noted, to destigmatizing TB, to also reducing and improving education on that, but about the level of information-sharing and empowering communities to be able to share their information. And so that's part of our work as well.

And also looking at how we can use information to help inform our planning and our work with communities and our partners as part of the TB elimination plan, as part of looking at the broader areas of public health and the protection of a community in improving the health status of community members.

So I'll stop there, *Iksivautaaq*. I hope I have answered the member's questions. I am definitely happy to answer more as they may come. (interpretation) Thank you.

**Chairman:** Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you, Ms. Hunt, for that response. I just heard you say you're working to empower communities to share their information. So just for clarity, does the Department of Health release the tuberculosis rates and numbers to each community, and if so, are there individual memorandums of understanding about those rates? Because what I hear -- I might be wrong, but what I hear from that statement of empowering communities to share their information, it tells me that they have the information. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Hunt.

**Ms. Hunt:** Thank you, *Iksivautaaq*. Thank you for the question, to the member. That's part of our current work, just so answer the member's question. So for example, when we're working with communities when an outbreak has been declared, we are sharing that information through public engagement, consultation, and meeting with the hamlets. And then as testing, treatment, screening, follow-up is being done, that's the information that we're continuing to engage on community on, creating a formal process around after-action reporting, for example,

and the community's process around what information they would want to share. That's still part of the working journey that we're doing.

I think these last two community-wide screenings and our most recent on and working with our partners, communities are really engaged and starting to provide that information, give direction, and helping us work together to land on what could that process look like and how do we do that in a good way, and also maintain individual-level privacy and still be able to share information that helps community plan with us to address their TB or other public health areas of concern. Thank you.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. I'll move on from that for now, while I process those responses. Commissioner Steele, in 2021 the Fifth Assembly of Nunavut passed a new mental health act. Section 64 of the legislation establishes a new mental health review board. The government's response to the November 2022 report of the standing committee indicates that "the mental health review board is an independent, quasi-judicial board, will be responsible to develop its own policies and internal protocols."

Sorry, this is really long. "Health will advise the board on the importance to consult with external partners as needed, including the Information and Privacy Commissioner."

I wonder to what extent has your office been consulted in respect to access and privacy matters relating to the new mental health act and the Mental Health Review Board. Thank you, Mr. Chairman.

**Chairman:** Thank you. Mr. Steele.

**Mr. Steele:** Mr. Chairman, my predecessor, the commissioner before me was ostensibly consulted about the mental health act when it was being developed. I know because I saw a very thick file that she had on it. But on that specific point, Member, specifically on the Mental Health Review Board, there has been no consultation with me so far. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. And to the commissioner: does that surprise you? Does it concern you? Is there a need to consult or not? Thank you, Mr. Chairman.

**Chairman:** Mr. Steele.

**Mr. Steele:** Mr. Chairman, I laugh a little bit because I know that one of the things when I hear often when I come to this forum is members asking whether they have consulted with me. There are a lot of times when I want to say that's not something that I should be consulted about, right. I don't want to become part of the policy process of the government. I'm not the Government of Nunavut. I have to stay outside it. If they're looking for my opinion on something in particular, I'm happy to provide it, although I usually say to them, look, these are just my thoughts.

If a matter comes before me as a result of a complaint, for example, I have to be able to approach it with an open mind, and I should not ever be in a position where I am reviewing the correctness of my own advice.

Member, really honestly, no, it doesn't surprise me that I haven't been consulted about any aspect on the operations of the Mental Health Review Board. The first question that is going come up is whether

this board is even subject to the access and privacy law at all. And if they're not added to the regulation, then at some point I'm going to have to make a decision.

If somebody complains or somebody asks for information, I'm going to have to decide whether they even come within the definition of "public body" in the law. So that's something that I will probably have to leave there, keep an open mind about. I wouldn't want to be pulled too far into the government's policy-making process. If they contact me I'm happy to talk to them, but there is a limit to the policy advice that I can give. Thank you, Mr. Chairman.

**Chairman:** Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Thank you, commissioner, for that response. This is more for information and I'll leave it up to you, Mr. Chairman, as to whether or not it's appropriate to ask today of the Department of Health who are the members of the board and whether or not there are Inuit cultural advisors who have been appointed to the board under that subsection 64 of the legislation. Thank you, Mr. Chairman.

**Chairman:** Thank you. I do think it's a fair question, that the Act itself has been a topic for discussion, to see who the members of the board are and whether those Inuit cultural advisors have been appointed is fair. I'm not sure if Ms. Hunt will have that information with her, but Ms. Hunt.

**Ms. Hunt (interpretation):** Thank you, Mr. Chairman. (interpretation ends) The elder advisors have not been appointed as of yet, to my understanding, and I don't know the names of those who have been appointed. I would say they have not been formally appointed. No one has been formally

appointment as of yet, but we have received submissions that are under review. Thank you.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. I would like to go back to the discussion about the health privacy legislation that the Department of Health is working on. The Government of Nunavut's current business plan indicates that the department is working on that legislation with public consultations beginning in late 2023, and the business plan also indicates that the consultations are expected to conclude by December of 2024.

I wonder if the Department of Health could tell us to what extent the department is consulting with the Office of the Information and Privacy Commissioner in the development of that new health privacy legislation. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Sanderson.

**Ms. Anderson:** Thank you, Mr. Chairman. In terms of the response, Health is continuing to work towards the development of modern legislation for the proper collection, use, disclosure of personal health information, what we are referring to as health-specific privacy legislation. We're undertaking a comprehensive consultation process to ensure the legislation addresses the needs and expectations of Nunavummiut.

It is planned to have the consultation process complete, in terms of our public consultation, later this year. We are targeting to have drafts of the documents to return to Justice but no firm date yet. Thank you.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. I did hear a little bit of a response; I'm not sure whether or not Ms. Anderson indicated to what extent the Information and Privacy Commissioner is being consulted on the development of that legislation. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Anderson.

**Ms. Anderson:** Thank you for the question, Mr. Chair. To date, the privacy commissioner has not been consulted on this legislation. Part of our public consultation process is the extension of options of what is included in them because there has been significant environmental scan. Not every jurisdiction that has health-specific privacy legislation, they are not cookie-cutters so there's a lot of variability in terms of the landscape across the jurisdictions, the provinces, the territories, and the federal. So we are looking through this consultation process to get some feedback in terms of shaping what will go into the legislative act.

We're also contemplating options around regulations that would fit under the health-specific legislation. At the appropriate time, then, absolutely, the privacy commissioner would be one of our sure stops to consult with in terms of as these options get firmed up, as we see the legislation coming together. Thank you, Mr. Chairman.

**Chairman:** Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. Ms. Anderson mentioned other jurisdictions in that response, and I'm wondering if there are other jurisdictions that have comparative issues that might be considered as a good role model for Nunavut. Thank you, Mr. Chairman.

**Chairman:** Ms. Anderson.

**Ms. Anderson:** Thank you, Mr. Chairman. Yes, through our environmental scan, we have seen some not just within the territories but some of the provinces, and if I could pick on BC, for example, where you have a significant Indigenous First Nations population, we see some very thoughtful approaches around the handling of health information in that context. You know, the OCAP approach to dealing not just with patients and families but communities, and then how do we reflect that through in terms of our thinking about our engagement in terms of the confidentiality and privacy, but also as the conversations come up today, often with elders and communities, and the cultural sensitivity around these things.

At the end of the day, the way I would summarize it, what we want to accomplish is a mechanism to expand the public trust, because there's so much anxiety on the public domain today as relates to we hear about data breaches every day. I have personally seen this up close in Alberta, where we had 620,000 patients' data breached by a private clinic group that lead to us developing a privacy breach regulation.

I'm saying there's all these upset issues. How can we create the legislation that's going to expand the trust and balance the conversation? That would be my comment. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman, and thank you for that response. We know that there are a number of departments, other departments within the Government of Nunavut that collect personal health information and other private information of our citizens, whether it's Family Services, Education, or Justice, and especially related

to vulnerable individuals, and that data or that information touches on suicide prevention, suicide child protection, violence against women. I'm wondering how the proposed legislation will take into consideration those privacy issues collected related to personal health information collected by other departments such as Family Services, again, Justice and Education. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Anderson.

**Ms. Anderson:** Thank you, Mr. Chairman, for this question. Yes, there is an incredible opportunity in terms of looking at not just the health data collected within Department of Health for the purposes of clinical delivery, but we look at some of the meaningful data around social determinants and context, whether it's around housing, Education Justice Family Services et cetera. These create significant linkable opportunities in what we call population health data.

We're doing that to some extent now, but we're doing it at a macro level through organizations like Stats Canada, et cetera. But there's some changing steps that are happening across Canada and, in particular, I point to for example the Inuit Health Data Survey and the emphasis there around expanded collection of data. That's direct individual surveys that Stats Canada cannot pursue across all the Inuit populations across Canada, but we're getting opportunity for granular data that will touch on many of those. Those kinds of questions that we can then link in, link back into the health data.

From a government standpoint this absolutely makes sense that we take advantage of those opportunities and create a legal, government structure that allows us to have meaningful sharing within a trusted environment, what I call a data haven, that

people need access to that data can use it and review it, without having to go through a number of legal hurdles to get there. That is kind of part of the objective that we see going through this process.

It's not just the constraints of when to say no; it is how we get to a more open, more shareable but yet a secure context for health data plus these linked data sets. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Brewster.

**Ms. Brewster:** Thank you. Thank you, Mr. Chairman, and thank you, Ms. Anderson, for that response. You mentioned some initiatives related to collecting health data. I know that those baseline studies are really important. The trend studies are even more important in terms of collecting population health data. I wonder what other health privacy initiatives the department is currently undertaking, whether it's the research, as you mentioned, or anything else. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Anderson.

**Ms. Anderson:** Thank you, Mr. Chairman. Health has reconstituted our research committee. We just struck that two weeks ago. This is a renewal of an older committee that has participation across our entire health department. I'm involved and others. We routinely interact with researchers from all parts of Canada, but this is a formal process of giving us opportunity to do an engagement with NRI, to engage in doing some of the research ethics boards reviews, and to have a critical discussion about what kinds of research and researchers that Nunavut and our co-participants are welcoming in.

A lot of this is as shifting sand. I'll give a simple example. Nunavut has applied for a

SPOR grant. What's the acronym -- it is specific patient oriented research. Sorry about the acronym, but Canadian Institute of Health Research, the application has been going on for like ten years and it's just this year that Nunavut finally has stepped into a five-year grant agreement in this area.

What it means is recognition that there's a lot of research that can happen here in Nunavut. It's not just by parties outside, and that we have over time have some significant expertise and subject matter experts in a number of these areas that are very important around suicide prevention, around outbreak diseases, around impact of housing as it applies to health, et cetera. So these are very exciting opportunities and we're just stepping into this realm in a significant way now but it's going to expand the research envelope. We see that. Thank you, Mr. Chairman.

**Chairman:** Ms. Brewster.

**Ms. Brewster:** Thank you, Mr. Chairman. As former management of research and special projects at the Department of Health I am happy to hear that that committee has been brought back together.

Ms. Anderson referred to NRI, which is Nunavut Research Institute, right, institute. And that reminded me of some very important work that is done to ensure that there is protection of people's privacy, and that is through the granting of research licences to researchers. There's a pretty stringent process in applying for a research licence that includes, very importantly, referring back to the community members.

I realize that I've been focusing on health and I want to just ask one more question now for reassurance that it's still occurring, and that Health is aware that there is a need to --

especially because we send so many people out of territory for medical travel, what we know is that when there is research being done in Nunavut there is an application process for licensing and some assurance that people's personal private health information will be protected.

However, we don't have any control over when we send somebody out of territory and their approach to take part in a research project. Even though they are our medical travellers, they have the right and responsibility and opportunity to take part in research if they choose to do so. I wonder whether or not there is a mechanism in place in those service provision agreements with the different health care providers that we send our medical travellers to, to ensure that their privacy is protected, and also specifically related to any research projects so that they're not taken advantage of. Thank you, Mr. Chairman.

**Chairman:** Thank you. Ms. Anderson.

**Ms. Anderson:** Thank you. Yes, the one point that I would say, a discussion is going nationally at this time as around, Mr. Chairman, the integration and interoperability of our system so that it will enable us as we have medical travel to be able to capture and integrate data that comes through the episodes of care, whether they be in Ottawa or Winnipeg or Stanton or Edmonton, and recover that data back, so we have the security of that data back in our clinical information system that then the research can happen here.

There's still the issue of in other jurisdictions as they're doing research. A lot of the research ethics boards will require, if there is patient-identified information that there's consent by the individual. It doesn't mean

just because somebody had a procedure in an Ottawa hospital that their data is vulnerable to somebody wanting to do a research project without first contacting the family and asking for permission to proceed on that. Thank you, Mr. Chairman.

**Chairman:** Thank you. I believe Ms. Brewster has completed her line of questioning on the Department of Health. Instead of opening up another topic and leaving it unfinished before the end of the day, I'm going to make an executive decision and I'm going to adjourn the meeting now. We'll see everyone here tomorrow at 10 a.m. Thank you.

*>>Committee adjourned at 16:48*