

NUNAVUT HANSARD

UNEDITED TRANSCRIPT

WEDNESDAY, FEBRUARY 26, 2025

IQALUIT, NUNAVUT

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Legislative Assembly of Nunavut

Speaker

Hon. Tony Akoak
(Gjoa Haven)

Hon. David Akeeagok
(Quttiktuq)

Minister of Justice; Minister for Labour; Minister responsible for the Human Rights Tribunal; Minister of Economic Development and Transportation; Minister responsible for Nunavut Business Credit Corporation; Minister responsible for Nunavut Development Corporation; Minister responsible for Mines; Minister responsible for Trade; Minister responsible for Mines

Hon. P.J. Akeeagok
(Iqaluit-Niaqunnguu)

Premier; Minister of Executive and Intergovernmental Affairs; Minister of Culture and Heritage; Minister of Indigenous Affairs; Minister responsible for Immigration; Minister responsible for the Utility Rates Review Council; Minister responsible for Seniors; Minister of Languages

Bobby Anavilok
(Kugluktuk)

Janet Brewster
(Iqaluit-Sinaa)

Hon. Pamela Gross
(Cambridge Bay)
Deputy Premier; Minister of Education; Minister of Human Resources; Minister Responsible for the Workers' Safety and Compensation Commission

George Hickes
(Iqaluit-Tasiluk)

Deputy Speaker; Chair of the Committee of the Whole

Hon. David Joanasié
(South Baffin)

Government House Leader; Minister of Community and Government Services; Minister of Environment; Minister of Energy

Joelie Kaernerik
(Amittuq)

Mary Killiktee
(Uqqummiut)

Hon. Lorne Kusugak
(Rankin Inlet South)

Minister of Finance; Minister responsible for the Nunavut Housing Corporation; Minister responsible for Liquor and Cannabis Commission; Minister responsible for Liquor and Cannabis Board

Adam Lightstone
(Iqaluit-Manirajak)

Hon. John Main
(Arviat North-Whale Cove)

Minister of Health; Minister responsible for Suicide Prevention; Minister responsible for the Qulliq Energy Corporation

Solomon Malliki
(Aivilik)

Deputy Chair, Committee of the Whole

Hon. Margaret Nakashuk
(Pangnirtung)

Minister of Family Services; Minister responsible for the Status of Women; Minister responsible for Homelessness; Minister Responsible for Poverty Reduction; Minister responsible for Nunavut Arctic College

Karen Nutarak
(Tununiq)

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(Hudson Bay)

Joanna Quassa
(Aggu)

Inagayuk Quqqiaq
(Netsilik)

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Table of Contents

| | |
|--|----|
| Opening Prayer..... | 1 |
| Ministers' Statements | 1 |
| Members' Statements..... | 6 |
| Recognition of Visitors in the Gallery..... | 12 |
| Oral Questions | 13 |
| Recognition of Visitors in the Gallery..... | 38 |
| Tabling of Documents..... | 39 |
| Second Reading of Bills..... | 40 |
| Consideration in Committee of the Whole of Bills and Other Matters | 40 |
| Report of the Committee of the Whole..... | 72 |
| Orders of the Day | 72 |

A.

Daily References

Wednesday, February 26, 2025..... 1

B.

Ministers' Statements

531 – 6(2): Tribute to Long-Time Airport Maintainer Eneas Angutiqjuaq
(Akeegok, D)..... 1

532 – 6(2): Child Abuse and Neglect Response Agreement (Nakashuk)..... 2

533 – 6(2): Future of Inuit Child First Initiative (Main) 3

534 – 6(2): Pink Shirt Day (Gross)..... 4

535 – 6(2): National Public Alerting System (NPAS) (Joanasie)..... 5

536 – 6(2): Special Constable Baker Lake (Akeegok) 6

C.

Members' Statements

730 – 6(2): Mental Health Issues (Kaernek) **Error! Bookmark not defined.**

731 – 6(2): Anti-Bullying (Quqqiaq)..... **Error! Bookmark not defined.**

732 – 6(2): Condolences (Quassa) **Error! Bookmark not defined.**

733 – 6(2): Inuinnaqtun Language (Anavilok)..... **Error! Bookmark not defined.**

734 – 6(2): Support for Midwifery Services (Brewster) **Error! Bookmark not defined.**

735 – 6(2): Jordan's Principle (Killiktee)..... **Error! Bookmark not defined.**

736 – 6(2): Inuit First Child Initiative (Lightstone) **Error! Bookmark not defined.**

737 – 6(2): Thank Emergency Services (Kusugak)..... **Error! Bookmark not defined.**

738 – 6(2): Anti-Bullying (Nakashuk) **Error! Bookmark not defined.**

739 – 6(2): Gjoa Haven Emergency Services (Akoak) **Error! Bookmark not defined.**

D.

Oral Questions

| | |
|---|----|
| 1105 – 6(2): School Bus Safety(Lightstone) | 13 |
| 1106 – 6(2): Special Needs Washroom for Baker Lake School (Simailak)..... | 15 |
| 1107 – 6(2): Airport Infrastructure (Quassa) | 17 |
| 1108 – 6(2): Number of Houses Constructed in Arviat (Savikataaq)..... | 19 |
| 1109 – 6(2): Public Trustee and Guardian (Killiktee) | 22 |
| 1110 – 6(2): Support for Midwifery Services (Brewster)..... | 24 |
| 1111 – 6(2): Follow-up on Naujaat Teacher Status (Malliki) | 26 |
| 1112 – 6(2): Airport Infrastructure (Sammurtok) | 28 |
| 1113 – 6(2) Nunavut Housing Corporation Activities in the Kitikmeot (Quqqiaq) | 30 |
| 1114 – 6(2): Mental Health Issues (Kaernerck) | 32 |
| 1115 – 6(2): Increased Wage Scale for Child Care Workers (Nutarak)..... | 35 |
| 1116 – 6(2): Inuit First Child Initiatives (Lightstone) | 37 |

E.

Tabling of Documents

| | |
|--|----|
| 361 – 6(2): 2021 Traffic Safety Annual Report (Akeegok, D) | 39 |
| 362 – 6(2): 2022 Traffic Safety Annual Report (Akeegok, D) | 39 |
| 363 – 6(2): 2023 Traffic Safety Annual Report (Akeegok, D) | 39 |
| 364 – 6(2): Correspondence from the Baker Lake District Education Authority Respecting Renovations to the Washroom at the Jonah Amitnaaq High School (Simailak)..... | 39 |

F.

Bills

| | |
|---|----|
| Bill 73 – Planning Act – Second Reading | 40 |
| Bill 70 – Appropriation (Operations and Maintenance) Act, 2025-2026 – Consideration in Committee | 41 |

Iqaluit, Nunavut
Wednesday, February 26, 2025

Members Present:

Hon. David Akeeagok, Hon. P.J. Akeeagok, Hon. Tony Akoak, Mr. Bobby Anavilok, Ms. Janet Brewster, Hon. Pamela Gross, Mr. George Hickes, Hon. David Joanasie, Mr. Joeline Kaernerck, Ms. Mary Killiktee, Hon. Lorne Kusugak, Mr. Adam Lightstone, Hon. John Main, Mr. Solomon Malliki, Ms. Karen Nutarak, Hon. Margaret Nakashuk, Hon. Joanna Quassa, Mr. Inagayuk Quqqiaq, Mr. Alexander Sammurtok, Mr. Joe Savikataaq, Hon. Craig Simailak.

>>*House commenced at 13:31*

Item 1: Opening Prayer

Speaker (Hon. Tony Akoak) (interpretation): Before we start I would like to ask Mr. Kaernerck to open the meeting with a prayer.

>>*Prayer*

Speaker's Statement

Speaker (interpretation): Good afternoon, colleagues. We'll have a good meeting today and just try and help our constituents.

(interpretation ends) Ministers' Statements. Hon. Minister of Economic Development and Transportation, Mr. David Akeeagok.

Item 2: Ministers' Statements

Minister's Statement 531 – 6(2): Tribute to Long-Time Airport Maintainer Eneas Angutiqjuaq

Hon. David Akeeagok: Good afternoon to everyone in the high Arctic.

Thank you, Mr. Speaker. I want to acknowledge the passing of a dedicated long-time Airport Maintainer, Eneas Angutiqjuaq, who was a husband, father and grandfather, and a very strong community member in Igloolik.

For many years, Eneas served as the airport maintainer in Igloolik, ensuring the safety and operations of travellers passing through the Igloolik terminal. His commitment to his work and his community was unwavering. He took great pride in his role, and his presence at the airport will be deeply missed.

Mr. Speaker, individuals like Eneas are few and far between. His work ethic, reliability, and long-term dedication to airport operations made a lasting impact on those who had the privilege of working alongside him. Despite his long battle with cancer, he remained strong in spirit, and his resilience inspired many.

On behalf of my colleagues and the department, I extend my deepest condolences to his family, friends, and the community of Igloolik and Nunavut.

His contributions will not be forgotten.

Thank you, Mr. Speaker.

Speaker: Minister's Statement. Hon. Minister of Family Services, Ms. Nakashuk.

Minister's Statement 532 – 6(2): Child Abuse and Neglect Response Agreement

Hon. Margaret Nakashuk: Mr. Speaker, I rise today to highlight work of the Department of Family Services and its partners in keeping children and youth safe during sexual abuse and neglect disclosures.

The department re-convened the Child Abuse and Neglect Response Agreement, or CANRA, working group in April 2024 and terms of reference were established. This working group initiated a review of the current agreement, based on recommendations of the Representative for Children and Youth, and a more comprehensive agreement was drafted.

It is anticipated that the new version of the Child Abuse and Neglect Response Agreement will be submitted to appropriate organizational, and department leads for signature in March 2025.

The working group has begun initial work to develop a child sexual abuse action plan, developed through a whole of government approach. Interviews are currently underway with Government of Nunavut departments, Nunavut Tunngavik and other stakeholders. This action plan will include a comprehensive communications and training strategy. It is anticipated that this work will be complete in summer 2025.

Mr. Speaker, I would like to thank our partners for their role in this important work, including Justice, Education, Health, Umingmak Centre, and the RCMP.

Qujannamiik, Mr. Speaker.

>> *Applause*

Speaker: Minister's Statement. Hon. Minister of Health, Mr. Main.

Minister's Statement 533 – 6(2): Future of Inuit Child First Initiative

Hon. John Main: Mr. Speaker, I rise today to speak about the need for clarity on the future of the Inuit Child First Initiative. I have heard numerous accounts from residents about the positive impacts of Inuit Child First Initiative supports – whether it is school food program supports, medical travel assistance for young families, food voucher programs delivered through Hamlets, or other specialized supports for health needs – it is clear that there is an overwhelmingly positive and supportive footprint from this initiative across Nunavut.

Food insecurity and malnutrition are huge concerns to the Department of Health. We know accessing nutritious food is a significant challenge for many Nunavummiut with clear impacts to health. These impacts are not limited to physical health; research shows the strong connection between poor nutrition and poor mental health. The food supports through Inuit Child First Initiative are helping to reduce these challenges and I believe are helping to achieve better health outcomes. These Inuit Child First Initiative supports need to be continued in order to see a sustained improvement in physical and mental health.

Health care service delivery is challenging in Nunavut, and our system's use of medical travel can have unintended impacts on Inuit families. The supports provided through Inuit Child First Initiative related to medical travel have been beneficial to many. Individuals have told me how these supports have helped to keep their families united during difficult times. The specialized health care service and supply aspect of Inuit Child First Initiative has also been helpful for many, based on what I've heard directly from families, and are complementary to existing programs.

Given the strong interest from Nunavut Inuit in accessing Inuit Child First Initiative supports, and the positive impacts the initiative is having across the territory, many families and organizations have questions regarding Indigenous Services Canada's path forward for the initiative. Stakeholders are wanting to understand whether Inuit Child First Initiative will continue, whether there will be changes to the program's administration and eligibility criteria, and how they can adjust accordingly. Families receiving supports have asked whether there is an end date for the Inuit Child First Initiative they need to take into consideration. As Minister, I have posed these questions to Indigenous Services Canada but have yet to receive a response.

Given the apparent significant positive impacts from Inuit Child First Initiative in Nunavut, I have been advocating for the initiative's continuation into the future. As I have mentioned, the Inuit Child First Initiative health and nutrition related supports provided are complementary to other funding avenues such as the Nunavut Wellness Agreement, and I believe are making a huge positive impact. I believe that the dollars

spent are an important investment into the future of Nunavut in terms of improved Health outcomes for Inuit children and families in the territory.

Mr. Speaker, it is clear that the health and nutrition related supports through Inuit Child First Initiative have had many positive impacts in Nunavut. My Department will continue to advocate for Inuit Child First Initiative's continuation into the future fiscal years. I strongly encourage Indigenous Services Canada to provide clarity to Nunavut stakeholders about the initiative's path forward, so that many eligible organizations and families can plan effectively for the future.

Thank you, Mr. Speaker.

Speaker: Minister's Statement. Hon. Minister of Education, Ms. Gross.

Minister's Statement 534 – 6(2): Pink Shirt Day

Hon. Pamela Gross: *Quana*, Mr. Speaker.

Mr. Speaker, today we stand together to stop bullying, spread compassion, and celebrate what makes us unique. Across Nunavut, our communities, schools, and families are saying no to bullying and yes to safe, welcoming places for everyone.

Today, our schools are hosting Pink Shirt Day events to show respect and care—Inuuqatigiitsiarniq—and to make it clear: bullying has no place in our schools, homes, workplaces, online, or anywhere else.

Mr. Speaker, my department is taking action. We've sent a Bullying Prevention Tool Kit to every school, from kindergarten to Grade 12. It's packed with facts, activities to spot bullying, and practical steps to stop it. We've also shared the "Ajunngittugut! Pink Shirt Day: School Resource Guide" to help schools build positive spaces with fun, hands-on activities.

We're not stopping there. The Department of Education has teamed up with the Canadian Red Cross to deliver bullying prevention training for students and staff. Plus, we're hosting this year's Nipivut Youth Conference, focusing on resilience, healthy relationships, suicide prevention, self-care, and speaking up for yourself.

We're fully committed to Makitattiarniq—safe, caring schools—and supporting students' emotional well-being. Happy, healthy students succeed, so we've added mental health support to education services in every school.

To our youth: if you or someone you know is facing bullying or struggling, reach out. Talk to a parent, teacher, or trusted friend. Call the Nunavut Kamatsiaqtut Help Line or visit the Government of Nunavut's website for mental health resources.

Let's all work together to create safe, supportive schools for all students and staff.

Quana, Mr. Speaker.

>> *Applause*

Speaker: Minister's Statement. Hon. Minister of Community and Government Services, Mr. Joanasie.

Minister's Statement 535 – 6(2): National Public Alerting System (NPAS)

Hon. David Joanasie (interpretation): Mr. Speaker, over the last year, Nunavut Emergency Management has worked closely with the Royal Canadian Mounted Police 'V' Division to ensure the availability of emergency response tools to support Royal Canadian Mounted Police members as they work serving Nunavummiut.

Mr. Speaker, one of these tools is the National Public Alerting System, also known as Alert Ready. The Alert Ready system is designed to deliver critical and potentially life-saving alerts to Canadians directly through their cellphone and broadband connection. Since onboarding our policing partners, the system has been activated to inform the public of five (5) separate real-life hazardous and life threatening events.

Mr. Speaker, while the use of this tool increases our ability to support emergency response, it has come with some challenges. Specifically, the system, which is implemented at the national level, was not designed to support communication in each of Nunavut's Official Languages.

Mr. Speaker, I want to thank the Language Commissioner and community members who assisted our team as we collaborated with our federal partners to find a solution. I am pleased to confirm that with the latest use of the Alert Ready system each of Nunavut's Official Languages were accessible.

Mr. Speaker, we will continue to work with our partners in public safety to ensure the wellbeing and security of our communities.

Thank you, Mr. Speaker.

>> *Applause*

Speaker: Minister's Statement. Hon. Minister of Justice, Mr. David Akeeagok.

Minister's Statement 536 – 6(2): Special Constable Baker Lake

Hon. David Akeeagok: Mr. Speaker, I rise today to inform the Legislative Assembly that on December 1, 2024, the RCMP "V" Division and the Baker Lake Detachment held an important event to recognize Special Constable, Andrew Ooyoumut, who tragically lost his life while on duty near the community in 1954.

During the ceremony, a plaque was unveiled in his honour highlighting the courage and dedication of Special Constable Ooyoumut and that of the many Inuit Special Constables who have served in the north. Special Constable Ooyoumut has also been commemorated as the 227th member of the RCMP Honour Roll, which recognizes officers who made the ultimate sacrifice in serving their community.

The ceremony was attended by Special Constable Ooyoumut's daughter, Sally Webster, and his granddaughter, Deborah Webster, whose presence provided a personal connection to the event and underscored the enduring legacy of Special Constable Ooyoumut.

The RCMP also displayed the faces and names of several other Inuit Special Constables in the Detachment lobby during the dedication. Following the ceremony, a community feast was held celebrating the memory of the Special Constables, featuring a heartfelt presentation by the family of Special Constable Ooyoumut about his life and service.

I am profoundly moved by the bravery displayed by Special Constable Ooyoumut and all Inuit Special Constables. Their contributions have been integral to our history, and it is important that we honour their stories and their sacrifices.

I extend my sincere thanks the RCMP's senior leadership, the Baker Lake Detachment, Special Constable Ooyoumut's family, and the community of Baker Lake for this meaningful tribute.

Thank you, Mr. Speaker.

>> *Applause*

Speaker: Item 3, Members' Statements. Member for Amittuq, Mr. Kaerner.

Item 3: Members' Statements

Member's Statement 730 – 6(2): Mental Health Issues

Mr. Kaerner (interpretation): Thank you, Mr. Speaker. And good afternoon to the people of Nunavut.

Mr. Speaker, I rise today to extend my appreciation and also as we have heard that he's a young person, Mr. Speaker. I commend the Rangers and all the people who had done search and rescue and all those people who had failed. It's very difficult to try and decide in life when we have to deal with hardship. So with Igloolik's loss, I rise today.

Last fall during the session I spoke about mental illness and also mental health. He had mental issues as well. I send my condolences to the parents of the individual, but also I would like to extend my appreciation to the people who did the search and rescue. It's very difficult at times during like these times. I know it's a very difficult situation, especially in the community when this kind of situation occurs, and it has an impact on our lives, especially when it has to do with mental health issues.

Mr. Speaker, when the oral question period arrives I will be asking questions to the Minister of Health in regards to this issue, as to how the government can work harder to make sure that we work and help and serve the mental health, people with mental health. I apologize for my emotion. And I know that I'm going through difficult times as well.

I will be asking questions to the Minister of Health in regards to the mental health issues that we face in the communities. Thank you, Mr. Speaker.

Speaker: Member's Statement. Member for Netsilik, Mr. Quqqiaq.

Member's Statement 731 – 6(2): Anti-Bullying

Mr. Quqqiaq: Thank you, Mr. Speaker. Mr. Speaker, I rise today and it's Pink Shirt Day. It's all about cultivating a community of kindness. Mr. Speaker, together we can each help nurture a sense of belonging where we live, work, and go to school.

Mr. Speaker, it all starts with a small gesture, a kind word, an offer of support or understanding. Mr. Speaker, by sprinkling these seeds of empathy and compassion we can work towards a world without bullying, and let kindness grow through all of our communities.

Mr. Speaker, likewise much love for all, and hate none. Thank you, Mr. Speaker.

>> *Applause*

Speaker: Member statement. Member for Aggu, Ms. Quassa.

Member's Statement 732 – 6(2): Condolences

Ms. Quassa (interpretation): Thank you, Mr. Speaker. Good afternoon, my colleagues, and also to the people of Nunavut and to the people of Igloolik.

We don't usually speak on behalf of individuals, Mr. Speaker. I send my condolences to the family that had lost their child and they had said:

“All of us families, each and every one, we want to thank each and every one of the Members of the Legislative Assembly when we're going through very difficult times as a family. We extend a huge appreciation for thinking of us.”

That's what the parent had said. I told her that I would make that statement in the House. And thank you for caring for other people, because that's what we're supposed to do, rather than, I did not want to neglect it as I promised that I would speak to this. Thank you, Mr. Speaker.

>> *Applause*

Speaker: Condolences to the family. Member's Statement. Member for Kugluktuk, Mr. Anavilok.

Member's Statement 733 – 6(2): Inuinnaqtun Language

Mr. Anavilok: Thank you, Mr. Speaker, Nunavummiut. Yesterday I had questions for the Minister of Languages on revitalization of our Inuinnaqtun language in the west Kitikmeot. I was targeting the young people that already lost their Inuinnaqtun language, and during my questions I stated that I'm going to be reading them in English so they can understand. I also mentioned that they have better answers directly from the minister, knowing that they will be listening.

All the replies I got were in Inuktitut language, another dialect which I respect. I respect the translators. But for myself, when it comes to helping the young people, our future, especially revitalization of our languages, you know, I think the best way is to give them answers in English, the ones that can't understand the language anymore. I hope in the future that that's pointed out or noted for trying to help out young people that lost the language. (interpretation) Thank you, Mr. Speaker.

Speaker: Member's Statement. Member for Iqaluit-Sinaa, Ms. Brewster.

Member's Statement 734 – 6(2): Support for Midwifery Services

Ms. Brewster: Thank you, Mr. Speaker. I would just like to begin by thanking the Member for Amittuq for sharing with us that he is going through some mental health issues. We have a long way to go in destigmatizing mental health, and it's very important to hear from people publicly that they too struggle. And you know that you have my full support with whatever you need.

Mr. Speaker, I rise today to address the long-standing need for enhanced midwifery services in Nunavut. Mr. Speaker, our predecessors in the second Legislative Assembly of Nunavut worked very hard to bring forward Nunavut's own *Midwifery Profession Act*, which was intended to give Nunavummiut the option to give birth with a registered midwife or through the modern medical process in a clinical setting.

Having skilled midwives in our communities would allow for community-based birthing experiences, being surrounded by family and celebrated with culture and tradition. And my colleague from Uqqummiut has also spoken eloquently on this issue.

At the time of passing this important legislation, Mr. Speaker, almost two decades ago, there was a midwifery education program at Nunavut Arctic College and a number of training opportunities for maternal care workers.

Unfortunately, the Nunavut midwifery initiative has not grown in the manner that was anticipated. Without local or regionally based midwives, expectant mothers are still required to travel far away from their homes and families for several weeks ahead of their delivery date.

Mr. Speaker, this can be a lonely and stressful experience, not just for the mothers but for the children and family members who are left behind in their communities to await the birth.

In 2019 the medical travel program, which is primarily funded by the Non-Insured Health Benefits program, was changed to allow an escort to accompany a pregnant woman travelling away from her home for her delivery. And most recently, the Inuit Child First Initiative has covered the cost for children to also travel with their parents when there was no child care available at home.

Mr. Speaker, I request unanimous consent to conclude my statement.

Speaker: Member is seeking unanimous extent to conclude her statement. Are there any nays? There are none. Please proceed.

Ms. Brewster: Thank you, Members. More recently, the Inuit Child First Initiative has covered the cost for children to also travel with their parents when there is no child care available at home.

The future of both of these federal funding supports is now questionable, as mentioned by the Minister of Health earlier.

I strongly encourage our government to renew and reinvigorate its support for the midwifery profession in our territory. Ideally, all mothers should have the choice to deliver their baby with a midwife's support. Thank you, Mr. Speaker.

Speaker: Member's Statement. Member for Uqqummiut, Ms. Killiktee.

Member's Statement 735 – 6(2): Jordan's Principle

Ms. Killiktee (interpretation): Thank you, Mr. Speaker. I rise at this time and it's a good opportunity. I am pleased to mention on the Jordan's Principle that funds were targeted for our youth. This program will end by March 31, which is unfortunate. But I could say or thank my constituents in Uqqummiut. Since the advent of the program for children in particular, help in food security for children and families. It has been a lot of comfort and has been very positive for families and have no doubt having a lot of benefits to our communities in the Arctic.

On behalf of my constituents I would like to express my gratitude. This has been very positive for my constituents, the mothers who have approached me at this time in particular when the program is ending, and they have humbled themselves oftentimes in their gratitude since the program was started, Mr. Speaker.

Mr. Speaker, the hunger had really reduced in our communities, with increase in school attendance. Children are less involved in vandalism, and so forth, in our communities. And not just by way of food security, but also clothing, household goods. The support has been very positive, and I thank the federal government. It has brought a lot of comfort for parents, mothers in particular, who struggle with day-to-day needs of their loved ones. This will be missed a lot if not reinstated.

Again, I would like to extend my member statement, Mr. Speaker.

Speaker: Member is seeking unanimous consent to conclude her statement. Are there any nays? There are none. Please proceed.

Ms. Killiktee: Thank you, Mr. Speaker. A short conclusion. As the Minister of Health mentioned, this has been very beneficial to many children and families and has touched many in Nunavut, so I would like to thank him very much. I would like to thank the Hon. Minister Main very much, and thanks again for allowing me to conclude my statement.

Speaker: Member's Statement. Member for Iqaluit-Manirajak, Mr. Lightstone.

Member's Statement 736 – 6(2): Inuit First Child Initiative

Mr. Lightstone: Thank you, Mr. Speaker. I would like to join my colleagues in raising, sharing concerns I've heard from my constituents about the uncertainty with relation to the Inuit Child First Initiative. I would also like to thank the Minister of Health for his member statement highlighting the different impacts that it has had on Nunavummiut through school food programs, medical travel assistance, and food voucher programs, and the minister's update on those ongoing discussions and the advocacy that he has done through his role as Minister of Health.

Mr. Speaker, one of the very important requests that I had received from a constituent was to also put forward similar questions to the premier. And as such I would like to put the premier on notice that at the appropriate time I will be asking what sort of advocacy the premier has done, utilizing his special role as premier to advocate for the continuation of Jordan's Principle, but more importantly the Inuit Child First Initiative, given the impacts that it has had on so many Nunavummiut. Thank you, Mr. Speaker.

Speaker: Member's Statement. Member for Rankin Inlet South, Mr. Kusugak.

Member's Statement 737 – 6(2): Thank Emergency Services

Hon. Lorne Kusugak (interpretation): Thank you, Mr. Speaker. Mr. Speaker, I would like to express my gratitude. As we heard late yesterday afternoon a plane had to land in an emergency in Rankin Inlet, and there were no casualties. The front wheel couldn't go down, and it became an emergency situation. There were no casualties or injuries.

I would like to thank the fire department and emergency crew in Rankin Inlet. They have to be alert all the time, and they were at the Rankin Inlet airport. And the nurses was available at the nursing station, everyone was prepared for the incident.

In particular I would like to thank the pilots who were in dire straits. They were able to land without the front wheel down, and there was no incident whatsoever with the situation yesterday. Thank you, Mr. Speaker.

Speaker: Member's Statement. Member for Pangnirtung, Ms. Nakashuk.

Member's Statement 738 – 6(2): Anti-Bullying

Hon. Margaret Nakashuk (interpretation): Thank you, Mr. Speaker, and I thank my colleagues for their statements. Very interesting.

I would like to add the Nova Scotia the pink T-shirt started in Nova Scotia, and today we could say wherever we may be, even as elders, what people have to go through, verbal

insults at workplace, in schools, and even at our skin colour or even for being an Inuk. And the Pink Shirt Day shows what we don't want to see out there.

Oftentimes we have heard, even by way of social media and recordings made on cell phones, what people feel negatively about someone else and they many expose these. And these are not right. It's not just children who have to face bullying; also elders as well through social media, workplace or even at the Arctic college level. Everywhere we have heard of bullying.

As adults we have to take notice of what we express to others. It could be saying things. And we could tell people what should not be taking place. If the principle is not listening, let's tell people. Even as women and even at the workplace. This is something we should give notice, even as elders, Mr. Speaker.

>> *Applause*

Speaker: Member's Statement. Member for Gjoa Haven, Mr. Akoak.

>> *Laughter*

Member's Statement 739 – 6(2): Gjoa Haven Emergency Services

Speaker: Thank you. I just want to say a big thank you to some of my constituents in Gjoa Haven, who volunteer their time 24-7. They don't get paid. They are looking after the community members. They are always on standby and they don't get paid to support our community in Gjoa Haven.

These are our own ambulance drivers. They are looking after people. I just wanted to say a great big thank you to them for looking after the community members when the community member is in need and a very big thank you. Quana.

>> *Applause*

Speaker: Item 4, Returns to Oral Questions. Item 5, Recognition of Visitors in the Gallery. Member for Quttiktuq, Mr. David Akeeagok.

Item 5: Recognition of Visitors in the Gallery

Hon. David Akeeagok: Thank you, Mr. Speaker. Mr. Speaker, there are three individuals here I would like to recognize who do great work for the Royal Canadian Mounted Police, our very friendly and superb Chief Superintendent, Andrew Blackadar, our commanding officer for the Nunavut 'V' Division.

>> *Applause*

Hon. David Akeeagok: Sergeant Beth Philip (ph). She's the district officer for the west, and one of the most competitive players in the Christmas Games here in Iqaluit.

>> *Applause*

Hon. David Akeeagok: Staff Sergeant Major Pauline Millicent (ph), the warrant officer for Nunavut Royal Canadian Mounted Police.

>> *Applause*

Speaker: Welcome to your Assembly. Recognition of Visitors in the Gallery. Item 6, Oral Questions. Member for Iqaluit-Manirajak, Mr. Lightstone.

Item 6: Oral Questions

Oral Question 1105 – 6(2): School Bus Safety

Mr. Lightstone: Thank you, Mr. Speaker. In light of Pink Shirt Day and the intent of standing up against bullying, I will be directing my questions to the Minister of Education regarding school bus safety.

Mr. Speaker, this is an issue that I have raised in the past but it seems that the concern is ongoing and possibly deteriorating.

Mr. Speaker, I was recently informed of an incident where a child on a school bus deliberately reached out and knocked the driver's hearing aid out of their ear. The bus driver was then forced to find a safe area to pull over and find his hearing aid, and replace it before they could safely proceed.

Mr. Speaker, this kind of behaviour not only disrupts the school bus schedule, but is also potentially dangerous, not to mention disrespectful and abusive.

I would like to ask can the minister provide an overview of what policies her department has in place to ensure that school busses are safe for students and drivers alike. Thank you, Mr. Speaker.

Speaker: Hon. Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for raising questions on Pink Shirt Day. We recognize that sometimes on our school busses, that's a place where bullying can happen, unfortunately. However, we do have bus monitors to

help foster a calm and safe environment on the busses. So in communities where bus services are contracted by a third party, the district education authority may request that a bus monitor be included in the bussing contract. When bus services are being contracted there is a form that the district education authorities fill out with assistance from the department. On this form the district education authorities can select whether or not they want the contract to include a monitor.

This term is a very great thing for our safety of our busses and we do have work with the district education authority on policy in regards to bullying on busses and we do continue to work with the Coalition of Nunavut District Education Authorities to ensure that all district education authorities develop and implement a bussing policy. Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Speaker. I also would like to thank the Iqaluit district education authority to selecting to use bus monitors on our school busses, but unfortunately, Mr. Speaker, incidents still happen.

I would like to ask the minister if she can clarify whether her department's incident reporting database is also being used to collect reports of incidents on school busses, and if so, if she would be able to shed light on the situation. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for the question. Yes, in Iqaluit we do have four bus monitors within the city that work on the busses. In terms of the violence reporting tool, a bus driver or a bus monitor can report incidents to the staff at the school level to input that information.

As far as if there is any information on there on that database, I would have to get back to the member on that. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Speaker, and I appreciate the minister's response. Although we can debate the issue of school bus safety in the House, I'm not sure we can fully appreciate how the school bus environment can impact our children and how they deal with the rest of the school day.

Mr. Speaker, I personally found the opportunity to go on a ride-along with our RCMP to be an eye-opening and informative experience, and I would like to ask if the minister would commit to inviting me to join her on a ride-along on Iqaluit school busses to

enable us to get a better appreciation of some of the challenges in maintaining school bus safety. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for that suggestion. I can definitely look into that and get back to the member on that question. Thank you, Mr. Speaker.

Speaker: Just like that, members, nice and quick. Member for Baker Lake, Mr. Simailak.

Oral Question 1106 – 6(2): Special Needs Washroom for Baker Lake School

Mr. Simailak: Thank you, Mr. Speaker. Good afternoon, all. People of Baker Lake as well, good afternoon.

Mr. Speaker, I would like to direct my question to the Minister of Education. Mr. Speaker, I am sure the minister will recall that I have advocated very strongly for the proper renovation of a special needs washroom at the Jonah Amitnaaq secondary school, despite me repeatedly asking questions, sending e-mails, and addressing this issue in the House.

I'll refer back to the Fall Sitting of the Committee of the Whole when I was strongly advocating during the Committee of the Whole that the projects did still not meet the needs of the student and the staff. \$300,000 was spent on a job that is not good enough. It was called a point of order by the minister, stating what I was stating was not true.

However, the project was declared complete, even though it still did not meet the needs of the student.

Can the minister confirm whether or not she has received any recent correspondence regarding the special needs washroom at the Jonah Amitnaaq high school in Baker Lake. Thank you, Mr. Speaker.

Speaker: Hon. Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member bringing up the Baker Lake high school accessible washroom.

Yes, I do have correspondence that states that following further consultation with the school staff, our physiotherapist indicated that more space in the washroom could accommodate two support staff in the room. So the department has reassessed the requirements and is working with an engineer consultant to determine the best possible

solution, and we're committed to further modifying the washroom to meet the needs of our students. Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Simailak.

Mr. Simailak: Thank you, Mr. Speaker. I'm glad the minister is finally coming on board with meeting the needs of the students, not just referring to codes that some engineer thousands of miles away puts together without actually planning, making proper plans.

We come here, Mr. Speaker, to advocate for our constituents' needs and for ministers to try to silence us is not respectable. I would appreciate if we are heard more carefully and listened to so that we can work together for the betterment of Nunavummiut.

Mr. Speaker, can the minister confirm that the Department of Education is committed to ensuring that special needs students across Nunavut will receive the necessary accommodations so that they can be supported to meet their learning goals. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker. To the point of the point of order, I was speaking about a letter that the member had indicated that was not sent, which was in fact sent to the member, and that was around that issue.

Going forward, yes, we are committed to working further to ensure that the school meets the needs for the student and the staff. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Mr. Simailak.

Mr. Simailak: Thank you, Mr. Speaker. Mr. Speaker, I shall correct the minister regarding the point of order I was referring to. I'll read from the Blues.

"It was originally a 12-foot expansion but that dropped, fell substantially, and it cost \$300,000. They were supposed to work closely with Community and Government Services. That's not right. It shouldn't have happened. There was proper planning with the school on how it should be so they can properly facilitate the special needs washroom. Somewhere along the line either Education or the Community and Government Services dropped the ball, spent \$300,000 for a washroom that cannot be properly and safely used by the student, teacher, and assistant that helps the student. But there has to be two adults to help the student use the special needs washroom. So this was a vast waste of money on this one project."

That's when the minister called point of order on me. Mr. Speaker, the minister needs to do a bit more work.

Mr. Speaker, the Baker Lake District Education Authority has advise me that the new plans for renovating the washroom to accommodate the student's support equipment are being drawn up based on guidance from the student support providers and the principal of the school. At the appropriate time I will be tabling correspondence from the district education authority on this issue.

Mr. Speaker, will the minister commit to ensuring that the appropriate renovations to the special needs at the Jonah Amitnaaq school will be undertaken at the highest priority, and when will the project be completed. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker. This washroom is on our highest priority in ensuring that we do make the adjustments further to the washroom. We will ensure that we can get that done as soon as possible.

I commit to sending a letter to the MLA about the issue and when, give him the details outlining the expected date. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Aggu, Ms. Quassa.

Oral Question 1107 – 6(2): Airport Infrastructure

Ms. Quassa (interpretation): Thank you, Mr. Speaker.

(interpretation ends) My questions today are for the Minister of Economic Development and Transportation and they concern the issue of airport infrastructure. As the minister will recall, he tabled his department's updated 20-Year Airport Capital Needs Assessment during the Legislative Assembly's sitting of March 10, 2023. That report identifies a number of immediate issues with Igloolik's current airport, including the need for overlay work on the apron, taxiway, and runway. Can the minister confirm when this work will begin. (interpretation) Thank you, Mr. Speaker.

Speaker: Hon. Minister of Economic Development and Transportation, Mr. David Akeeagok.

Hon. David Akeeagok: Thank you, Mr. Speaker. Mr. Speaker, I don't have that information right in front of me, in terms of which projects on the overlay is being done. I do have the ones that have been approved by the program, but Igloolik doesn't appear to be in here, but I will confirm. Thank you, Mr. Speaker.

Speaker: First supplementary Ms. Quassa.

Ms. Quassa (interpretation): Thank you, Mr. Speaker. And I will look forward to that information.

(interpretation ends) Mr. Speaker, as the minister is aware, Igloolik's population has grown in recent years but the size of the community's airport terminal building has remained the same. Concerns have been raised with me that the aging building is no longer adequate for the needs of the flying public.

Mr. Speaker, I recognize that the federal program which funded the construction of new airport terminal buildings in communities like Rankin Inlet has ended. Can the minister clearly describe what options are available to expand or replace Igloolik's airport terminal building. (interpretation) Thank you, Mr. Speaker.

Speaker: Minister of Economic Development and Transportation, Mr. David Akeegok.

Hon. David Akeegok: Thank you, Mr. Speaker. Mr. Speaker, our department has utilized the National Trade Corridors Fund to fund six airports and that's the approach that we've been maintaining as a department and as a government to try and help with our aging infrastructure. That's one of the processes that we use. The other process that we can use is to do it within our own Legislative Assembly. So we have those two options. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Ms. Quassa.

Ms. Quassa (interpretation): Thank you, Mr. Speaker. In regards to aging infrastructure, I think it would be best to replace or renovate them following the size of the growing population.

(interpretation ends) Mr. Speaker, this week's bombshell announcement about the sale of Canadian North has focused attention on the need for the reliable and affordable air service to all 25 Nunavut communities. I recognize that Canadian North has acquired some newer-model jets in recent years, but it is my understanding that the average age of an ATR fleet which serves communities like Igloolik and Sanirajak is close to 30 years. The planes are not quite as old as my community's power plant, but they're heading in that direction.

Can the minister indicate what discussions he plans to have with Canadian North's new owners regarding how to better align airport infrastructure with fleet modernization. (interpretation) Thank you, Mr. Speaker.

Speaker: Minister of Economic Development and Transportation, Mr. David Akeeagok.

Hon. David Akeeagok: Thank you, Mr. Speaker. Mr. Speaker, regardless of what airline is going into our communities, we take every of our infrastructure into consideration of what can go into the communities, and Igloolik is one community that is capable of having airlines as such.

I'll continue to have dialogues with any of our airlines that are going to our communities to ensure that our air strips and our terminals are safe and operational. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Arviat South, Mr. Savikataaq.

Oral Question 1108 – 6(2): Number of Houses Constructed in Arviat

Mr. Savikataaq (interpretation): Thank you. (interpretation ends) Before I go on to my questions, I would like to express my sincere gratitude for the outcome of the airline incident in Rankin Inlet. I'm very happy for the passengers and the pilots were there, because the passengers are at the mercy of the pilots. I would like to commend the pilots of the flight that were cool, calm, and collected, and made a safe landing.

>> *Applause*

Mr. Speaker, I would like to direct reply questions to the Minister responsible for the Housing Corporation.

Mr. Speaker, on the first sitting day I tabled some e-mail correspondence between the mayor of Arviat, Joe Junior Savikataaq, and the president of the Nunavut Housing Corporation, Mr. Devereaux. The mayor of Arviat asked a very simple question to the president of the Nunavut Housing Corporation. It states:

“Would you be able to help us clear the air in providing us simple, true accurate numbers? I'm not interested in the number of permits issued, number of doors or land acquired. I am interested in the number of homes where Kivalliqmmit can move into and live in. Since Nunavut 3000 has been announced, how many houses have been completed in Arviat, Baker Lake, Coral Harbour, Chesterfield Inlet, Naujaat, and Whale Cove?”

Mr. Speaker, can the minister enlighten us so that I can confirm the mayor of Arviat and other communities about the number of houses that have been completed since then. Thank you, Mr. Speaker.

Speaker: Hon. Minister responsible for the Nunavut Housing Corporation, Mr. Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. Mr. Speaker, I will read off the attachment that was joining the e-mail exchange between both Mayor Junior Savikataaq and the president of the housing corporation, which unfortunately wasn't tabled with the document.

In that attachment, Mr. Speaker, it clearly states that the occupancy permits that were granted, units completed and ready to occupy and I'll use Arviat as an example, in 2022, 13 years and 2023, 12 units for a total of 25. In Baker Lake, a total of four. Naujaat, a total of 30. And Rankin Inlet, a total of 54.

If my colleague wishes, I will be more than happy to table this document that occupied the letter that was tabled. And I can do that as early as it is possible for me to do so. Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Speaker. Mr. Speaker, I live in Arviat and I'm very familiar with what's going on there. Since Nunavut 3000 was announced an 8-plex and a 12-plex have started construction, and neither of them are complete yet. No units have been turned over since the Nunavut 3000 was announced.

I would like to ask the minister can the minister tell me which houses in Arviat have been turned over and completed since Nunavut 3000 was announced. I live there. There has been no new construction in Arviat other than the 8-plex and the 12-plex. None. I live there. I just come from there a week ago.

Can the minister please clearly state which houses has been completed, other than the 12-plex and 8-plex which are under construction. Thank you, Mr. Speaker.

Speaker: Minister responsible for the Nunavut Housing Corporation, Mr. Kusugak.

Hon. Lorne Kusugak: It begs the question why the letter, if you knew about that part of it.

But Mr. Speaker, Nunavut 3000 started when this government was elected. It includes everything from the day that we became elected officials for the government of the day. So all the houses that were completed during our governance are included in the Nunavut 3000.

The actual announcement of the Nunavut 3000 plan, the strategy, took a while to complete, because it took in all the ideas and thoughts and discussions we had when we were in Cambridge Bay. But it includes everything. We've never set said that Nunavut

3000 starts on April 1 or October 18. It starts from when this government started, and so we include everything in the housing that was started this year, or the year that we became elected and were appointed as MLAs and officials. So that's where we start from, Mr. Speaker. Thank you.

Speaker: Second and final supplementary, Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Speaker. Mr. Speaker, I thought that each mandate from each government was for that particular government, and that's how you graded or evaluated how the performance is going.

But Nunavut 3000 was announced, yes, in the life of this Assembly, and there were other houses being constructed since Nunavut began, but I'll rephrase it, then.

The mandate said that 1,000 units minimum would have to be constructed during the mandate of this government. Other than the 12-plex and 8-plex which are under construction and the 8-plex might be done before the end of this Assembly. The 12-plex, I doubt that any units will be completed in that building before the end of this Assembly.

I'll ask the minister how many houses in Arviat have been completed and moved into since the life that we're part of this Assembly, as part of this ASSEMBLY'S mandate. Thank you, Mr. Speaker.

Speaker: Minister responsible for the Nunavut Housing Corporation, Mr. Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. Mr. Speaker, our government continue, especially for a government like this, that is a consensus government, we celebrate every government's achievements.

Just as in the previous government when Mr. Savikataaq was the premier of the day, we celebrated events and accomplishments that were started by the government before then.

Just like last month we celebrated the opening of the elder care facility in Rankin Inlet, which was started in the previous government.

So the celebrations continue, and the openings and moving forward of things from this government go on, whether it started from this government or not.

I am very hopeful that the next government, the next Assembly will be able to celebrate even more houses that were started by this government.

Mr. Speaker, the goal behind Nunavut 3000 is to build as many houses as we can. Now the plan behind it and how we started from this government is we got into building bigger units, Mr. Speaker, and building bigger units means it takes more time.

We are very fortunate to be working with Nunavut Construction Corporation, who is undertaking to build building units in every single community in Nunavut. Never been done before. And my hat is off to Clarence and his team for being able to accomplish this.

In terms of the units in the Arviat in the fall 2023, there was an 8-plex and a 12-plex built in Arviat. The framing went in in September 2024 for both units, and it's at 70 percent complete for the 8-plex and 43 percent for the 12-plex. We're anticipating that the summer of 2025 the 8-plex will be complete, and the best I've heard so far is the winter of 2025 the 12-plex will be complete. Those are the details I have so far. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Uqqummiut, Ms. Killiktee.

Oral Question 1109 – 6(2): Public Trustee and Guardian

Ms. Killiktee: Thank you, Mr. Speaker. My questions are for the Minister of Justice, and they concern the issue of his department's office of the Public Guardian and Trustee.

Mr. Speaker, as the minister is aware, the office of the public trustee and guardian administers trusts and estates on behalf of Nunavummiut who passed away without a will.

Mr. Speaker, this office also supports people, they support people with disabilities and assist with personal affairs such as their health and financial decisions, in collaboration with clients and their families.

Mr. Speaker, the last time I raised this issue in the House, the minister indicated that the office of the public trustee and the guardianship was experiencing issues filling the vacancies in their office. Can the minister clarify how many positions in this office are currently filled and how many positions are vacant. Thank you, Mr. Speaker.

Speaker: Hon. Minister of Justice, Mr. David Akeegok.

Hon. David Akeegok: Thank you, Mr. Speaker. Mr. Speaker, the exact amount of how many positions are filled and are vacant, I do not have that, but I want to mention that a huge effort have taken place to fill those positions and to have the office functional. A lot of good work has taken place since the member questioned me on this, and I'm very

proud of that public trustee's office being a very operational today. Thank you, Mr. Speaker.

Speaker: First supplementary, Ms. Killiktee.

Ms. Killiktee: Thank you, Mr. Speaker. Yes, this is a very important position that we know here in Nunavut. Mr. Speaker, a number of my constituents continue to express their concerns to me about the length of time it takes for their files to make progress.

Mr. Speaker, I understand and recognize that these matters can be extremely complex, and do take time. However, I have been informed of some cases that have taken over seven years, over seven years to resolve.

Mr. Speaker, can the minister indicate how many open files are currently being dealt with, and what is being done in order to shorten the length of time it takes to resolve the files. Thank you, Mr. Speaker.

Speaker: Minister of Justice, Mr. David Akeeagok.

Hon. David Akeeagok: Thank you, Mr. Speaker. Mr. Speaker, for the public trustee files as of December 18, 2024, they have a total number of 596 files that are open. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Ms. Killiktee.

Ms. Killiktee: Thank you, Mr. Speaker, if I am correct with what you mentioned it was 598, that is ridiculous.

Mr. Speaker, I raised this issue during the Legislative Assembly sitting of June 8, 2022. At that time I expressed my concerns regarding the need to raise awareness in the smaller communities about the important role of this office.

Mr. Speaker, the Office of the Public Trustee and Guardian is located in Iqaluit, and the smaller communities do not have the access to the office itself. This can create barriers to access their services.

Also to add in, there are families that are waiting and want to go forward with their lives. Will the minister commit to having the Office of the Public Trustee and Guardian visit the smaller communities to raise awareness about this offices important role. Thank you, Mr. Speaker.

Speaker: Minister of Justice, Mr. David Akeeagok.

Hon. David Akeegok: Thank you, Mr. Speaker. Mr. Speaker, our department has started that by visiting two communities so far, and there are more communities that are going to be visited. The files that they are doing, a lot of them have legacy files. And as the member mentioned about a seven-year file, there are some files that are longer. It becomes very complex in terms of trying to resolve that, and it's something that needs to be dealt with in a very delicate way. And it's one that our office strives in ensuring to move forward.

One of the things that our office is starting to do is to go to the communities and to have radio shows regarding the will, the need to have a will is very important. It is far too often that without a will it gets into the hands of the government, and when it gets to the hands of the government, everything has to be followed in terms of the laws, of all the laws. That's where some of the grieving families get into a stressful situation, like my member said.

But it is something that we're trying to avoid, and having to have our staff available in Inuktitut, English, and French is a key thing that this Office of the Public Guardian and Trustee is striving for and is doing now. I hope in the future that it will be a lot faster returns for the grieving family. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Iqaluit-Sinaa, Ms. Brewster.

Oral Question 1110 – 6(2): Support for Midwifery Services

Ms. Brewster: Thank you, Mr. Speaker. Mr. Speaker, I would like to direct my question to the Minister of Health.

Mr. Speaker, in my member statement I spoke about the need for enhanced midwifery services in the territory. Can the minister provide an overview of how many midwives are currently registered to practise in Nunavut, and whether there are any plans to hire those midwives to provide additional support in communities which may be using the services of paramedics when there are nursing shortages. Thank you, Mr. Speaker.

Speaker: Hon. Minister of Health, Mr. Main.

Hon. John Main (interpretation): Thank you, Mr. Speaker, and also I would like to thank the member for her questions.

(interpretation ends) In terms of the midwife workforce, one of the main challenges we're having is around recruiting midwives. So in terms of the registration numbers for midwives, I'll have to get back to the member on that.

I can state that we have 12 positions within the maternal newborn health program. There are four positions located in Rankin Inlet, one in Arviat, two in Cambridge Bay, one in Iqaluit.

We have two regional manager positions, one each located in Cambridge Bay and Rankin Inlet. One territorial maternal newborn and midwifery service coordinator in Iqaluit, one regional maternal newborn outreach coordinator, and one maternity care worker position that are both located in Rankin Inlet. (interpretation) Thank you, Mr. Speaker.

Speaker: First supplementary, Ms. Brewster.

Ms. Brewster: Thank you, Mr. Speaker. I did sneak a second part into that question about whether or not these midwives or any midwives would be hired to provide additional support in communities which may be using the services of paramedics when there are nursing shortages. I see that as a great potential opportunity.

Mr. Speaker, it has been recently suggested that if funding is no longer available for children to travel with their pregnant mother, some women may decide not to leave their community to give birth, which could put their pregnancy at risk. Having midwives available to provide the necessary support and care could be a safe alternative. Can the minister clarify whether this issue has been addressed within his department. Thank you, Mr. Speaker.

Speaker: Minister of Health, Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Speaker. (interpretation ends) I appreciate the member raising the need for services in community.

The Department of Health does recommend routine visits during pregnancy every four weeks until 28 weeks are reached, and then every two weeks following that up until 34 weeks until the client leaves the community to their intended birth base.

Mr. Speaker, we are engaging with our partners with the vision of rebuilding a sustainable midwifery program, and this work extends beyond the redesign of the birthing centre model. It includes developing a recruitment and training plan for Inuit midwives.

Finally, I'll mention we do have a pilot project in Arviat, where an indeterminant community health nurse is managing the prenatal program and we're evaluating that as a model of care. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Ms. Brewster.

Ms. Brewster: Thank you, Mr. Speaker. I appreciate hearing about those initiatives. Anything that we can do to keep families together, especially during such a joyous occasion as a birth, is really important and I think leads to better health outcomes for not just the pregnant person, but also for all of the children involved.

Mr. Speaker, it is my understanding that one of the departmental programs proposed under the Territorial Health Investment Fund work plan for 2023-2028 was to establish a new chief nursing and midwifery office. Can the minister provide an update on that initiative and whether his department will indeed be renewing its support for the practice of midwifery in our territory and in our communities. Thank you, Mr. Speaker.

Speaker: Minister of Health, Mr. Main.

Hon. John Main (interpretation): Thank you, Mr. Speaker. (interpretation ends) Again I thank the member for this question. We're happy to report that the territorial chief nursing and midwifery officer position is filled, and as the member indicated, we do have funding for that position that has been extended to 2028. That position oversees the chief nursing officer as well as the chief midwifery officer.

There is a priority that's given right now to a recruitment and retention strategy, and we have some great partners in this work for our project with Ongomiizwin Indigenous Institute of Health, our partners steering committee on this project, to create a community-informed Inuit-led midwifery education curriculum, include Nunavut Tunngavik Pautuutit Inuit Women of Canada, and Aqquimavvik, Arviat Wellness Society. (interpretation) Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Aivilik, Mr. Malliki.

Oral Question 1111 – 6(2): Follow-up on Naujaat Teacher Status

Mr. Malliki: Thank you, Mr. Speaker. Mr. Speaker, I would like to direct my questions to the Minister of Education to follow up on some of the responses the minister provided yesterday.

Mr. Speaker, the minister indicated that ten out of 21 teaching positions at the school are filled and that there are enough teachers to maintain full-day programming. Can the minister clearly explain how a school can offer full-day programming with only half of its teaching staff. Thank you, Mr. Speaker.

Speaker: Hon. Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for the question. Yes, we do have ten of the 21 positions filled, and that is currently enough to

maintain full-day programming. We have long-term substitute teachers who continue to work daily to cover the vacant positions. Some of the vacant positions are not classroom teachers, but they include a learning coach and a language specialist.

With a small school population, we are also looking at the student enrolment numbers to see if the number of teachers is accurate; however, we do have enough staff there to cover the school programming and are ensuring that the school programming is continuing. Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Malliki.

Mr. Malliki: Thank you, Mr. Speaker. The Minister stated that Naujaat's Tuugaalik high school is back to full-day classes. It is my understanding that for some classes the students are in the classroom, but there is no teachers and supervision. They just sit in the classroom.

This is a concern, as it is not clear what would happen in case of emergency or a major disturbance like lights.

Can the minister provide an update on what measures are in place to ensure that everyone at the school is safe and accounted for in case of crisis situations. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for the question. If there are concerns of students not in a classroom without a supervisor, if the community can bring it forward to our attention we'll make sure we do our best to ensure that there is someone in there to ensure that things such as fights do not occur, as the member had stated.

However, we do have safety of our students that we do have as a top priority, and we continue to work with the community on a daily basis.

As I also stated yesterday, we have a new superintendent that is tasked to work on force and is actively working with the community. We just hope to keep supporting the school as much as we can. I'm ensuring that our department is keeping the school at top of mind to support in whatever way we can to deal with issues that arise. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Mr. Malliki.

Mr. Malliki: Thank you, Mr. Speaker. It's concerning that previous superintendent must have not worked with the school, because she keep mentioning the new superintendent.

Mr. Speaker, I appreciate Department of Education is taking steps to make sure that the school programming at Naujaat Tuugaalik school will continue with limited interruptions. However, parents and students are concerned with the level of education that students are receiving. They are concerned about whether students will still be able to graduate.

What specific steps will the minister be taking to provide extra support to high school students who need to have a good attendance, good grades to be able to earn their high school diploma. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for the question. I can confirm that the Department of Education has reviewed the students and what levels they need to graduate high school, and the programming that is being offered for the students do meet the requirements for the students to graduate in Naujaat. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Rankin Inlet North-Chesterfield Inlet, Mr. Sammurtok.

Oral Question 1112 – 6(2): Airport Infrastructure

Mr. Sammurtok (interpretation): Thank you, Mr. Speaker. Good afternoon to the people of Chesterfield Inlet and Rankin.

Mr. Speaker, my questions today are for the Minister of Economic Development and Transportation. As the minister will recall, I have asked many questions during the current Legislative Assembly regarding the airport infrastructure in Rankin Inlet and Chesterfield Inlet. I am very proud to have been able to vote in favour of capital funding for the construction of the new airport terminal buildings in both communities during the current Legislative Assembly.

When I last raised this issue during the recent Fall Sitting, the minister indicated that the new airport terminal building in Chesterfield Inlet would be “ready to be occupied before the end of 2024.”

Mr. Speaker, it is now the end of February 2025. Can the minister provide an update today as to when my constituents of Chesterfield Inlet will be able to begin utilizing the new airport terminal. Thank you, Mr. Speaker.

Speaker: Hon. Minister of Economic Development and Transportation, Mr. David Akeeagok.

Hon. David Akeeagok: Thank you, Mr. Speaker. Mr. Speaker, these constructions, the timelines do vary in terms of what new things show up and that, but for Chesterfield Inlet, I'm very proud to say that as of yesterday we should have been given the opportunity to have the occupancy, but we have not moved in yet. So that February is right here and I look forward to opening that new building. Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Sammurtok.

Mr. Sammurtok: Thank you, Mr. Speaker. (interpretation) It's great news to hear that.

(interpretation ends) As the minister is aware, the runway in Chesterfield Inlet's airport is the second shortest one in the region. It is my understanding that the runway is only 3,600 feet in length, which is 200 feet shorter in the runway in Naujaat airport. The short length of the runway reduces the availability of payload that the air carriers can transport to the communities, as well as reducing opportunities to use larger aircraft which can carry more passengers.

When I last raised this issue during the recent Fall Sitting, the minister was unable to provide an update on what is being done to seek funding for extension of the runway. Can the minister provide an update today on this issue. Thank you, Mr. Speaker.

Speaker: Minister of Economic Development and Transportation, Mr. David Akeeagok.

Hon. David Akeeagok: Thank you, Mr. Speaker. (interpretation) Mr. Speaker, it's great to hear that these are wrapping up in construction and use.

(interpretation ends) In terms of the runway extensions, I know numerous members have asked and have requested for this. At this time under our current capital budgets, I don't have anything for extension of any air strips that are within our communities, and up until then I cannot commit to seeing any extensions of runways.

I know our department has done studies in various communities, and when those studies are done it then gets added in as part of our capital, and our opportunity to look for federal funding related to airports. And so we'll continue to do that, but at this point in time I cannot commit or even provide a timeline as to when that request will be honoured. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Mr. Sammurtok.

Mr. Sammurtok: Thank you, Mr. Speaker. The minister just said he would look at it tomorrow.

Mr. Speaker, as the Member for Rankin Inlet North-Chesterfield Inlet, I fly on Calm Air to Chesterfield Inlet constituency, meet visitors, and I travel on Canadian North to Iqaluit for sittings of the Legislative Assembly. When I'm in Rankin Inlet I drive my truck to the meetings.

Mr. Speaker, in light of this week's bombshell announcement concerning the sale of Canadian North to the parent company that owns Calm Air, will the minister commit to sitting down with the new owners to identify areas of improving airport infrastructure in the Kivalliq. Thank you, Mr. Speaker.

Speaker: Minister of Economic Development and Transportation, Mr. David Akeeagok.

Hon. David Akeeagok: Thank you, Mr. Speaker. Definitely. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Netsilik, Mr. Quqqiaq.

Oral Question 1113 – 6(2) Nunavut Housing Corporation Activities in the Kitikmeot

Mr. Quqqiaq: Thank you, Mr. Speaker. Mr. Speaker, my questions are for the Minister responsible for the Nunavut Housing Corporation.

Mr. Speaker, as the Member of the Legislative Assembly representing the constituency of Netsilik, I continue to be a strong advocate for housing needs in the communities of Taloyoak and Kugaaruk.

Mr. Speaker, as the minister will recall, the Nunavut Housing Corporation and the Kitikmeot Inuit Association issued an announcement in May of 2024 concerning the signing of a new partnership agreement which is intended to “deliver a new initiative called the Nunavut Pathway to Home Ownership pilot program.”

Mr. Speaker, during our recent Fall Sitting I again emphasized the importance of ensuring that innovative programs like there be accessible to residents of all Nunavut communities, not just those who live in regional centres.

Mr. Speaker, can the minister clarify the timeline for expanding this program to other communities in the Kitikmeot, including Kugaaruk and Taloyoak. Thank you, Mr. Speaker.

Speaker: Hon. Minister responsible for the Nunavut Housing Corporation, Mr. Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. I appreciate the question from my colleague.

Mr. Speaker, we're just past the halfway part of the agreement to work with them. It's a pilot project, Mr. Speaker. And I believe that once the pilot project is complete we will be moving forward trying to find more innovative ways to create those kind of partnerships with the regional Inuit association, not just in the Kitikmeot but across Nunavut where there are parties interested in creating home ownership for Nunavummiut.

We would like to work with as many organizations, especially the Inuit organizations, to get into partnership so that we have more home owners, more educated homeowners, and how it is to own a home.

I really look forward to the pilot project being completed and gain as much insight into that as possible so we can bring the positive impacts of that to communities across Nunavut. Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Quqqiaq.

Mr. Quqqiaq: Thank you, Mr. Speaker. Mr. Speaker, as the Member of the Legislative Assembly for Netsilik, I am proud to have been able to vote to prove millions of dollars in capital funding for the Nunavut Housing Corporation to construct new public housing units in the Kitikmeot and other regions.

Mr. Speaker, as the minister will recall, the Nunavut Housing Corporation and NCC Development issued an announcement on January 31, 2024 concerning the signing of the 2024 annual allocation and purchase agreements and the number of new housing units planned to start construction during the year.

Mr. Speaker, can the minister confirm when the 2025 annual allocation and purchase agreements will be signed with NCC Development, and can he confirm how many new units are planned for to start construction in Taloyoak and Kugaaruk later this year. Thank you, Mr. Speaker.

Speaker: Minister responsible for Nunavut Housing Corporation, Mr. Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker. Mr. Speaker, we continue down the path of Nunavut 3000 and the commitments in those documents will continue this summer. We continue to work on the units that are currently in those communities of his riding in Kugaaruk and Taloyoak. In 2026 we do have some other buildings that we are building across the territory that are outlined in the Nunavut 3000 target builds, Mr. Speaker. Those targets have not changed. Thank you, Mr. Speaker.

Speaker: Second and final supplementary, Mr. Quqqiaq.

Mr. Quqqiaq: Thank you, Mr. Speaker. Mr. Speaker, as the minister is aware, the Nunavut Housing Corporation will be hosting the 2025 Nunavut Housing Forum in early June of this year. Mr. Speaker, as the minister will recall, I have consistently supported the local housing organizations in Taloyoak and Kugaaruk and pay tribute to date to their staff and members of their boards of directors.

Mr. Speaker, it is important that the Nunavut Housing Corporation and other participants have the opportunity to hear feedback from the communities.

Mr. Speaker, can the minister confirm that the Nunavut Housing Corporation will facilitate participation by the Kugaaruk and Taloyoak local housing organizations at the upcoming Nunavut Housing Forum. Thank you, Mr. Speaker.

Speaker: Minister responsible for Nunavut Housing Corporation, Mr. Kusugak.

Hon. Lorne Kusugak: Thank you, Mr. Speaker, and I appreciate the question. It gave me an opportunity to give more details on the projected housing builds, which was his prior question. We have four starts in 2027 in Kugaaruk and 20 in 2027 for Taloyoak.

In terms of the invites to the housing forum, I believe housing corporation has or is sending invitations to the local housing associations, and whether they do participate or not, it would be up to the local housing boards. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Amittuq, Mr. Kaernek.

Oral Question 1114 – 6(2): Mental Health Issues

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

(interpretation ends) I brought this issue when it comes to mental health in our fall session. I asked the minister if there's an increase or decrease when it comes to mental health issues, and the minister had stated that there has been an increase throughout Nunavut during our fall session.

Now, Mr. Speaker, what has the Department of Health taken any action when it comes to mental health and the number of mental health issues have risen throughout Nunavut?

So how is the Department of Health handling this issue and in tackling this mental health issue? How has the department planned when it comes to the increase of mental health? Thank you, Mr. Speaker.

Speaker: Hon. Minister of Health, Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Speaker, and I thank my colleague for this question.

On this issue and for those who just lost their loved ones, we remember them and love them.

(interpretation ends) Mr. Speaker, we're working on a number of different fronts when it comes to strengthening mental health services. I will list a few.

We continue to see increased numbers of Inuit paraprofessional mental health workers across Nunavut. This is very exciting to us. We're now up to I believe 42 Inuit paraprofessionals across Nunavut, including one in Sanirajak. In Igloodik we're still in the recruitment process.

We're now implementing the Suicide Prevention Action Plan, Inuusivut anninaqtuq, which was released last year along with our partners.

We are establishing or continuing to roll out a mental health surveillance system, which is an action item listed in that plan. It's being rolled out. It has been rolled out across Kitikmeot and Qikiqtaaluk communities are being brought on line as well as into the Kivalliq.

And finally, Mr. Speaker, we're also working on bringing into force the *Mental Health Act*, the new *Mental Health Act* so the Mental Health Review Board is comprised of mental health experts, legal experts, community members, as well as Inuit cultural advisors. I'm pleased to report that cabinet recently approved appointment of a number of members to that board, and the next step for that board is training and orientation.
(interpretation ends) Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Kaernerck.

Mr. Kaernerck (interpretation): Thank you, Mr. Speaker, and thank you for rolling this out. This is a difficult issue for parents, for the communities, for mental health workers and teachers.

In the minister's statement earlier, looking at the figures in the schools should be said at home and workplace and anywhere and have to be friendly in the area of Inuuqatigiitsiarniq, and to be servicing well.

So I would like to ask the minister, as the minister mentioned, they don't have a staff yet in Igloodik. Can this be an urgent issue, as you mentioned Inuit Sanirajak and services

that you mentioned and with it along with Igloolik, in your comments earlier and member's comments could this be an urgent matter to recruit and perhaps identify what work have you done to date and when we should expect the position to be filled. Thank you, Mr. Speaker.

Speaker: Minister of Health, Mr. Main.

Hon. John Main (interpretation): Thank you, Mr. Speaker. The position in Igloolik is available, from what I understand. And I will find out when the advertisement is going to be going and when the deadline is.

(interpretation ends) Mr. Speaker, the mental health and addictions community-based worker program includes extensive orientation and training. We want to make sure that when we hire Nunavummiut into paraprofessional positions that they build a career with us, that they don't get burnt out, that they enjoy their position. These are very important positions for Nunavummiut. We're so excited to see more and more Inuit involved in the mental health service provision.

We do have a number of challenges, including securing office space, securing housing, and also on the human resource side providing the ongoing support to these staff, because they can carry a heavy burden at times. We want it make sure they are taken care of as they do their important work.

Speaker: Second and final supplementary, Mr. Kaernek.

Mr. Kaernek (interpretation): Thank you, Mr. Speaker. A lot of people get affected by mental health issues, and it's very challenging, but at times they do get burnt out and only when they need -- and they look at people who can give them the support and the counselling. The mental health nurse is a Qallunaat, but there's also Inuit who want to be counselled by Inuit, because there's a big difference in our lifestyle. For example, an individual from the south will come up here without knowing anything about the culture and the language, and it goes the same from an Inuk to a Qallunaat.

We also have two school counsellors and mental health nurses who work out of the community health centre, how can we work together when it comes to mental health. The Department of Health and the DEAs and the individual employees, how can they work together, or is it possible to work together even if they are school counsellors or mental health nurses.

There are parents who have just lost their young child and they're going through a very hard time. The Department of Health and the counsellors have to work together. Thank you, Mr. Speaker.

Speaker: Minister of Health, Mr. Main.

Hon. John Main (interpretation): Thank you, Mr. Speaker. Yes, I agree with you totally.

(interpretation ends) Mr. Speaker, the government has an interagency information sharing protocol which does involve, it's intended to allow departments like health and education to work together closely. The protocol was designed to respond to situations and individuals who are in crisis or perceived to be at risk of suicide or deemed to be an imminent risk of suicide. All of our community health nurses receive training on this protocol as part of their annual orientation.

As far as Indigenous cultural competence training, that is an ongoing initiative through the department and we have delivered that training to over 1,000 participant since inception. (interpretation) Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Tununiq, Ms. Nutarak.

Oral Question 1115 – 6(2): Increased Wage Scale for Child Care Workers

Ms. Nutarak (interpretation): Thank you, Mr. Speaker. I send my regards to the people of Pond Inlet and I would like to welcome the people in the House.

(interpretation ends) Mr. Speaker, I would like to direct my questions to the Minister of Education. Mr. Speaker, the Department of Education has announced the wage scale for child care centre staff will be increased by 7.5 percent. This concerns me, because many child care centres are already struggling financially and may not be able to meet the new wage amounts by April 1, 2025.

I do support this, and I really appreciate the child care givers. They really deserve this increase because they have the most lowest pay, I guess, in the area.

Can the minister clarify if her department has communicated the plans for this wage scale increase to the boards and management of child care centres across Nunavut. Thank you, Mr. Speaker.

Speaker: Hon. Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for that question. Yeah, we're really working to enhance the sector for early learning and child care, and this is at the top of our priority to support and retain and recruit people into the sector.

For 2024-2025 our wage scale budget was 3.1 million and I am very pleased to that we have been able to put in a number of incentives to support our early childhood educators.

We have and do communicate within our department to the stakeholders which are the not-for-profit day cares and those licensed day homes. Thank you, Mr. Speaker.

Speaker: First supplementary, Ms. Nutarak.

Ms. Nutarak (interpretation): Thank you, Mr. Speaker, and I would like to thank the minister.

(interpretation ends) Mr. Speaker, I appreciate that licensed child care centres can apply to Nunavut's early learning and child care wage scale program for contributions funding to top up their staff compensation so that it meets the new wage levels. However, it takes time for organizations to gather up all the paperwork, and then it takes even more time for the applications to be reviewed and approved. Can the minister clarify whether any extra resources will be allocated to ensure that applications submitted to the wage scale program will be approved before the April 1 deadline. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for that question. In terms of capacity and support, we do have a support that we have within the department with the funding that we have for the Canada-wide agreement, and we've been able to have seven additional positions into that department. Those positions are there. Some of them directly support the day care facilities with any forms or applications or any information that is required for the funding. Thank you.

Speaker: Second and final supplementary, Ms. Nutarak.

Ms. Nutarak (interpretation): Thank you, Mr. Speaker. That's very interesting to hear.

(interpretation ends) Mr. Speaker, information on the department's early learning and child care web site indicates that northern allowance will be integrated into early learning and child care wages scale program. For the benefit of listening public, can the minister provide an overview of how this additional hourly allowance will be paid out for the child care centre staff. Thank you, Mr. Speaker.

Speaker: Minister of Education, Ms. Gross.

Hon. Pamela Gross: Thank you, Mr. Speaker, and thank you to the member for that question. I do say that we have the privilege to meet with minister at the time on this file, and supported by the minister federally the Minister of Families who is in support to put this into the agreement.

We do support those that are working in child care facilities to receive the northern living allowance based on their community. Thank you, Mr. Speaker.

Speaker: Oral Questions. Member for Iqaluit-Manirajak, Mr. Lightstone.

Oral Question 1116 – 6(2): Inuit First Child Initiatives

Mr. Lightstone: Thank you. Thank you, Mr. Speaker. As I mentioned earlier in my member's statement, I wanted to thank the Minister of Health for the very insightful minister's statement that he provided, highlighting some of the benefits of the Inuit Child First Initiative and the positive impacts it has through the school food programs, medical travel assistance, and the food voucher programs, and the tremendous impact that it has had on addressing food insecurity and malnutrition rates in the territory. And providing us with an update on his advocacy work encouraging Indigenous Services Canada to continue that program.

So as I mentioned during my own member's statement, I had put the premier on notice asking if he would be able to provide an update to this House on how he has utilized his unique role as premier to advocate for the continuation of the Inuit Child First Initiative. Thank you, Mr. Speaker.

Speaker: Hon. Premier of Nunavut, Mr. Pauloosie Akeeagok.

Hon. P.J. Akeeagok: Thank you, Mr. Speaker. I want to thank my colleague for his question. As I had mentioned as well, I have been working very closely with Minister of Health as well as Family Services to continue to lobby for the essential program.

During my time with my most recent meeting with the Minister for Northern Affairs, that's something that I had brought up as well, as well as with our Inuit organization partners which I know have been stressing the importance of those programs. So it is through those advocacies that I've had that conversation. Thank you, Mr. Speaker.

Speaker: First supplementary, Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Speaker, and I would like to thank the premier for informing us about the advocacy work that he has conducted on behalf of Nunavummiut. I do appreciate his efforts to ensure the continuation of those important programs under the Inuit Child First Initiative.

But I will like to ask for the benefit of the public if the premier would stand and commit to Nunavummiut and this House that he will continue to advocate, especially for the nutrition-related supports that are currently covered under Indigenous Services Canada. Thank you, Mr. Speaker.

Speaker: Premier of Nunavut, Mr. Pauloosie Akeeagok.

Hon. P.J. Akeeagok: Thank you, Mr. Speaker. I thank my colleague for that question.

I will always be defending the interest of Nunavummiut, and as I mentioned this has been a program that we've heard directly from the communities. I have seen at first hand specifically breakfast programs in the schools, and the important role that they played, as we heard from my colleague across as well in terms of seeing attendance come up and so forth.

Prior to the member's comment I had tasked my team to consider drafting a letter as well in our advocacy and continued to push to talk about the importance of the program on behalf of Nunavummiut, so that work will continue and that's something that I could update the House here in terms of the continued advocacy we do see as premier. Thank you, Mr. Speaker.

Speaker: Members be aware time allotted for Question Period is now over. Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Speaker. I would like to seek unanimous consent to return to Item 5, Recognition of Visitors in the Gallery. Thank you, Mr. Speaker.

Speaker: Member is seeking unanimous consent to go back to Item 5, Recognition of Visitors in the Gallery. Are there any nays? There are none. Item 5, Recognition of Visitors in the Gallery. Mr. Lightstone.

Item 5: Recognition of Visitors in the Gallery

Mr. Lightstone: Thank you, Mr. Speaker, and thank you colleagues. It's a very special day for me. I've had a few rare occasions to recognize this very special individual in this House, my anana, Micah Arreak. Please stand. Thank you, mom for coming in.

>>Applause

I'm so glad you're here once again. And I would also like to recognize my aunt, Oopah Arnakalak, who is actually here in the Legislative Assembly for the very first time. Welcome to the Assembly.

>>Applause

Speaker: Welcome to your Assembly. Recognition of Visitors in the Gallery, Ms. Nutarak.

Ms. Nutarak (interpretation): Thank you, Mr. Speaker. I would also like to recognize my constituents, Micah Arreak and Oopah Arnakalak. She used to be my teacher, way back. And they used to smoke in the school. And I still look back, because I would smell coffee and then I would smell cigarette smoke. Please welcome. Thank you, Mr. Speaker.

Speaker: Recognition of Visitors in the Gallery. Back to Orders of the Day. Item 7, Written Questions. Item 8, Returns to Written Questions. Item 9, Replies to Opening Address. Item 9, Replies to Opening Address. Item 10, Replies to Budget Address. Item 11, Petitions. Item 12, Responses to Petitions. Item 13, Reports of Standing and Special Committee on Bills and Other Matters. Item 14, Tabling of Documents. Hon. Minister of Economic Development and Transportation, Mr. David Akeeagok.

Item 14: Tabling of Documents

Tabled Document 361 – 6(2): 2021 Traffic Safety Annual Report

Tabled Document 362 – 6(2): 2022 Traffic Safety Annual Report

Tabled Document 363 – 6(2): 2023 Traffic Safety Annual Report

Hon. David Akeeagok: Thank you, Mr. Speaker. Mr. Speaker, I am pleased to table three reports: The 2021, 2022, and the 2023 Traffic Safety Annual Reports. Thank you, Mr. Speaker.

Speaker: Item 14, Tabling of Documents. Member for Baker Lake, Mr. Simailak.

Tabled Document 364 – 6(2): Correspondence from the Baker Lake District Education Authority Respecting Renovations to the Washroom at the Jonah Amitnaaq High School

Mr. Simailak: Thank you, Mr. Speaker, I would like to table correspondence from the Baker Lake District Education Authority respecting renovations to the washroom at the Jonah Amitnaaq School in Baker Lake where it states it was determined by student support services and our student support service providers that the current bathroom project does not meet the space requirements to operate the student's support equipment needed to support one of our student's learning goals. As a result Accutech (ph) is again drawing up plans to revisit the project based on the guidance of our student support providers and school principal. Awaiting the next meeting to discuss the next set of blueprints for the project. As of now the student still ask not have access to a washroom facility that supports the learning goal. The request for this project began in 2020-2021 school year. DEA Chairperson Siobhan Iksiktayuk (ph).

Thank you, Mr. Speaker.

Speaker: Tabling of Documents. Item 15, Notices of Motions. Item 16, Notices of Motions for First Reading of Bills. Item 17, Motions. Item 18, First Reading of Bills. Item 19, Second Reading of Bills. I recognize the Minister of Community and Government Services, Mr. Joanasié.

Item 19: Second Reading of Bills

Bill 73 – Planning Act – Second Reading

Hon. David Joanasié: Thank you, Mr. Speaker. I MOVE, seconded by the Hon. Member for Pangnirtung, that Bill 73, *Planning Act* be read for the second time.

Mr. Speaker, this Bill provides for framework for land use planning and development activities in municipalities. Thank you, Mr. Speaker.

Speaker: The motion is in order. To the principle of the bill?

Some Members: Question.

Speaker: The question has been called. All those in favour? Opposed? The motion is carried and Bill 73 has been read for the second time and is referred to the Standing Committee on Legislation.

Item 20, Consideration in Committee of the Whole of Bills and Other Matters; Bill 70, Bill 71, and 72 with Mr. Hickes in the chair.

Before we go to Committee of the Whole, we will take 20-minute break. Sergeant-at-Arms.

>>*House adjourns at 15:38 and resumes at 16:05*

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

Chairman: Thank you I would like to call the committee meeting to order. In the Committee of the Whole we have the following items to deal with: Bill 70, 71 and 72. What is the wish of the committee? Mr. Malliki?

Mr. Malliki: Thank you, Mr. Chairman. We wish to continue the review of Bill 70, *Appropriation (Operations and Maintenance) Act, 2025-2026* with the Department of Health, Mr. Chairman.

Chairman: Thank you. Are we in agreement we continue with Department of Health?

Some Members: Agreed.

Chairman: Thank you. Minister Main, do you have any officials you would like to have appear before the committee?

Hon. John Main (interpretation): Thank you Mr. Chairman. Yes, I do, thank you.

Chairman: Thank you. Is the committee in agreement to allow witnesses appear before you?

Some Members: Agreed.

Chairman: Sergeant-at-Arms, please escort the witnesses in. Once they are settled, Minister Main if you could reintroduce your officials for the record. I understand you wanted to supplement one of your responses from yesterday. You can proceed directly into that. Thank you.

Bill 70 – Appropriation (Operations and Maintenance) Act, 2025-2026 – Consideration in Committee

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

(interpretation ends) So I have to my right, Megan Hunt Deputy Minister, and to my left Rene Tanga, Acting Deputy Director of Corporate Services, and a number of other staff here in the Assembly.

Just to follow upon yesterday's questioning regarding medical travel and Office of Patient Relations, to date in 2024-2025 we've had 22,625 clients, patients and escorts travelled for medical travel. And Office of Patient Relations has had 512 complaints to date and 104 of those, approximately 20 percent, related to medical travel. (interpretation) Thank you Mr. Speaker.

Chairman: Thank you for that information, Minister. Before we proceed, to remind members, we are on page H4, Directorate, amount being appropriated, total operations and maintenance, \$167,791,000. We left off with Mr. Quqqiaq. Please proceed with your next question, Mr. Quqqiaq.

Mr. Quqqiaq: Thank you, Mr. Chairman. Yesterday I talked about data entry, metadata, and before I go on to ask my question, I'll be talking about privacy information.

Mr. Chairman, I was informed about an individual having access to information and it was leaked out in social media of an individual that has known about information about

pregnancy, of how many ladies being pregnant. I think that's very private information that shouldn't have been leaked out.

This is a known fact, Mr. Chairman. I've been to the health centre before as a patient and when we do get seen, and what I notice that there are files, like, whether they see you as a patient and they pull out your file and then before being seen other patients were being seen, and what I noticed there's many files there. Often the nurse or the nurse on call would leave the room to maybe access some medication or more information, and the files are there, and that's very unfortunate.

I think this has to stop. You can see information of information that we're not supposed to be seen. And I have known that to be a known fact, because I seen it firsthand.

But myself, as a member of the Legislative Assembly, I can't have access to those files, but to see it firsthand is very disturbing.

So I recommend that the Health Department come up with policies or legislation to assure that our front line staff don't leave files anywhere in the health centres.

That's one of the reasons why I asked for data entry by the nurse on call or the nurses or what can probably work is if the health department can hire administrative workers to input those data and to assure that no patients can see information, no patient can access information through any kind of files.

I highly recommend that to health department come up with a policy to assure that no other patients can see any files at all. I'll move on, Mr. Chairman.

The Department of Health has included the development of health information privacy information in its business plans since 2017 and the question is, Mr. Chairman, what is the current status of the development of Nunavut's health privacy legislation and will it be introduced before the end of this Assembly. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Main.

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

(interpretation ends) First of all on the privacy issue that the member mentioned, we do have policies in place regarding privacy of information, but regarding that specific example we can have our staff follow up with the health centre regarding specific incident on privacy.

For the legislation piece, we're excited to see the consultation process moving ahead. So we've conducted community consultations on the privacy legislation in Qikiqtarjuaq,

Arviat, Rankin Inlet, Kugluktuk and Iqaluit. We will be engaging with two further communities in March, next month, and we are developing a legislative proposal, but the plan is to bring it forward within the beginning of the next government. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Quqqiaq.

Mr. Quqqiaq: Thank you, Mr. Chairman. This will be my last question and I'll leave the rest to my colleagues if they do have follow-up questions.

The business plans indicates that the information health unit will facilitate health care research activities. The question is, Mr. Chairman, how are the results of these research activities used to inform the departmental programs and guide service delivery. That's my last question, Mr. Chairman. Thank you.

Chairman: Minister Main.

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

(interpretation ends) My deputy has the specifics on this, if you will allow.
(interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Go ahead, Ms. Hunt.

Ms. Hunt (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you to member for the question. We currently have a number of areas that are being looked at, chronic disease being one of those, communicable diseases, cancer, as well as mental health. *Qujannamiik*.

Chairman: Thank you. I believe the member also asked how are the results of these research activities going to be used to inform programs and service delivery. Ms. Hunt.

Ms. Hunt: *Qujannamiik, Iksivautaq*. Thank you for that follow-up and reminder. So whenever we're doing information-gathering, research reporting, we use that information to help us advance programs, to improve programs and services. It also helps us to understand gaps, where there are strengths in systems, health and health care delivery, and also our ability to advocate with partners federally and other partners to support whether that's funding or advancing further programs. Thank you.

Chairman: Thank you for that. Next name I have on my list, Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Chairman. I don't have that many questions.

On the business plan there on page 98, Aging With Dignity, the third bullet says “develop a comprehensive elder and senior care strategy and implementation plan with broad input from elders families, communities, and partners.”

Is that separate from the elders care strategy that was tabled almost a year ago? Is this going to be a different strategy? Thank you.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) It will be the same plan, the one that was led by Executive and Intergovernmental Affairs. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Chairman. I’m curious that this is for 2025-2026. Why does it say develop a comprehensive elder plan when the elder plan was tabled in the House a year ago, and the minister, unless I misunderstood, stated that’s the same plan. Thank you.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) In terms of the work happening now, it’s around developing and rolling out the action plan. The implementation plan is part of the strategy. So the broad strokes of the strategy have been established. It has been tabled. Making that plan work and implementing it, that’s next phase. So it is encapsulated in that. (interpretation) Thank you, Mr. Chairman.

Chairman: Before I go back to Mr. Savikataaq, there have been numerous discussions, mostly led by myself, on an action plan for the strategy and the minister just mentioned an action plan or an implementation plan.

When are we going to see it as regular members or as a committee of what the action-slash-implementation plan looks like? And what type of measurables and outcomes can we expect throughout the life of the strategy? Minister main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I believe the plan in terms of the strategy is that the implementation plan would remain internal to the government. However, they will be reporting on progress made and that will be public. That’s my understanding of the approach that will be taken. (interpretation ends) Thank you, Mr. Chairman.

Chairman: Thank you. And just again, not to belabour the point, but typically in the past when updates have been provided it's either been quarterly or at least semi-annually. We're now almost a year out and we've yet to see updates to the strategy. And I think the public as well as the members here who decide on budgets and how to direct government expenditures deserve to know what's been going on behind the scenes.

So I just encourage the minister to work with his cabinet colleagues to make sure that we are updated more regularly than annually. Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Chairman. And the next bullet says "enable elders to access more country food". I'm curious whether elders are going to be given money to buy country food? Whether there's going to be paid hunters? Or just what exactly how elders have access to more country food. Thank you.

Chairman: Thank you. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So when we look at these pages, these are laying out the mandate actions that we agreed to as a government, and so there are components in here which Health has responsibility for.

In terms of accessing more country food, something we've been working on has been looking at the menus and the availability of country food in long-term care facilities, whether they are in territory or out of territory. And we have seen an increase in availability of country food to elders who are in long-term care. And so in terms of paid hunters or other programs, initiatives that would fall outside of the Department of Health, I can't speak to those. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Chairman. So just for clarity, then, enable elders to access more country food is specifically and only for elders in long-term care? Thank you.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) In terms of Department of Health that's the major initiative that I'm aware of. We also have played I think a supporting role in terms of looking at country -food storage spaces, like community freezers.

But if we look at the item "enable elders to access more country food" and we unpack that, there could be there are action items flowing out of that that go to multiple departments.

But for the Department of Health, the major piece was looking at long-term care as well as boarding homes. And we have also seen an increase of country food being made available at boarding homes. (interpretation) Thank you, Mr. Chairman.

Chairman: Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Chair, and I thank the minister for clarifying that it is for elders for access to more country food is only for boarding home and long term care.

I'll go on to my next topic here. On H4 there on the mains, for compensation benefit I was just curious. The estimate for the revised estimate, that's on page H4 was \$19,101,000 and for 2025-2026 it's \$19,872,000 which we all expect to increase. But that increase seems to be less than what it's expected, because all the public servants and I assume health workers got a 9 to 11 percent raise and this is far below that. If we can just get an explanation. Thank you.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chair. (interpretation ends) If you will allow Mr. Tanga to respond to that.

Chairman: Thank you. I knew we would get Mr. Tanga involved at some point. Please go ahead.

Mr. Tanga: Yes, thank you, Mr. Chair. The net increase for the compensation of benefits is \$1.5 million. That's because the increase of 9 or 10 percent was reflected, but also we have critical staffing that was reduced for project basis for 2025-2026. That's the reason why there is an increase just for \$1.5 million. Thank you, Mr. Chair.

Chairman: Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Chair. I mean I'm pretty sure my math is not as good as Mr. Tanga there, but 19.1 million going to 19.8 million is a lot less than 1.5 million. If he could just explain the math for me. Thank you.

Chairman: As it's still related to Mr. Tanga's response, I can go right back to him. Mr. Tanga.

Mr. Tanga: I would appreciate if the member can give the precision about the line, which pages of the estimate.

Chairman: Sorry, microphone. Just if you could acknowledge the Chair when you complete your response. Then the directors can give me control of the mic again. Mr. Savikataaq.

Mr. Savikataaq: Thank you. I believe the official wanted the pages. On page 84 it's a compensation benefits, the first line. The revised estimates for 2024-2025 was 19,101,000. The main estimates for 2025 is 19,872,000 which is a difference of about close to 800,000, not the 1.5. So the increase is less than what I thought it should be, as the raises that were given, all the departments their raises are substantial. There's a 9 or 11 percent raise that the workers got. So I'm curious how it's a little less than 800,000 but Mr. Tanga said it was 1.5 million. If he can just explain the math for me. Thank you.

Chairman: Thank you. Mr. Tanga. Sorry, Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So the amount that we have in there is reflecting the wage increase for 2024-2025 for all the GN employees in the directorate branch. (interpretation ends) Thank you, Mr. Chairman.

Chairman: Thank you. If I could interject, I think there was confusion with the amount that was used the 1.5 million. Was that from a different? Minister Main if you want to clarify that. 771,000 is a little bit different. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I apologize for any confusion. Yes, there was a different pages that was being referenced. The increase is 771,000. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you for that clarification. Mr. Savikataaq.

Mr. Savikataaq: Thank you, Mr. Chairman. We're not communicating here, right. I'm having a hard time getting understood. That is my question. It's 782,000 increase, and that's expected. But 782,000 is a lot less than 9 to 11 percent of the 19 million that was spent. And if the workers got a 9 to 11 percent increase, it should be in the neighbourhood of about 1.8 million or so. So I'm just wondering why it's not as high as I think it should be. Which is good, but just an explanation. Thank you.

Chairman: Thank you. And if I could, if you look back on page H4 and look at the revised estimates to the main estimates from last year that 19,101,000 was increased in the last fiscal year because that's when the bump in salaries was actually enacted. But if I'm incorrect if that assumption, Minister Main, please correct me or confirm what I just said. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. I believe you're correct in terms of that item. The expenditure target, this figure, 19.8 million, it does reflect the

wage increase for all GN employees under the directorate branch. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Savikataaq.

Mr. Savikataaq: Thank you. I understand it's the increase, but it just appears to be less. It's not the 9 to 11 percent increase from last year's budgets because even the revised estimates are exactly the same as the main estimate. I'll leave that as a comment. It seems like with my simple math it's just not adding up, but I'll stop there. Thank you. Will.

Chairman: Thank you, Mr. Savikataaq. Maybe to help ease your mind, if you look back at the actual expenditures in 2023-2024 it's only 13-and-a-half million, so it was a significant increase. And from what I've been led to understand is the bulk of that increase was from that bump in salary. So I hope that alleviates any concern. Obviously you can redirect if I'm off base. Next name I have on my list, Mr. Lightstone.

Mr. Lightstone: Thank you, Chair. I want to touch on a couple of the items that I mentioned during my own opening comments yesterday. During the previous Assembly a lot of the issues were focused around the vacancy within the Department of Health and that still is an issue today with the department being at a vacancy rate of about 45 percent.

However, given the fact that the majority of the Department of Health's positions do require qualifications, which are not currently available in the Nunavummiut labour force, I do recognize that the Department of Health is dependent on hiring out of territory to fill those positions. But again, without adequate staff housing available to fill those positions, the Department of Health has become dependent on transient employees to fill the gap.

I've got two different lines of questioning. I guess the first question I would like to ask is, amongst the department, how many of the 1,370 positions require college diplomas or higher? Post-secondary requirements. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) If you'll allow us a minute to pull those numbers. (interpretation) Thank you, Mr. Chairman. (interpretation ends) And so if we look at the department in terms of the number of positions, professional positions that would typically require certification or a university level, 406 -- sorry, I'm looking at our Inuit employment plan. The actual number as of December 31 is 406 and then on top of that you have the middle management and senior management positions which are another approximately 150 positions. So altogether we're talking roughly 550 positions within the department. Mut'na.

Chairman: Mr. Lightstone.

Mr. Lightstone: Thank you, Chair. I want to emphasize again recognizing that the Department of Health does work with Arctic College with the nursing program producing home-grown nurses and the department has created the Inuit Employee Education program both those efforts combined makes very little dent in the actual requirements necessary to fill the vacant positions in the department.

I just want to stress that again, that I strongly believe the minister and the Department of Health really needs to strengthen its efforts to encourage more Nunavummiut to get those necessary skills and qualifications.

I'll move to the next point. Of these 600 vacancies that the department currently has, housing units would be required to fill them? Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I mean that's a difficult question to answer. It really depends whether the candidates are already living within Nunavut or whether they would be relocating from somewhere else. You know, staff housing is a big concern for the department. You know, we have a number of nursing positions, for example, that we are unable to put out to competition because of a lack of staff housing. There's a total of 57 positions that are awaiting staff housing allocation before they can be posted.

We absolutely recognize that we're not the only department that's faced with this shortage. We recognize there's other important positions from other departments. But you know, staff housing is a big concern of ours. (interpretation) Thank you, Mr. Chairman.

Chairman: Mr. Lightstone.

Mr. Lightstone: Thank you, Mr. Chairman. Thank you, Minister. So we all know that Nunavut is in housing crisis, and there's a shortage of housing in every single community, whether it be public housing, private housing or staff housing. Again, the critical staff housing situation does need critical solutions, and given the situation where we are without local qualified individuals without adequate staff housing we're reliant on transient employees to fill the gap. And between the agency nurses 25 million, paramedics, 25 million, casual duty travel, 24 million, transient housing another 3 million, that is a huge band-aid when again we really need a longer-term position, whether it be trained locally or higher and fly in long-term indeterminate employees.

I'm trying to get at the fact of paying in excess of \$70 million a year for these transient employees is necessary, but I really hope it's not long term.

Again, I need to stress the fact that the Department of Health needs a lot of staff housing and the Nunavut Housing Corporation cannot meet that need, especially with the current rate of staff housing construction.

I put forward this recommendation before to the Minister of Health to put forward a special capital project request to create staff housing for health vacant positions. And it's not, this is no time for capital so I won't get into that, whether or not the minister has gone down that route. But I just want to ask how much consideration has been given to create specialized staff housing construction to help alleviate this ongoing vacancy issue. Thank you, Chair.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So I thank the member for raising this issue. We don't have delegated authority to take on housing projects, so that's why we work very closely with Nunavut Housing Corporation, for example, looking at Accisariak (ph), that's under construction. We are working with them. We've signed a memorandum of understanding, which will see support staff housing support provided for the staff of that facility when it's ready to be opened.

We're also looking at other approaches, like for example the new health centre in Qikiqtarjuaq. The recommendation from our staff has been to go back to having housing units attached to that facility and that's coming directly from feedback from our talented staff at the community level. So we are looking for opportunities to make sure that indeterminant employment is strengthened and the t critical staffing measures that continue to be implemented have been effective and we believe have helped to reduce that reliance on contract paramedics, contract nurses and we want to continue seeing the numbers increase on indeterminant side. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Next name I have on my list, Ms. Brewster.

Ms. Brewster: Thank you, Mr. Chairman. Welcome back, everybody. I'm just trying to make sense of all my notes from yesterday. I still have some follow-up questions. I can't remember exactly where we left off, but, sorry.

In one of the responses yesterday on the Health Information Unit, the minister mentioned, Minister Main, you mentioned that some of the tools that will be used to help capture information about patient visits, and you mentioned an AI scribe tool. And I would just like to hear a little bit about that. I know that sometimes AI tools don't necessarily understand the nuances of English as a second language, or even understand the Inuktitut language. Can you elaborate on that, please. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. I thank you for the question. So in terms of the scribe tool that would be integrated with Meditech, it's essentially something, a tool that would be used to boost productivity, to try and support health professionals to spend less time on administrative note-taking and allow them to focus more time with clients.

Right now our chief information officer participated in a request for pre-qualification working group with Canada Health Infoway to develop the requirements around these scribe tools. That has been posted on the procurement website through Canada Health Infoway, this is nationally, for vendors to view and provide information. So they're working towards establishing requirements for that tool. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Ms. Brewster.

Ms. Brewster: Thank you, Mr. Chairman. I just want to trust that any tool like that will be, you know, locked down and people's privacy will be protected, that it won't be accessible either by accidental broadcast or any other means.

I'll move on to a question I have highlighted here about health information. When will people be able to access their own health information? I know that in other jurisdictions it's possible, for example, in Ontario there's a portal where an individual can log on to look at their health information, whether that's an x-ray that they had or a CT scan. I'm wondering if there's a movement towards that. We heard yesterday that there is some work towards aligning different portals of access with the jurisdictions that we're working with. I would like to hear more on that. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) We do want to see the rollout of a portal for Nunavummiut. We recognize that having access to your own health information can be really empowering for individuals. Right now we are, before we can embark on this, what the government needs to do as a whole is work on, we have kind of foundational work that needs to be done around digital identity, in terms of if I'm going to log into this portal and access my health information, how do I verify that it's me. That's kind of a foundational piece that goes beyond the Department of Health. But once that's in place, then the I guess the next step would be having this portal established where you could access your information.

We don't want to set up a portal where it's less than secure, for obvious reasons. It needs to be very tightly controlled in terms of who can access medical files digitally. (interpretation) Thank you, Mr. Chairman.

Chairman: Ms. Brewster.

Ms. Brewster: Thank you, Mr. Chairman. What are some of the roadblocks towards individuals accessing? I'm thinking about things like access to the internet, access to a computer, access to some sort of a device where they can log on. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) My deputy would like to respond to that, if you'll allow. (interpretation) Thank you, Mr. Chairman.

Chairman: Ms. Hunt, go ahead.

Ms. Hunt: *Qujannamiik*, Mr. Chairman, and thank you to the member for the question. You're correct that the ability to have access or equity to one's personal information definitely comes from a place of being able to have access to broadband or appropriate levels of connectivity, access to digital tools like cell phones, computers, and those kinds of things. So that definitely needs to be a consideration around, you know, the equity. Also privacy, locations where people can access that information in a private and secure way. And we've seen across Canada some interesting models where families or individuals who may not have access to this type of technology or devices have the ability to do that at health centres or other facilities in order to be able to do that in a private way. Thank you.

Chairman: Ms. Brewster.

Ms. Brewster: Thank you, Mr. Chairman. I hope you'll indulge me. We know that access to internet is considered a human right nowadays and I'm just wondering if I can hear a little bit more about what the department is doing in order to advocate for Nunavummiut to have substantive equity when it comes to access to the internet. Thank you, Mr. Chairman.

Chairman: Thank you. As it's related to the previous response I'll go directly to Ms. Hunt.

Ms. Hunt: *Qujannamiik*, Mr. Chairman, and thank you for that question. The member is correct that the advocacy is very important. That should be something, the ability to access through internet connectivity be a basic human right. And so we definitely raise that I know as a board member talking about the inequities in remote and isolated areas that those foundational from yourself must be the priority that must without it we also have those conversations with our federal partners. And locally as collaboration around some of the ways to reduce some of those barriers using some of the things like being

able to have satellite and other forums that can support community and we have seen that at the health centre level recently with implementing things like Starlink. Thank you.

Chairman: Ms. Brewster.

Ms. Brewster: Thank you, Mr. Chairman. I have some questions around Starlink but I really want to get to my follow-ups that I already have listed. I'll move back to Minister Main's response yesterday to a question from Mr. Malliki about providing secured services at the health centre regarding, you know, retention. I wonder, you know, I know that this is an issue of concern. Threats are an issue every concern that has been building over the last few years, and I wonder what the Department of Health is actually doing in terms of public education in order to reduce those threats. I don't think it should be a given that these threats are happening in our health centres. There's a lot that can be done to reduce those kind of actions, and I would like to hear more about what if anything the department is doing in public education in that area. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I think you know one of the things we're doing as a department not specifically on violence and security, but, you know, in terms of fostering strong relationships is making sure that we're engaging with the community representatives at multiple levels, whether it's hamlet councils, whether it's Inuit organizations. At the local level there is a lot of interaction with different levels of government at different departments, different organizations and so in listening to the concerns or the perceptions from the community, we can respond in ways that strengthen the relationship between the department and the communities we serve. So what does this look like. It means, you know, our nurse in charge supervisor of health program that they are now called ships, they meet with hamlet council to hear concerns, take suggestions or directors also meet with them. So we don't have a specific public education campaign around violence in health centres. We have signage in our facilities that makes it clear that there is no tolerance for intimidation, threats, violence. And that is not just for our staff, it's for everybody in our facility. We want them to be safe in places of healing. I'll leave it there. (interpretation) Thank you, Mr. Chairman.

Chairman: Ms. Brewster.

Ms. Brewster: Thank you, Mr. Chairman. The Department of Health has access to really important information about who's actually taking the lead in accessing health care with their families in the knowledge that they're gaining from tracking complaints that come in through the Office of Patient Relations. And if memory serves me correct, the data, the time that I was aware of it, you know, it was very clear that women in their 40s to mid 60s were the most likely to be advocating for their families and other patients. To me it seems like this is an opportunity to harness that advocacy that people are doing for, you

know, issues of concern and turn that into, you know, a further engagement that can help those advocates to help educate their families and communities about, you know, being safer and more respectful in health centres. I wonder if the department is looking at something like that in terms of patient education. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I don't know that we've looked -- it's an interesting suggestion, in terms of taking the engagements through patient relations are typically focused on a specific event or circumstance or issue. We don't typically use those contacts for other purposes, say consulting on legislation or other matters. But we can take that suggestion under consideration. I appreciate it. (interpretation) Thank you, Mr. Chairman.

Chairman: Ms. Brewster.

Ms. Brewster: Mr. Chairman, I would like to move on to the response related to the department's -- the review of the department's COVID response. In the minister's response yesterday to a question he said that work is being done on things like vaccine procurement, identifying plans or preparing plans should the avian influenza become a higher threat. And I know that other vaccine-preventable diseases that are deadly are most definitely on the rise, including measles. And I wonder if the minister can talk about the work that's being done to mitigate that risk and that specifically, you know, the number of people who are choosing not to vacation nature their children and whether or not that's arising threat for us. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I think on the public health front, vaccine hesitancy as well as misinformation and lies around vaccines is a concern for the department, in terms of what the member mentioned, increased vulnerability to, you know, measles and other preventable diseases. So in terms of what we're doing the chief public health officer and her staff are working around awareness. We recognize that, you know, there's a really good example. Yesterday, I believe, or the last couple days, misinformation on social media regarding RSV, and I don't believe it was a vaccine, it was an antibody. But so we did, that's an example of misinformation that we have responded to, to make sure that Nunavummiut have access to factual information, that they can follow to make decisions on. And we do want to have a bigger footprint on social media as a department. We recognize it's a very effective tool to get information to Nunavummiut. And if we're not there to respond or provide facts, then misinformation can have real negative effects. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Ms. Brewster.

Ms. Brewster: Thank you, Mr. Chair. You know, I think that's, you know, a major uphill battle combating that kind of misinformation. I know that I have another question that I wanted to touch on, and I just took a quick look at the Blues and I can't find where that question was asked. It was the fourth question, and it was regarding third-party funds related to the Nunavut Wellness Agreement, and physician services agreement. I'm sorry, I don't know exactly what the question was. However, the response, so I think it was dedicated third party funding for specific health issues is critical to the department's ability to provide quality health care across the north. And in response to the question, there were those two things, Nunavut wellness physician services agreement were mentioned. But I'm wondering if the wastewater testing research project that the minister had mentioned last week is part of that third party and whether or not there is funding guaranteed to come through that. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I think that specific project on the wastewater testing is still in the early stages. A memorandum of understanding stage in terms of funding flows specifically to support that, I'm not aware of any at this point in time. However, the chief public health officer could correct me at any moment, but it is a project that we are excited to see move forward, looking at things like the territorial health investment fund which is a federal pot of funding. The great thing is that our federal partners allow us to direct the flows of which projects are actioned and brought forward. And we really appreciate that flexibility. And that's probably amongst the biggest request that we have when it comes to federal funding. Sure, give us funding, and we appreciate it, but it needs to be flexible. It can't be overly prescriptive from the federal side, because Nunavut is so unique. (interpretation) Thank you, Mr. Chairman.

Chairman: Ms. Brewster.

Ms. Brewster: Agreed. Thank you for that. I'm going to page 97 of the business plan now. Under enabling health and healing there's a commitment to investigate and implement trauma-informed practices in health care and education. And the minister might recall that at the beginning of our term I had spoken a number of times about incorporating trauma and the knowledge that a lot of children are growing up in trauma currently and whether or not that bullet is actually about creating more trauma-informed education process. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I think the work that's being done by the Department of Education in terms of school based mental health supports as well as making sure that we have those strong linkages between

our departments, you know, to make sure that -- making sure that school staff have opportunities to be trained up on things like suicide prevention training. They have the ability to be involved and contribute to suicide prevention initiatives through our Upigivatsi funding. Those are all maybe not maybe the response the member is looking for but these are supportive factors when it comes to Nunavummiut who are in schools. (interpretation ends) Thank you, Mr. Chairman.

Chairman: Ms. Brewster.

Ms. Brewster: Thank you for that, Minister. I know that so suicide prevention is really important. However, what we know is that the causes the root causes that contribute to suicidal ideation in children and youth often stem from lived trauma experiences, including witnessing abuse in the home, whether that's what you call domestic abuse, whether or not children are being physically, sexually and emotionally abused in the home. And to me it makes sense that yes, we should be doing suicide prevention. However, we also need to ensure that our educators and our education system are health care providers and our health care system is set up in order to be able to recognize when a child or youth is living through current abuse, and to me an informed health care and informed education system can help to break the cycle. So I would just like to hear about what the Department of Health is doing to ensure that our children are better protected. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) Of course the member is absolutely correct in terms of mental health outcomes and/or suicidal ideation and the link to trauma. And we are in full support, working alongside our partners at Family Services, in terms of responding to issues that are facing youth. If you look at a single young person who's needing assistance that supports or assistance can come from various or a number of government departments, looking at Education, Family Services, Health, Justice, one of the biggest factors in terms of making sure that strong interdepartmental approach is there, is around our staff retention and having consistent staff at the community level who know each other, who know the community that they're working in, you know, that's a huge supportive factor in terms of making sure that interdepartmental piece is happening. If you'll allow, Chair, my deputy can speak to the training and reporting of responsibilities. (interpretation) Thank you, Mr. Chairman.

Chairman: Please proceed, Ms. Hunt.

Ms. Hunt: Thank you to the member for the question. Absolutely, it's important that our health care staff are able to identify and respond to address and report any type of childhood neglect or abuse.

So, you know, our staff in the health centres, physicians, nurses, counsellors, even our paraprofessionals have gone through training to be able to identify childhood neglect or abuse at different levels.

You know, whether you're a regulated health professional or not, what are responsibility for reporting is, how are we helping to connect families with services and collaborate with local programs so that we're taking a strength-based approach, while at the same time making sure that we're doing our responsibility and the identification and health care treatment and then helping to navigate or refer to other programs.

So we make sure this our staff are involved that training. We also have the CANRA table, so the child abuse and neglect. That is a collaboration across government and with partners, which is very important.

As well as we have collaboration with Education. For example, there was a good collaboration between mental health and education in building out resources and tools to support educators and students in the school system around things like, you know, healthy coping skills and identifying anxiety and depression and ways to handle and support children and one another through that. Thank you, Mr. Chairman.

Chairman: Thank you for that response. I have no more names on my list. Before I close out this page, I would just like to make a comment. A lot of the discussions seem to resolve around security at health centres and I want to highlight it's not just health centres. Right now there's schools and there's all kinds of government offices, not even government businesses, private businesses that we're seeing more and more security in.

I raised this issue a while back on the need to have security legislation in place to have controlled parameters of training, expectations.

And I understand that it's not going to happen in the life of this government, but I want to put it out there across this government to departments to be able to start initiating the work.

Just with the Department of Health alone now, we're talking tens of millions of dollars of security being added, and the bulk of those dollars leaving the territory because of some of the specialized skill sets that are required for some of these advanced security gigs that are in some of our institutions.

To me that's a huge lost opportunity for local employment, as well as in some circumstances it increases the level of conflict when there's people who aren't from town who don't know who people are.

Oftentimes, especially in the health setting, as the minister knows, it's a very passionate circumstance. Sometimes people are going through what could be perceived as their

worst day of their life. And reduced confrontations and conflicts in all sectors, but especially health.

Now that we're running into literally tens of millions of dollars, I think this is a really huge lost opportunity for local employment opportunities, and I want to encourage all entities of the government to consider working together on setting the stage of bringing forward legislation in the next government.

With that, we're on page H4, Directorate. Total Operations and Maintenance being appropriated, \$167,791,000. Mr. Lightstone.

Mr. Lightstone: Thank you, Chair. I just have about four different topics I would like to touch upon, the first being the need for hemodialysis. I sent the minister an e-mail I received on February 6 from a constituent who had to move south for treatment, saying that they have to leave because there is no hemodialysis here in Iqaluit.

They mention that there is a peritoneal dialysis in Iqaluit, but due to their condition, an increase in infection with their blood pressure and diabetes to have to receive this special type of dialysis.

I didn't receive a response from the minister in the last 20 days, so I just want to pick up on that. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I apologize to the Member. I don't recall seeing that message, but I'll go back and look at it.

Hemodialysis is usually performed two to three times a week, and it requires specialized medical care. The department has looked at cost estimates for a hemodialysis unit at Qikiqtani General Hospital. Currently there's no space at the hospital for that type of unit. We do want to support clients to receive care in Nunavut as much as possible.

So we do have clients who are currently receiving peritoneal dialysis here in territory, but hemodialysis right now, we don't have the capacity for in territory. (interpretation) Thank you, Mr. Chairman.

Chairman: Mr. Lightstone.

Mr. Lightstone: Thank you, Chair. Moving on to my next line of questioning.

I'm glad that the minister stated that the department tries to, or prefers to have in-territory treatment. That comes in line with my next topic.

Recently I heard an issue with a constituent who has family members that has to travel south regularly for cancer treatment. They mention the struggle that this puts on the patients and their family, requiring frequent travel down for cancer treatment.

So I was wondering if the minister would be up to elaborate on what the plans are in place to expand in-territory cancer treatment, from when it's surgery, radiation, chemotherapy, hemotherapy, or immunotherapy. Thank you, Chair.

Chairman: Thank you. We are branching into health operations, but it's the next topic anyway.

I'll allow the continued questions. Minister Main. And I still haven't closed out page H4, Mr. Lightstone. Minister Main, if you want to answer that next question.

Hon. John Main: Thank you, Mr. Chairman. So we are actively exploring ways to support cancer patients in territory. Some treatment can be delivered here, in Nunavut, depending on the type of medication or treatment the individuals are receiving. However, it's limited.

Virtual care has actually been providing supports to some cancer patients, in terms of reducing the need for travel. I know Dr. Dewitt (ph) and his team are working quite hard, in terms of looking for new innovative ways to support in territory treatment.

We have put forward business cases to bolster in-territory treatment. And one final thing I'll mention is we're looking forward to the next innovation of the Nunavut Cancer Care Conference, which will be taking place here in Iqaluit I believe in May. And that's quite an exciting event, bringing together care providers from right across Canada, specifically looking at cancer care in the North. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you for that response, Minister. I have no more names on my list, finally.

Directorate page H4, total operations and maintenance to be voted on, \$167,791,000. Agreed?

Some Members: Agreed.

Chairman: Thank you. Members please turn to page H5. Health Operations, total operations and maintenance requested, \$212,001,000. Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chairman. The total proposed budget for health operating branches projected to increase by over 25 million in 2025-2026 with the majority that to be spent on travel and service contract. It is the service contract funding primarily for short term contracts, staff as agent nurse or paramedics. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So looking at those service contracts, there will be a number of different I think, you know, agency nursing is one of the major items within there as is paramedics. There are other major contracts in there looking at security services.

There's other clinical functions that are being performed, say for example occupational therapy, I believe that's in some parts of Nunavut that's a contracted service. So those are some of the major contracts that the member mentioned. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you, Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chairman. The Legislative Assembly has approved a number of supplementary appropriation requests to pay for agency nurse staffing and paramedic service to ensure that the health service at the Nunavut community health centres are ongoing. What are the current level of full-time staffing at Nunavut community health centres. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) That's a difficult question to answer, in terms of it can vary from community to community. Some communities have a longer term team, you know, that's been in community for years and well established; where, you know, the next community over it could be a much different picture.

And so it depends. How I answer that question depends on whether we're looking specifically at nursing or whether we're looking at health centres as a whole.

But I think the quickest way that I can answer is that it varies from community to community. That the biggest one of the biggest and best initiatives we've been able to bring forward is critical staffing measures, which over roughly the last two years has really helped us to turn things around, in terms of staffing.

We're seeing more indeterminant nurses, more casual nurses, which is actually a good thing, because casual compared to agency. We're also rolling out job shares. And so these

are all indications that things are going in the right direction to stabilize staffing at the local level. (interpretation) Thank you, Mr. Chairman.

Chairman: Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chairman. Thank you, Minister. As I stated this before in this House when we were in Committee of the Whole, there were some medical staff that preferred to be on contract.

Did the department do anything about that, those contract nurses are benefitting more than the indeterminant. What has the department done to resolve that. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (Interpretation ends) If you'll allow, I'll like to change witnesses. (interpretation) Thank you, Mr. Chairman.

Chairman: Does the Committee agree to allow the minister to change witnesses?

Some Members: Agreed.

Chairman: Sergeant-at-Arms, please.

Chairman: Thank you. For the record, Minister, can you introduce your new official and proceed with the response.

Hon. John Main (interpretation): Thank you, Mr. Chairman. I have with my Jennifer Berry, Assistant Deputy Minister of Operations. If you'll allow her to respond, I would appreciate it. (interpretation) Thank you, Mr. Chairman.

Chairman: Please proceed, Ms. Berry.

Ms. Berry: Thank you, Mr. Chairman. I thank the member for the question.

This is a question that comes up a lot. We have a lot of discussions around casual versus indeterminant, versus agency, and it's a very delicate balance, because we need to make sure that we're delivering health care services.

And so when we look at reducing agency nursing, it's that shift into not just talking about adding more money and bonuses and things like that to the casual and indeterminant nurses.

The one thing we have seen for two decades prior to the pandemic and this critical nursing shortage was we had one of the best compensation packages in Canada for nurses, yet we struggled with retention of nurses.

And so that's where we had to introduce the nursing roadmap. This was really focused – it was developed out of a lot of consultation with nurses across the territory. What we heard at that time, this was pre-pandemic, the financial compensation was not a driving factor for people to stay, and it wasn't a driving factor for people to leave.

It was really around the work conditions. Opportunities for time to engage in self-care activities, for leadership development opportunities, and things like that. And so that's where we really have spent a lot of time on trying to improve the workplace.

We can imagine how challenging it is living in a two-nurse station, you're on call 24-hours a day, seven days a week. These are models of care that we've inherited from the post war era, so we reach back when the federal government introduced nursing stations. We haven't evolved a lot since then.

A two-nurse station on call 24-hours a day, seven days a week. Can you imagine how do people have lives. How do they engage with the community.

We are blessed with beautiful waters, beautiful land, but if you work 24-hours a day, seven days a week, you never get to enjoy it.

And so we really have spent a lot of time building a platform to be able to change our models. And this is where the critical workforce package was really important for us to be able to offer something other than just full-time work, but offer the job share. That has been so important in this shift from agency. We have casual nurses who join job share. We've had a couple of agencies nurses coming to job share.

But in the critical package was also things like changing the hours of operation. So we know we can't just build new health centres all around to be able to add more staff, so we're not having nurses working 24-hours a day, seven days a week.

What we can do is shift and create different opening times and closing times for health centres, which will allow us to be able to come in and work – to have more staff in without being on top of one another.

And I say all these things, because it's more than just the money piece, and that we really need to create the environment that entices and retains the nurses.

I'm going on about this. But when I say we've talked about the compensation for a very long time, I thought it might be interesting for the members to really understand what that compensation difference looks like.

Because the one thing we really tried to do, as the rest of Canada has been, you know, outbidding one another for health care workers, for our agency contract, we tried to maintain the budget line for the agency fees for quite some time.

We would get new nursing agencies come and say we would like to provide nurses. We say okay, here's the fee we are offering and they go oh, other jurisdictions are paying twice as much as you are. And we say okay, this is what we're offering. And sometimes they go away, and sometimes they come back.

But we've really tried to maintain, so we weren't creating more of an unbalance between agency and casuals.

So I'll use, if it's okay, a community health nurse. So a GN casual rate which includes the tier allowances is about \$62 to \$85 an hour. For a GN indeterminant rate, which includes the recruitment benefits, bonuses, tiered allowances, it averages about \$71 to \$100 an hour. The agency flat fee -- so we do an all inclusive pricing, so we don't know what the agency actually pays their nurses, because we just pay a set fee, which includes their administrative fees and the nurse's salary. That's \$106.50.

So again, for a GN indeterminant, the GN is paying roughly \$71 to \$100, but the agency fee which is all inclusive, includes people that are booking their travel and doing the recruitment and training, it's \$106.50.

For our main agency, they also offer an advanced training program for certain categories, which adds another \$5.33 an hour.

So again, there's not a large difference in terms of what we pay between a casual and indeterminant in an agency nurse. Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman, and thank you for her response as well for explaining quite a few issues that I was going to ask about.

I would like to ask again. But first of all I would like to comment that there are nurses in the communities who enjoy working in the community and not the health centre. And I have seen the agency nurses that come in and they enjoy the community, to work in the community. But since they are under contract, once the contract is over, sometimes the

nurses don't know if they will be coming back to the community that they like, and then they usually change them to another community.

I would like to ask the question do we expect to see any health centres in Nunavut being closed again. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So in terms of closures, reduced services, emergency services only, that's something that's monitored constantly by Ms. Berry and her team. So if you'll allow her to respond to how – those states or how we try and avoid closures (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Ms. Berry.

Ms. Berry: Thank you, Mr. Chair. We still have a 40 percent vacancy rate for our nursing. That means we're constantly looking forward three months, six months. There's always this risk of closures.

When we're able to find a nurse to fill the vacancy, we're still only one person away from someone having a family emergency, a sickness, and having to go into closure.

Our team, our operations team still continues to meet once a week. We have what we call a closure task force. This was set up several years ago, and then we only thought we were going to be running it for say six months.

Here we are, many years later, and we still run it. And so what we do with the task force is we try to project out three to six months' time, and we look at where our greatest risk is.

And so that's sometimes the agency nurses get moved around to other communities is because we have to look from a territory perspective where our greatest need is, because we don't want any community to be disadvantaged and be in a closure or severe service disruption. Thank you, Mr. Chair.

Chairman: Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman, and thank you for clarifying.

I believe in the Fall Sitting that we'll be doing some pilot projects to change some of the closing hours. What is the status of that situation, Mr. Chairman.

Chairman: Thank you. As it's directly related to the last line of questioning, I'll go directly to Ms. Berry.

Ms. Berry: Again, we've never done this in the history of Nunavut. And for those who don't know my background, I first moved to Nunavut to Rankin Inlet as a community health nurse, so that's where I started with the Government of Nunavut.

And so we've never had anything other than 8:30 to 5. When we look at where majority of our overtime happens, and majority of our community or health centre visits, they happen between that 5:30 and, say midnight, most communities. That is kind of the busiest time after hours.

So that tells us that, one, patients community members, they need different access times.

But it also tells us that nurses are not getting a lot of rest, because they have to show up to work the next morning.

And so the hours of operation, so we have Pond Inlet, Rankin Inlet and Kugaaruk; those were the three selected initially, because we wanted to try different sized communities. And the reason why we've only selected three versus doing more is, to be honest, we're not sure exactly what the model should look like.

And so we wanted to be able to have the ability to change those hours, or the staffing complements or the response to the demands.

And so we're evaluating it as we go along, and we expect in the fall to have some good data to tell us continue, hold off.

And we do have periods where staffing is really low. We have had to push pause on the program. But we're very excited about this increase of access to care for Nunavummiut. Thank you, Mr. Chairman.

Chairman: Thank you. And just before I go back to Mr. Malliki if I recall correctly Baker Lake piloted flex hours health centre operation and they weren't named in the three communities that Ms. Berry just listed. So Baker Lake does not participate in the flexible hours? Thank you. I just got a nod of the head no.

Ms. Berry, did you want to respond to that?

Ms. Berry: Thank you, Mr. Chair. So they're not part of this pilot. Baker Lake was a little bit different. They were using the same number of staff and just assigning them to different hours.

So they weren't specifically booking appointments in the evening, like we're trying to do with the pilot projects.

So while the nurses still work some flex hours, this is more structured with some appointments. Thank you, Mr. Chair.

Chairman: Thank you for clarifying that for me. Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman. With regards to flexible hours, are they running more efficiently and are more communities going to realize those flexible hours. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So we'll be monitoring closely the results from the pilots and depending on the evaluation in the fall, that would be when decisions would be made in terms of this is a great model, let's expand it to more communities, or let's try ... it's too early to tell at this point. (interpretation) Thank you, Mr. Chairman.

Chairman: Minister Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman. This is part of my question regarding the health centres. On occasion they're working all day in their shift up to late evening. Have you looked into as health department for 24-hour service in Nunavut. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) If you allow Ms. Berry to respond to that. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Ms. Berry, go ahead.

Ms. Berry: Thank you, Mr. Chair. I'm too short to see my light. Thank you to the member for the question.

I have to say we've had discussions. I think there's some communities where we need to be working towards an expanded hours of operations. But 24 hours is not feasible with our current infrastructure, our current staffing levels.

And so in order to be able to run say a 24-hour operation in your community, we would probably have to increase the nurse/paramedic position count by probably about six,

because people have to work the shift work days and nights. And so that's why it's a long time away before we would be able to do that.

But what we want to do, again, is the hours of operation, so shifting it so we have more appointments that are available in the evenings, is so important.

And then being able to look at the building and respite time. So even if we don't change the hours of operation, are we able to slightly shift the staff schedules.

So we're trying to build in opportunities for nurses who have been up late to be able to get the proper rest, so we don't interrupt the access to care. Thank you, Mr. Chair.

Chairman: Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chair. With health centre hours not open, that's something we're not informed about. Have you looked into that as well. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So in terms of the hours of operation pilot, that's the big major initiative that's under way, in terms of accessing services. We're wanting to make sure that it's not about saving money, it's about controlling costs when it comes to overtime.

So I think Ms. Berry summarized it quite nicely, in terms of if we're able to have extended hours of operation within health centres, we can meet -- we can hit three birds with one stone, you know. We can potentially provide better care. We can allow our staff to get better rest, and then control costs in terms of overtime. So it's something that's being very closely monitored. (interpretation) Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman. Regarding appointments, are all communities all the same, or you have variations in each community on hours of appointments, or is it the same across the board in the health centres. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. They are pretty standard in most cases.

But looking at bigger centres, Rankin Inlet, Iqaluit, you have varying hours. But with respect to health centres, you have pretty much the standard hours of operation. Thank you, Mr. Chairman.

Chairman: Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman. And I'm often given different responses, and one of them being when you have to go to a health centre and/or call for appointment, getting that appointment when it's not the case, the nursing (indiscernible) of a time is asked for what reason they want to go to health centre, and that's when the appointments are made in schedule.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) If you'll allow Ms. Berry to respond.

Chairman: Please go ahead, Ms. Berry.

Ms. Berry: Thank you, Mr. Chair. Thank you for the question. So most of the health centres are set up similar, where you have a certain number of booked appointments. Typically these are for non-urgent matters. We don't fill all the nurse's schedules with appointments, because we need to make space for those same day appointments. So a baby is sick today, we need to see the baby today.

And then they also have ... this varies between communities, it's always based on the community needs. But there's always a walk-in clinic, and usually they are offered in municipalities during a specific time of the day so you don't need an appointment you just come in and you get in cue to be seen.

And there's some communities where they have walk-ins longer, because of the pattern of visitations and health centres in that community.

And then after hours is really for those urgent cases or emergency cases that cannot wait until the next day to be seen. And when you call in, we always ask questions about why you need to be seen. And this is called triage.

And so what we're trying to do is determine based on your symptoms, your concerns, how urgent it is to be seen in that moment. I hope that answers the question. Thank you, Mr. Chair.

Chairman: Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman. The reason why I asked that question is it was posted on social media that trying to get appointment at the health centre is difficult, now that they have to go through the head nurse, or nurse on call to be seen for your symptoms or illness. Are they all like that in Nunavut? Thank you, Mr. Chairman. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) If there's a specific concern or occurrence that happened we can certainly look into that. It's difficult to answer. It depends on the time of day, depends on the specific circumstance that's being referenced. We do encourage patients or Nunavut residents to raise their concerns through available channels. I know that social media is very popular and it can provide information, sometimes. But it's very difficult to understand issues based on social media, is my experience. (interpretation ends) Thank you, Mr. Chairman.

Chairman: Mine as well. Mr. Malliki.

Mr. Malliki (interpretation): Thank you, Mr. Chairman. (interpretation ends) It was during opening hours from 8:30 to 5. That's the question. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) If it's during working hours and individuals, you know, speaking with the staff member to book an appointment, that wouldn't be out of the norm in terms of what Ms. Berry had described in terms of triage to trying to understand the clients and deal with it accordingly. (interpretation ends) Thank you, Mr. Chairman.

Chairman: Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chair. The deputy minister of operations mentioned that there are walk-ins in some of the Nunavut communities. Are all the communities like that or only certain communities. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) If you'll allow Ms. Berry to respond, thank you.

Chairman: Ms. Berry.

Ms. Berry: Thank you, Mr. Chair. So it depends on the community itself, because it depends on the demand from the community. It also depends on the staffing levels in the community. So even one community that normally has walk-ins, if they are short-staffed

or their staff was up most of the night because of an emergency there wouldn't be any walk-ins that day. It's hard to say yes or no. But there's always access through calling a nurse on call. Thank you, Mr. Chair.

Chairman: Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chairman. I'll leave it at that. I'm going to move on to something else. The Department of Health has issued a number of requests for proposals for security service at the health centres in recent years. How many communities currently require security service at the health centre and what challenges does the department face in ensuring securities are being met. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) So when we look at the number of communities, almost all communities have some form of security at the health facilities. We're currently at three communities without security. Those are Grise Fiord, Resolute Bay, and Whale Cove. And so in terms of the challenges around security in terms of this budget exercise, one of the big challenges is the cost. We know it's a big ask to put in front of the Assembly, and we are looking for ways to increase the amount of Nunavummiut who are employed.

For example, the current contract with Scarlet Security has a mentorship component built into it and we are seeing some success with that mentorship approach where you have a community guard paired with an enhanced security guard and then they can support them through some on-the-job training as well as some modules that the contractor has established.

Yes, there's a number of different functions that security guards provide. They also help us with things like building alarms, helping us with patrols around the property. We do have problems with vandalism of our facilities if they're not being watched over. And of course dealing with disruptive behaviour within the facility and responding when required. (interpretation) Thank you, Mr. Chairman.

Chairman: Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chairman. The minister mentioned that those three communities that are of course the smallest in Nunavut communities, are they going to get security. Thank you, Mr. Chairman.

Chairman: Hopefully it's not warranted. But Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) In order to expand the services, we would have to put forward a business case, it would have to be approved and included in the budget. So that's not the plan currently.

However, the trend that we are seeing and that we're trying to manage is one of where we do have increased violent incidents in our facilities. Roughly 30 percent of the violent incidents that were tracked in 2023 required RCMP involvement. These are potentially very serious issues that are being Department of Health with through these contracts. (interpretation ends) Thank you, Mr. Chairman.

Chairman: Thank you. Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chairman. Can the minister provide if the securities in the communities are with the staff housing, and what kind of benefits are they getting. Thank you, Mr. Chairman.

Chairman: Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) That's between the contractor and their staff members. My understanding is that they do provide housing for some of their staff. It's the contractor's responsibility to find housing unit that they're going to use and to set that up with their employees. Yes, I believe it's part of the reason why the cost associated with the contract is so high (interpretation ends) Thank you, Mr. Chairman.

Chairman: Mr. Malliki.

Mr. Malliki: Thank you, Mr. Chairman. The security service that is contracted to Scarlet is quite high. I wonder if there was any other security company that bid for tender, which promote more Inuit working in the security. Thank you, Mr. Chairman.

Chairman: Thank you. Minister Main.

Hon. John Main (interpretation): Thank you, Mr. Chairman. (interpretation ends) I don't have that information with me, in terms of going back to the procurement process and looking at what the other bidders were. You know, I can say that the contract holder knows that the department wants to see increased Inuit employment, hence the mentorship component, and in the contract we are seeing success in terms of retention of the community guards and so we're encouraged but we still have quite some ways to go before we would see, you know, the majority of or a representative level, 85 percent Inuit employment within the security field.

But as the chair mentioned earlier, it is an opportunity for careers for Nunavummiut and that's something that we need to further develop. We don't see the need for security services going away anytime soon. Thank you.

Chairman: Before I go back to Mr. Malliki I'm going to recognize the clock and a requirement to end at 6 p.m. With that, I will ask the Sergeant-at-Arms to escort the witnesses out and I will rise to report progress to the speaker. Thank you.

>>*Committee adjourned and House resumed at 17:55*

Chairman: Item 21, Report of the Committee of the Whole. Mr. Hickes.

Item 21: Report of the Committee of the Whole

Mr. Hickes: Thank you, Mr. Speaker. Mr. Speaker, your committee has been considering Bill 70 and would like to report progress. Mr. Speaker, I move that the report of the committee be agreed to. Thank you.

Speaker: The motion is in order. Is there a seconder? Mr. Kusugak. The motion is carried. Item 22, Third Reading of Bills. Item 23, *Orders of the Day*. Mr. Clerk.

Item 22: Orders of the Day

Mr. Clerk (interpretation): Thank you, Mr. Speaker. Tomorrow morning at 10 o'clock we will have a Legislative Committee meeting. *Orders of the Day*:

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 Motion
16. Notices of Motions for First Reading of Bills
17. Motions
18. First Reading of Bills
19. Second Reading of Bills
20. Consideration in Committee of the Whole of Bills and Other Matters
 - Bill 70
 - Bill 71
 - Bill 72
21. Report of the Committee of the Whole
22. Third Reading of Bills
23. Orders of the Day.

Thank you, Mr. Speaker.

>> *Applause*

Speaker: This House stands adjourned until Thursday, February 27, at 1:30 p.m.
Sergeant-at-Arms.

>> *House adjourned at 17:57*

