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**The Honourable Paul Delorey, Speaker**

**Legislative Assembly of the Northwest Territories**

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**YELLOWKNIFE, NORTHWEST TERRITORIES**

**Monday, February 20, 2006**

**Members Present**

Honourable Brendan Bell, Mr. Braden, Honourable Paul Delorey, Honourable Charles Dent, Mrs. Groenewegen, Honourable Joe Handley, Mr. Hawkins, Honourable David Krutko, Mr. Lafferty, Ms. Lee, Honourable Michael McLeod, Mr. McLeod, Mr. Menicoche, Honourable Michael Miltenberger, Mr. Pokiak, Mr. Ramsay, Honourable Floyd Roland, Mr. Villeneuve, Mr. Yakeleya

# ITEM 1: PRAYER

---Prayer

**SPEAKER (Hon. Paul Delorey):** Good morning, colleagues. Welcome back to the House. Orders of the day. Ministers’ statements. The honourable Minister for Environment and Natural Resources, Mr. Miltenberger.

# ITEM 2: MINISTERS’ STATEMENTS

## Minister’s Statement 73-15(4): Barren-Ground Caribou Management Interim Measures

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, evidence from traditional and scientific sources show that barren-ground caribou herds are declining across much of North America. Barren-ground caribou, like other species, follow cyclical population patterns. Factors such as climate change, predation, hunting, development, disease and fire can impact these cycles. Recent surveys show herd declines ranging from 40 percent in some herds to as high as 86 percent in others.

Given this trend, the Government of the Northwest Territories, along with co-management boards and harvesters, must act in the best interests of preserving our barren-ground caribou populations.

The Department of Environment and Natural Resources is responsible for the conservation and protection of our environment and natural resources. To achieve this objective, the department uses the best information available. When wildlife population trends suggest there is a serious concern, the department applies the “precautionary principle.” This means that management decisions shall err on the side of caution. We know that caribou numbers are declining and we must take reasonable conservation measures now to prevent serious or irreparable damage to this resource.

The actions we take over the next five years will have a profound impact on the recovery of barren-ground caribou. Our first step will be to institute interim management measures aimed at reducing harvest levels. The second phase will involve further information gathering on caribou numbers, predation levels and subsistence harvest counts. To guide our actions, the department has developed a Northwest Territories Barren-Ground Caribou Management Strategy 2006-2010. The strategy will steer our work in this area through the coming years. Later today, I will table a copy of this document and look forward to receiving feedback on the activities and plans it outlines.

Mr. Speaker, as a result of the Bathurst caribou management plan and recent herd surveys, we have, over

the past year, been meeting with groups to talk about caribou management. In addition to meetings with the Inuvialuit, Sahtu and Gwich’in co-management boards, we discussed the declining caribou numbers with leaders from the Tlicho, Yellowknives Dene, Dene Nation, Northwest Territory Metis Nation, barren-ground outfitters, as well as representatives from the adjacent jurisdictions of Nunavut, Yukon, Saskatchewan and Manitoba.

The first interim step is to reduce harvest levels. To meet this goal, a number of immediate actions will be applied across the Northwest Territories in the next six months. These include:

* developing a major public education campaign, including television, radio and print media;
* increasing monitoring and enforcement patrols;
* reducing caribou tags for resident harvesters from five to two;
* allowing resident harvesters to hunt bulls only;
* establishing a new management zone for the Cape Bathurst herd;
* delaying the public release of maps showing the locations of satellite collared caribou by two weeks; and
* investigating ways to mitigate impacts on harvesters.

Other immediate actions will be herd-specific and will include reductions to resident and commercial harvests recommended by co-management boards. Caribou tags for outfitters on the Bathurst fall range will return to 1999 levels. This will be done over a two-year period and reductions over the first year will only involve those tags that go unused. In addition, wolf tags for non-resident harvesters will be increased from one to two, and voluntary harvest limits proposed by the co-management boards will be accepted.

These changes will not happen overnight, Mr. Speaker. A number of the actions planned will require amendments to regulations. It is our intention to work with our partners to make the required changes as quickly as possible and we will notify the public through media announcements as these changes come into force.

As I mentioned earlier, Mr. Speaker, these interim measures are the first step. Over the spring and summer months, we plan on gathering up-to-date herd information and will be conducting a study on caribou predation. Once this information has been collected, we will consult with our partners and stakeholders, reassess our position and will work with co-management boards to develop the longer-term steps necessary to ensure healthy and sustainable caribou herds for today and the future. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Ministers’ statements. The honourable Minister responsible for Education, Culture and Employment, Mr. Dent.

## Minister’s Statement 74-15(4): Education Week 2006

**HON. CHARLES DENT:** Thank you, Mr. Speaker. Good morning. Education Week is February 20th to 24th in the Northwest Territories. It is an opportunity for all of us to celebrate the roles education plays in enriching and improving our lives.

The theme for Education Week 2006 is “Get Smart About Energy.” We are encouraging communities to celebrate Education Week by learning different ways to practice responsible energy consumption.

Schools throughout the NWT have been given a list of energy learning links. These web sites provide access to a wealth of information about energy. For example, students can discover how their use of energy contributes to greenhouse gas emissions that result in climate change. They can also find tips to get smarter about the power they use everyday.

Research indicates the Canadian Arctic is already experiencing serious and wide-ranging impacts from climate change. Melting permafrost, declining water levels in our lakes and rivers, changes in our air quality and uncommon weather patterns are all signs that climate change is currently taking place in the NWT and that action is required.

We know that education is one of the first steps towards improving energy consumption patterns. Posters, teacher resources and energy-efficient nightlights will be distributed to schools to promote informed decisions about energy use in the classroom, home and community.

Our annual celebration of Education Week is an excellent opportunity for each of us to reflect on the impact we have on our environment. It is important to acquire as much information and knowledge as possible and then take action to preserve the NWT landscape that we know today. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Dent. Ministers’ statements. Members, I would like to draw your attention to the third Monday in February of each year is set aside for Heritage Day. Heritage Day is an opportunity to celebrate the architectural, heritage and historic places of Canada. Canada has a wealth of cultural heritage places including First Nation longhouses, concert halls, opera houses, bandstands, cinemas, community halls, museums and art galleries, et cetera. It is nice to see some of the Members have chosen to celebrate Heritage Day by wearing traditional clothing in the House today.

---Applause

Orders of the day. Members’ statements. The honourable Member for Great Slave, Mr. Braden.

# ITEM 3: MEMBERS’ STATEMENTS

## Member’s Statement On Climate Change

**MR. BRADEN:** Mahsi, Mr. Speaker. Mr. Speaker, last Thursday was the first anniversary of the coming into force of the Kyoto Protocol on climate change. This is an agreement signed by Canada and some 150 other nations, and it calls for a five percent global reduction of greenhouse gases by the year 2012. Mr. Speaker, I would like to acknowledge the outstanding contributions of two organizations here in the NWT, the Arctic Energy Alliance and Ecology North, for the initiatives they are taking in heightening awareness of effective greenhouse gas reduction and what we can do to make a difference.

Mr. Speaker, Canada is number four -- and that would be fourth worst -- on the list of 32 OECD countries for our generation of carbon dioxide. Canadians have the dubious distinction of producing 16.7 tons of CO2 per capita. We, in the North, are particularly energy dependent, and with increasing diamond production and the prospect of pipeline development, we will be even more energy hungry. So, Mr. Speaker, what are we doing here in the NWT about finding alternatives to fossil fuels? What is our government doing to develop our vast hydro potential? What is our government doing to ensure that communities on the pipeline route are going to be able to replace dirty diesel with cleaner burning natural gas for their energy needs?

Mr. Speaker, the 1980s and ‘90s were the warmest decades on record; 1998 so far the warmest year. From the University of Manitoba comes a startling find that the polar ice cap is disappearing at the rate of 74,000 square kilometres a year, an area the size of Lake Superior. It’s too late to reverse the trend, Mr. Speaker, but many, many people believe, and I am one of them, that at least it can be slowed.

Part of the solution is individual responsibility, and action, and certainly, Mr. Speaker, a big part of it is how government can show leadership and take concrete action as our government has when it joined others this December in signing a declaration on climate change. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Braden. Before I go on, Members, I would like to draw your attention to the gallery to the presence of a former Member of this House, Mr. Leon Lafferty, former Member of Great Slave; or North Slave, rather.

---Applause

Members’ statements. The honourable Member for Nahendeh, Mr. Menicoche.

## Member’s Statement On Strategic Investment For Northern Economic Development

**MR. MENICOCHE:** Mr. Speaker…(English not provided)

Mr. Speaker, in March 2004, the federal government announced new funding of $90 million over five years to the three territories for strategic investment in northern economic development, or SINED. Well, Mr. Speaker, there are a lot of people out there who would like to get signed up, but, unfortunately, the status of this fund in the Northwest Territories is a bit of a mystery, especially following the recent federal election.

Mr. Speaker, the announcement of the $90 million was greeted with a lot of enthusiasm for good reason. The NWT has been without an economic development agreement with the federal government for years and we are paying for that lack of investment today.

**AN HON. MEMBER:** Shame, shame!

**MR. MENICOCHE:** Resource development works quickly and it is difficult for small businesses to keep up in order to take advantage of the opportunities. Other sectors such as renewable resources and tourism also need help so we can diversify our economy. Unfortunately, the payoff has been slow in coming. Other than $150,000 for five projects that was announced in March of 2005 and last November’s announcement of $2 million for geoscience activities, we have heard very little about how this fund is being used. By now, two years after the original announcement, I would have expected a lot more. Why wasn’t this fund tapped into more and sooner? Where has the money gone? Is it still a sure thing with the change of the federal government? Have we been signed off? Mr. Speaker, I hope this is not like the case of the old lady who went down in the Titanic taking her jewels with her to the bottom of the ocean. If we don’t hear anything soon, this government might have some luck in hiring some divers to search the bottom of this mysterious lake, because those jewels are desperately needed in the NWT today. Mahsi cho.

---Applause

**MR. SPEAKER:** Thank you, Mr. Menicoche. Members’ statements. The honourable Member for Kam Lake, Mr. Ramsay.

## Member’s Statement On Incentives For Northern Businesses

**MR. RAMSAY:** Thank you, Mr. Speaker. I am going to weigh in today on the discussion regarding the business incentive policy and the support, I believe, this government must continue to provide to northern businesses.

I am glad to hear that the government is not moving ahead with its intended plans to scrap the BIP and that there is room for the government to look at where we go from here.

I have heard from a number of constituents over the past week with regard to the BIP. I do share their concern that the policy must not be dropped and, in fact, that the Government of the Northwest Territories has a perfect opportunity, Mr. Speaker, to open up the policy and strengthen it even more, so that true, 100 percent owned northern businesses can be treated with the preference that the original BIP was intended for.

As for the two percent tax cut for small business, this should just happen; no question. Small business remains to be the engine of our economy and they should be given every opportunity to succeed and the tax cut should take place. I am interested in hearing from the Minister what exactly the government’s plans are for the BIP and whether or not strengthening is an option.

In my opinion, what we have to do is put more teeth in the BIP. The benefits must accrue to true, 100 percent owned northern businesses. Employees must live here; ownership must live here; taxes must be paid here. We can’t continue to allow for absentee ownership or companies whose workforce just don’t live here. We can’t allow them to continue to benefit from the BIP. Mr. Speaker, it does a disservice to those who are true, 100 percent owned northern businesses. As a government, we have to take the guesswork out of who is really northern and who isn’t. Once this is done, I am certain the Minister can hope to cut down on the cost of administrating the policy. To me, it’s quite simple: Either you are 100 percent northern or you’re not. The criteria, Mr. Speaker, can be easily arrived at.

We certainly do not want to lose more companies, people and economic opportunity to the South. We have to protect our own and no one else is going to do this for us, Mr. Speaker. Thank you.

---Applause

**MR. SPEAKER:** Thank you, Mr. Ramsay. Members’ statements. The honourable Member for Hay River South, Mrs. Groenewegen.

## Member’s Statement On Personal Directives Act

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. Mr. Speaker, last October, this Assembly passed the Personal Directives Act, which I understand is now in force as of January 1st. Personal directives, which are sometimes referred to as living wills, allow people to give advance instructions about how their personal matters will be handled should they be unable to make decisions for themselves. An individual can provide advanced direction for their medical care and also other personal matters such as where they would live, who would be allowed to visit them and who would make decisions on their behalf. Many people make their wishes known to loved ones and caregivers anyway, but the act will now make it possible for their instructions to be legally binding on health care professionals and family members. The act complements the Powers of Attorney Act, which allows people to leave advanced directions about how their financial matters will be handled if they become incapacitated.

Mr. Speaker, this legislation was welcomed with open arms by advocates for seniors and persons with disabilities as long overdue. It gives individuals dignity and control over their own private matters by allowing them to make critical decisions in advance of becoming incapacitated. A personal directive can also lift the burden of difficult choices from loved ones who need to focus on providing support to the incapacitated person, or on grieving.

For people who are growing older, or who are living with conditions that they know will eventually leave them unable to make decisions for themselves, personal directives can give them the security of knowing that they will be cared for as they would wish. Also, although we don’t like to think about it, Mr. Speaker, the fact is that any of us could be suddenly incapacitated by a serious accident or injury. For this reason, any adult, young or old, should seriously consider taking advantage of the new legislation and making a personal directive for themselves, along with a power of attorney.

Mr. Speaker, I am pleased this legislation is now in force and, later today, I will have questions for the Minister about how it’s being implemented. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. Members’ statements. The honourable Member for Monfwi, Mr. Lafferty.

## Member’s Statement On Predator Management Plans

**MR. LAFFERTY:** Mahsi, Mr. Speaker. (Translation) Mr. Speaker, I want to make a statement on caribou management. (Translation ends)

…fish for a living. In this way, we practice our traditional lifestyle and eat a healthy diet rich in our country foods. For the Tlicho people, hunting is not a hobby; it’s a way of life, Mr. Speaker. The caribou herds are declining and it’s getting harder and harder to find them. The Cape Bathurst herd has declined from an estimate of 17,500 in 1992 to an estimate of 2,400 in 2005. That’s a huge decline, Mr. Speaker.

The Bluenose herd has declined from an estimated 104,000 in 2000 to an estimate of 66,600 in 2005, Mr. Speaker. Because the caribou are disappearing, wolves and grizzly bears are becoming a problem in our communities, as you have heard in the latest news. It’s becoming a huge problem.

Wolves are attacking pets and dragging them off. The wolf population is probably stressed from not finding enough caribou to eat as a source of meat for them, so they are coming closer in contact with humans, Mr. Speaker, into communities.

Residents can kill as many wolves as they want. ENR is proposing to double the tags for non-resident wolf kills. Predator management plans will help us save our caribou, Mr. Speaker.

Mr. Speaker, the Minister of ENR needs to sit down with the Tlicho communities and discuss the best way to handle the predators that are moving into our communities, Mr. Speaker. We need to discuss the shrinking caribou population and how we can manage this situation together. For the Tlicho, Mr. Speaker, the caribou are much more than a sport; they have always been part of our way of life and they will always be, Mr. Speaker. Mahsi.

---Applause

**MR. SPEAKER:** Thank you, Mr. Lafferty. Members’ statements. The honourable Member for Tu Nedhe, Mr. Villeneuve.

## Member’s Statement On Day Care Services

**MR. VILLENEUVE:** Mahsi, Mr. Speaker. Mr. Speaker, since I couldn’t even find adequate temporary day care services for my son this morning, I felt compelled to talk about the high demand for day care services and the lack of response from this government to address day care issues.

Mr. Speaker, some of my colleagues have talked about the imbalance in funding and other services that day cares in Yellowknife are experiencing, but I want to point out that this imbalance is even more obvious in our remote communities where the number of young, single parents comprise a greater segment of the whole population.

Mr. Speaker, I would like to see a greater lobbying effort with the federal government to find a better financial arrangement to make some real differences for day cares in the NWT, a service that seems to come and go, and people not knowing whether operations will continue from year to year in many of our communities.

Mr. Speaker, the government also has to be creative in their approach to address day care concerns and not always leave that requirement at the local level, like we hear all the time from our Minister when answering concerns about day cares. Mr. Speaker, these day cares are creative. That’s their job. Ours is to be cognizant, resourceful and effective. Mahsi, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Villeneuve. Members’ statements. The honourable Member for Inuvik Twin Lakes, Mr. McLeod.

## Member’s Statement On Compensation For Long-Term Northern Nurses

**MR. MCLEOD:** Thank you, Mr. Speaker. Mr. Speaker, providing quality health care and supplying health care workers should be a priority of this government. We train northerners to become nurses to staff our hospitals, yet we have to continue to bring up nurses from the South. I understand, Mr. Speaker, that we need these nurses to come north and they are well compensated for their time up here. Until we can staff our hospitals with northern nurses -- and hopefully that day will come soon -- we have to continue to use southern nurses. The message we have to send to our northern, long-term nurses is we will compensate you as well as we do the southern nurses. We have nurses who have come north years ago and decided to make the North their home, and for that we thank them.

The point I am trying to make, Mr. Speaker, is that northern and long-term nurses should also enjoy some of the benefits as their southern counterparts. We should have a retention bonus paid for every few years of service in the North. It could be two nurses, Mr. Speaker, working side by side, one from the North and one from the South. The one from the South will be making more in benefits than the one from the North, and they can go back home and enjoy a lower cost of living than the one from the North having an extreme high cost of living and they are paid less than their southern counterparts.

So, Mr. Speaker, we need long-term and northern nurses in the North and let’s do what we can, as a government, to make that a reality and compensate them as they deserve. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. McLeod. Members’ statements. The honourable Member for Sahtu, Mr. Yakeleya.

## Member’s Statement On Consideration For A Department Of Culture, Heritage And Languages

**MR. YAKELEYA:** Thank you, Mr. Speaker. Mr. Speaker, the Department of Education, Culture and Employment was one of the first departments to transfer to the territorial government when the government came north from Ottawa in the late 1960s. At the time, Mr. Speaker, the Department of Education was concerned with the education of our children and providing adult vocational training. Over the years, the department’s mandate has expanded to include the following: arts and culture; heritage and museums; languages, aboriginal and French; colleges, including the granting of university degrees; employment programs; income security programs; and Labour Board.

As you see, Mr. Speaker, we are talking about a fairly extensive list of responsibilities and I strongly believe that amongst these competing priorities, culture, heritage and language are getting the short end of the stick. This is somewhat understandable, given the support most northerners have for quality education in our schools and post-secondary programming. Mr. Speaker, I believe this is because the sheer size of the department and the many roles it is expected to pay in defining northern society. The areas of culture, heritage and languages do not have a true champion at the table, Mr. Speaker. This is not the fault of the current Minister. I feel for him, having to make choices between competing priorities, but I cannot fault for choosing to improve education for our children and making sure that those who are less fortunate have the income security programs they need over increasing funding for culture, heritage and languages.

The Government of Nunavut has recognized this need, Mr. Speaker, and created a Department of Culture, Language, Elders and Youth. I believe we should be looking at their model in developing a department that is focussed on culture, heritage and languages. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Members’ statements. The honourable Member for Yellowknife Centre, Mr. Hawkins.

## Member’s Statement On Crown Corporation Accountability

**MR. HAWKINS:** Thank you, Mr. Speaker. One of the most important roles of Regular Members is to hold the government accountable for the use of taxpayers’ money. Accountability is the basic tenant of good governance. To do this effectively, Members need objective and fact-based information. The work done by the office of the Auditor General of Canada is critical with this respect.

Mr. Speaker, reports are independent and a reliable source of information given to us by the Auditor General, but there are several other kinds of audits. The most familiar we are aware of is a financial audit where there is an examination of the department’s financial transactions and practices. Another is a performance audit, otherwise known as value-for-money audit. Performance audits ask, are programs being run with due regard for economy, efficiency and environmental impact? Performance audits contain recommendations that can serve as a springboard to lasting and positive change in the public entity’s function.

Performance audits of Crown corporations are especially important because Regular Members do not review the budgets and business plans of Crown corporations, as we do for other government departments. There is a lack of direct oversight on the part of elected MLAs. We need to work collectively to fix this, Mr. Speaker.

Regular performance audits could be the vehicle to ensure the Crown corporations are running efficiently and effectively with no waste to public money. Performance audits are not being done as regularly as I would like, and current financial audits do not provide the same degree or rigorous examination. I would like to see changes implemented to ensure that regular performance audits of all Crown corporations happen. I would like to see this government pass legislation called the Crown corporations accountability act that would do this. This would clearly say to the public that this Assembly is committed to regular rigorous accountability through the audit process.

We have the ability to pass laws that directly affect us. Let’s pass one that shows we are committed to this process. Mr. Speaker, this is a bold process; to say we are committed to examining our books, regularly and in a fair way. We want to ensure that the public is getting the most efficient and effective government and the best management of the public purse possible. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Hawkins. Members’ statements. The honourable Member for Range Lake, Ms. Lee.

## Member’s Statement On Social Housing Opportunities

**MS. LEE:** Thank you, Mr. Speaker. Mr. Speaker, I must say I was very happy to see a spontaneous debate break out in this House last week about opportunities for future social housing in the North, precisely the kind of issues that should get us all rolling up our sleeves and looking at the pros and cons of any idea that comes before us.

As well, as I have said many times before, I agree with all the MLAs in this House that the need for social housing in our territory has reached a crisis proportion. In our travels, there is nothing else more urgent, and my colleagues, especially from the small communities, are doing their job well by fighting hard to make something happen for social housing and I support them in that endeavour.

What we should keep in mind, though, Mr. Speaker, is we should keep in mind that together with the help of the federal government and private sector, this government is coming to the table with a lot of money and influence for the benefit of any company who would get this deal, and it’s about time that this government started playing hardball on all of its files and stop sending comfort letters and comfort contracts, Mr. Speaker.

---Applause

Mr. Speaker, it’s time this government starts talking about what the companies can do for us, instead of spending our budget and influence talking about what we can do for one company. We must not be satisfied with promises of northern participation of business and labour. We must see concrete deals in writing for our people. I would like to see, for example, a northern training centre being built out of this project.

Mr. Speaker, surely $500 million should make any company in the world sit up and take notice. Any company who gets to build housing for Imperial stands to make nothing but money; stands to make nothing but money. They'll get the $235 million from Imperial; $40 million plus for the premium; they'll have backup from this government and the federal government to the tune of $200 million plus, and they will have this government developing some very scarce lots. For this, I'd like to see much more for the northerners.

Anyone who wants to build 10 houses for this government would have to go through a competitive bidding process. Government says that ATCO is investing $10 million on this idea and they're doing their part. Well, Mr. Speaker, Imperial Oil plans to invest seven to nine billion into the Territories and they're going through a three-year public regulatory process. Surely any company who would be hired to build housing for 25,000 workers and turn those housing into 1,400 mobile homes needs to be taken to task for more about what they can do for us.

Mr. Speaker, already, though, I am seeing that our questions about northern labour and northern business…Mr. Speaker, may I seek unanimous consent to finish my statement?

**MR. SPEAKER:** The Member is seeking unanimous consent to conclude her statement. Are there any nays?

**AN HON. MEMBER:** Nay.

**MR. SPEAKER:** I hear a nay. Members' statements. Returns to oral questions. The honourable Member from Inuvik Boot Lake and Minister of Finance, Mr. Roland.

**Point Of Privilege**

**HON. FLOYD ROLAND:** Thank you, Mr. Speaker. I rise today on a point of personal privilege under Rule 20(1). In today's News/North there's an article on page 13 entitled "ATCO trailers draw fire." Accompanying the article is a picture of an ATCO trailer with the caption, and I quote, "The government wants to convert a new variety of ATCO trailer for residential use in aboriginal communities."

Mr. Speaker, one is left with the impression that the ATCO trailer pictured in the article would be used in the Novel project. It seems to me that the News/North has misunderstood the nature of the proposed project, and I'd like to clarify, for the record, that the ATCO unit pictured in the article would be completely inadequate for the Novel project, and I will be offering a press briefing next week to alleviate any future misunderstandings. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Roland. Returns to oral questions. Recognition of visitors in the gallery. The honourable Member for Monfwi, Mr. Lafferty.

# ITEM 5: RECOGNITION OF VISITORS IN THE GALLERY

**MR. LAFFERTY:** Mahsi, Mr. Speaker. It gives me great pleasure to highlight Chief Lafferty from Behchoko, Chief Football from Wekweeti, and Chief Gon from Gameti present and here. Mahsi.

---Applause

**MR. SPEAKER:** Recognition of visitors in the gallery. The honourable Member from Hay River South, Mrs. Groenewegen.

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. I'd also like to recognize my former colleague Leon Lafferty, Chief Leon Lafferty. For Heritage Day today, I'm proud to say that Leon took my jacket home and his mom did the Dogrib embroidery on my jacket. Thank you, Leon.

---Applause

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. Recognition of visitors in the gallery. The honourable Member from Kam Lake, Mr. Ramsay.

**MR. RAMSAY:** Thank you, Mr. Speaker. Mr. Speaker, I'd like to recognize a constituent of mine, Mr. Manuel Jorge, who is with us today. He runs a manufacturing facility in the riding of Kam Lake: Energy Wall Products. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Ramsay. Recognition of visitors in the gallery. The honourable Member from Deh Cho, Mr. McLeod.

**HON. MICHAEL MCLEOD:** Thank you, Mr. Speaker. Mr. Speaker, it gives me great pleasure to introduce and recognize Georgina Fabian from the Hay River Reserve. She's the mother of one of our Pages that are working with us today. I'd also like to recognize Lorne Napier, a former college buddy of mine from Fort Smith. Thank you.

---Applause

**MR. SPEAKER:** Thank you, Mr. McLeod. Recognition of visitors in the gallery. I'd like to welcome everyone in the gallery today. The honourable Member from Sahtu, Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Speaker. Mr. Speaker, I want to recognize Chief Henry Gon from the Tlicho leadership. One time Henry and I were fighting fires in the assembly line. In the late '70s we were fighting fires and today we're putting out different fires…

---Laughter

Thank you.

---Applause

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Recognition of visitors in the gallery. Oral questions. The honourable Member from Great Slave, Mr. Braden.

# ITEM 6: ORAL QUESTIONS

## Question 421-15(4): Climate Change

**MR. BRADEN:** Mr. Speaker, thank you. My question this afternoon is for the Honourable Michael Miltenberger as the Minister responsible for the environment. It relates to his participation in December of last year, Mr. Speaker, in Montreal, along with our Premier, when they signed, among 18 other states and countries to provide the Declaration of Federated States and Regional Government on Climate Change. The first commitment of this agreement, Mr. Speaker, is to set achievable short and long-term targets and objectives within our own jurisdictions for overall emission reductions. Could the Minister advise this House in implementing this agreement, what commitments has this government made to short and long-term achievable targets for greenhouse gas reduction, Mr. Speaker? Thank you.

**MR. SPEAKER:** Thank you, Mr. Braden. The honourable Minister responsible for Environment and Natural Resources, Mr. Miltenberger.

### Return To Question 421-15(4): Climate Change

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, there hasn't been much specificity arrived at our targets set as a result of that agreement that was signed not very long ago. But suffice it to say, Mr. Speaker, we have a number of initiatives on a number of different fronts that are attempting to deal with this. We're going to have a white paper out on energy that's going to give a chance to get feedback on that. We were working very closely with the former federal government on a climate change agreement that was very, very close to being finalized. We're waiting to have meetings with the new Conservative government to see where that's going to take us. But we recognize, Mr. Speaker, that we're going to have some serious challenges before us if the pipeline goes ahead; our amount of emissions is going to increase. So we're working with them, as well, to look at the potential of hydro development. So we're looking at a number of ways, across the board, to look at what we can do to limit our emissions before we come to this more specific task of setting targets. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Supplementary, Mr. Braden.

### Supplementary To Question 421-15(4): Climate Change

**MR. BRADEN:** Thank you, Mr. Speaker. It's a bit discouraging to find out that we're continuing to do yet more study and more exploration, Mr. Speaker, in the face, for instance, that our own NWT greenhouse reduction strategy dated in 2001 is still in draft form, and yet we're continuing to study this issue. Mr. Speaker, further to the Minister's reference to hydro, there is enormous potential in the Northwest Territories, and we certainly know that we have some very strong candidates for anchor customers in the pipeline and the diamond mines. Could the Minister advise how the advancement of hydro power will be pursued as a source of cleaner energy for mining and other development, Mr. Speaker?

**MR. SPEAKER:** Thank you, Mr. Braden. Mr. Miltenberger.

### Further Return To Question 421-15(4): Climate Change

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, there's work being done on the Taltson hydro expansion that's going to look at running a line north to be able to feed the diamond mine with the surplus power that is currently there, with the ability to expand the Taltson dam to be able to generate over 100 megawatts of power. That's a significant initiative. There's work being done on the Bear River, as well; initial studies. There's working being done as part of the Mackenzie gas pipeline development to see about the use of that power, that hydroelectricity, to be able to generate the power required to run the compressor stations on the pipeline, which are two major developments. I'd point out as we are doing our own work, we've also received indication that the Alberta government is once again seriously exploring the dam on the Slave River. So there's hydro throughout this territory and in Alberta where there's serious work being done.

Our focus is on what's happening in the Northwest Territories, but we have to be very, very cognizant about what's happening in the South, as well, because it will impact our ability up here. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Final supplementary, Mr. Braden.

### Supplementary To Question 421-15(4): Climate Change

**MR. BRADEN:** Mr. Speaker, the Minister mentioned, in his answer, that we're talking to the pipeline folks about distribution along the pipeline route, and about powering the pipeline with potential hydro from the Bear River project. When the diamond mines were set up, we weren't quite on our game here. We should have made it a condition, I believe, of diamond mine development that they would take our hydro energy. Can the Minister advise whether we are taking this kind of bold and progressive step with the Mackenzie gas project? Are we looking at making it a condition or a discussion with them, that they will make natural gas available to communities along the pipeline route? Is that a condition of our acceptance of a pipeline, Mr. Speaker? Thank you.

**MR. SPEAKER:** Thank you, Mr. Braden. Mr. Miltenberger. Honourable Premier, Mr. Handley.

### Further Return To Question 421-15(4): Climate Change

**HON. JOE HANDLEY:** Thank you, Mr. Speaker. The question is outside of the Minister's mandate. It is a question of whether or not the pipeline will provide gas to communities that it goes along. That remains yet to be negotiated. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Handley. Oral questions. The honourable Member for Monfwi, Mr. Lafferty.

## Question 422-15(4): Predator Management Plans

**MR. LAFFERTY:** Mahsi, Mr. Speaker. (Translation) The question I have will be regarding the caribou management. (Translation ends)

…ensure that whatever plans are in place for caribou herd management will not affect the livelihood and tradition of the first people of the North, including those people in my region: the Tlicho Nation? Mahsi, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Lafferty. The honourable Minister responsible for Environment and Natural Resources, Mr. Miltenberger.

### Return To Question 422-15(4): Predator Management Plans

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, I can assure the Member that as long as the Wekeezhii board is operational and in business, we will be working very closely with them, as well as all the other wildlife boards up and down the valley, to look very carefully at what's happening with the caribou herds, the declining populations and the short-term steps we're taking, but, more importantly, the long-term planning that's going to be required that we all do collectively. That commitment is there, with the goal to sustainability and preserving the herds. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Supplementary, Mr. Lafferty.

### Supplementary To Question 422-15(4): Predator Management Plans

**MR. LAFFERTY:** Mahsi, Mr. Speaker. Mr. Speaker, I would like to ask the Minister of ENR if the Minister has discussed the caribou problems or challenges with the Wekeezhii Renewable Resources Board, and also if that was shared with the Tlicho communities, Mr. Speaker? Mahsi.

**MR. SPEAKER:** Thank you, Mr. Lafferty. Mr. Miltenberger.

### Further Return To Question 422-15(4): Predator Management Plans

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, our initial discussions were with the Tlicho chiefs where we discussed the issue, got some initial feedback from them prior to the Wekeezhii board coming into force and into operation. The plan now, very clearly, is to work with the board as we move forward with all the work that's to be done. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Final supplementary, Mr. Lafferty.

### Supplementary To Question 422-15(4): Predator Management Plans

**MR. LAFFERTY:** Mahsi, Mr. Speaker. Mr. Speaker, my final question is relating to the predators. I want to ask the Minister what he plans to do about the increasing problem of predators in the communities. Mahsi, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Lafferty. Mr. Miltenberger.

### Further Return To Question 422-15(4): Predator Management Plans

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. We have heard the concerns from a number of different areas, including from the Tlicho region. As I've indicated in my statement today, we're going to be doing some studies on predators, initially looking at the wolf population. As well, we've raised the tags from one to two. As well, my understanding is the prices for wolf pelts are very, very high. There's an opportunity for people to help thin out the population as they go about their business of trapping. We're going to be doing some predation studies to give us some baseline information, and we can decide, very clearly, once again in cooperation with all our partners, what the next steps will be. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Oral questions. The honourable Member from Nahendeh, Mr. Menicoche.

## Question 423-15(4): Strategic Investment For Northern Economic Development

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. I'm just going to follow up on my Member's statement and ask questions on the strategic infrastructure for northern economic development, to the Premier, Mr. Speaker. It's been said time and time again that the GNWT or the Northwest Territories, Mr. Speaker, is having unprecedented growth. However, there are still disparities that are occurring throughout the North in the different regions. One can argue that even the region that I represent is facing some economic hardships. It's kind of hard to believe, but that's the case. One can make the business case by using stats. So when this fund was announced in 2004, I thought that as an MLA here's an opportunity to get some funds to stimulate my region of Nahendeh. Since this fund has been in place, maybe the Premier can tell me and this House how has our North benefited to date from this special fund, and where is this fund at. Mahsi cho.

**MR. SPEAKER:** Thank you, Mr. Menicoche. The honourable Premier, Mr. Handley.

### Return To Question 423-15(4): Strategic Investment For Northern Economic Development

**HON. JOE HANDLEY:** Thank you, Mr. Speaker. When the fund was announced, and I believe it was in the federal budget address for 2004, we also anticipated that that money would flow like the previous northern economic development funds; or, better yet, flow directly to our government through our lending institutions to be available to small businesses.

Mr. Speaker, over the years since then, myself and the other two territorial Premiers argued that that money should be divided up to each territory and through the existing institutions. The Minister responsible for northern development of the day thought it should be managed by the federal government. We were not given direct access to it. Mr. Speaker, late in the last calendar year, our government was approached to see if we could use some of the money. Two point four million was largely for geotechnical work. Other than that, I believe one or two business may have benefited, but, Mr. Speaker, it's been frustrating because we have not had an ability to be able to manage that money. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Handley. Supplementary, Mr. Menicoche.

### Supplementary To Question 423-15(4): Strategic Investment For Northern Economic Development

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. Just with respect to that fund, it's a $30 million fund available through the GNWT; $90 million for the three territories. However, in the two years that it was utilized for our territory, there was just over $2 million expended. There was $150,000 on five separate projects in total, and, as well, $2 million invested in geoscience. It's strange that they imported $2 million in stimulating an already-growing sector. It's not that sector that needs the help in the North there, Mr. Speaker. So I'd like to know, does the Premier and does this government have a strategy in order to tap into this fund that's there? I know that we created a beautiful package called Corridors for Canada II. Do we have a similar vehicle for the federal government, Mr. Speaker? Mahsi.

**MR. SPEAKER:** Thank you, Mr. Menicoche. The honourable Premier, Mr. Handley.

### Further Return To Question 423-15(4): Strategic Investment For Northern Economic Development

**HON. JOE HANDLEY:** Thank you, Mr. Speaker. This one is fairly simple. We want the federal government to have the $30 million allocated for the Northwest Territories made available through our institutions to then be flowed, on application, to small businesses where it should be. Mr. Speaker, today the Minister for ITI is going to be speaking to the Minister of DIAND and will be raising this issue. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Handley. Final supplementary, Mr. Menicoche.

### Supplementary To Question 423-15(4): Strategic Investment For Northern Economic Development

**MR. MENICOCHE:** Thank you very much, Mr. Speaker. I guess that was one of the biggest points, is to let this new government know that we don't want this fund kind of just being swept under the rug and disappearing from access to our Territories, and to access it once again for our people and our communities. So will this government bring it up with the new federal government, that this is very important to us? Mahsi.

**MR. SPEAKER:** Thank you, Mr. Menicoche. Mr. Handley.

### Further Return To Question 423-15(4): Strategic Investment For Northern Economic Development

**HON. JOE HANDLEY:** Thank you, Mr. Speaker. Yes, I agree with the honourable Member, that this money should be managed in the North by a northern government. It should be through our institutions. We've got existing ways of supporting small businesses, so we would like to have our $30 million share managed here.

Mr. Speaker, going further, I know our Minister for Industry, Tourism and Investment will also be talking with the federal Minister of DIAND about a long-term EDA, so we're not going every few years looking for a little bit more money. Thank you, Mr. Speaker.

---Applause

**MR. SPEAKER:** Thank you, Mr. Handley. Before I go on, Members, I'd like to draw your attention to the gallery today and recognize the following visiting dignitaries under the northern dimension of Canada's foreign policy outreach program: Mr. Jack Anawak, ambassador for circumpolar affairs…

---Applause

Mr. Lorenz Friedlaender, ambassador of Canada to Sweden…

---Applause

Mr. Richard Tetu, ambassador of Canada to Iceland…

---Applause

Ms. Fredericka Gregory, ambassador of Canada to Denmark…

---Applause

Ms. Jillian Stirk, ambassador of Canada to Norway…

---Applause

Ms. Anne-Marie Boucier, ambassador of Canada to Finland…

---Applause

Mr. Jeffrey Parker, consul general to Washington, Oregon, Idaho and Alaska…

---Applause

Mr. Michael Small, director general, Human Security and Human Rights Bureau…

---Applause

Mr. Pierre Guimond, director, Eastern Europe and Balkans division…

---Applause

also our chief of protocol, Carmen Moore, in the gallery.

---Applause

I want to welcome you all to the House today and I hope you're enjoying your tour of Yellowknife, and the Chamber, and the House. Thank you.

---Applause

Oral questions. The honourable Member from Kam Lake, Mr. Ramsay.

## Question 424-15(4): Incentives For Northern Businesses

**MR. RAMSAY:** Thank you, Mr. Speaker. Mr. Speaker, my questions today are for the Minister of Industry, Tourism and Investment. Given the fact that we've had some discussions here in the House just recently on what the Minister and the department plan on doing with options and consultation with regard to the business incentive policy, I'd like to ask the Minister whether or not he would be willing to entertain an option to strengthen the business incentive policy so that true, 100 percent-owned, northern operated businesses, those who live here, those whose employees live here and pay taxes here, receive the benefits of this business incentive policy? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Ramsay. The honourable Minister responsible for Industry, Tourism and Investment, Mr. Bell.

### Return To Question 424-15(4): Incentives For Northern Businesses

**HON. BRENDAN BELL:** Thank you, Mr. Speaker. Well, it's very tempting to just say yes to the question, but it's a very difficult question, Mr. Speaker, for a number of reasons. One of the things that we've recognized is that government procurement is no longer the only game in town. With mines and oil and gas, we've got a very vibrant private sector. There are businesses taking good advantage of that sector and making their livelihood that way. So the BIP isn't as relevant as it used to be.

I've had discussions with the Finance Minister about potential removal of the BIP. If we are able to remove the BIP, we know we'd save some administrative money. I know, and the Canadian Federation of Independent Business has told us that NWT businesses are interested in reduction of red tape and a more competitive taxation regime. We think we can trade that for the BIP which is no longer as compelling as it was in the past. But I'm open to discussion with businesses. We are consulting. The Chamber of Commerce is out hearing from businesses. We want to know that they think, Mr. Speaker. I think that's the important part.

What I'm not interested in is an overly convoluted, complex, additional bureaucratic regime. If we talk about ensuring that only true northern businesses with only northern employees would reap the rewards of some sort of protectionist policy, it's very obvious to recognize that we can't be policing and auditing everybody to ensure that they spend all of their time in the Northwest Territories, all of the money stays here. I don't want to add layers of bureaucracy and complexity. So I'm open to discussion. But let's keep the goals in mind: competitive taxation and reduction of the regulatory burden. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Bell. Supplementary, Mr. Ramsay.

### Supplementary To Question 424-15(4): Incentives For Northern Businesses

**MR. RAMSAY:** Yes, thank you, Mr. Speaker. Mr. Speaker, I don't think it would get any more complicated. In fact, I think it would be much simpler. Either you're northern, or your not. Either your employees live here, or they don’t. Either you live here, or you don’t. To me, it's quite simple. There's been some concerns, because of the discussion here in the House recently. There's been concerns in the business community about the two percent reduction in tax rate for small businesses. I'd like the Minister to maybe just elaborate a little bit further on this. Who qualifies as a small business, and what will this reduction, what would it cost us? Can the Minister make a commitment to see this reduction through, regardless of what discussions happen on the future of BIP? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Ramsay. The Chair heard about three questions there. The Minister can answer one or all three. Mr. Bell.

### Further Return To Question 424-15(4): Incentives For Northern Businesses

**HON. BRENDAN BELL:** There are a number of them, Mr. Speaker. I'll try to be as concise as I can. One of the options on the table, if we're able to do away with the BIP and save some money in administration, one of the things that I approached the Finance Minister with was the potential of taking our small business tax rate from four percent to two percent; really a 50 percent reduction. The small business rate applies to income; a net income geared up to $300,000. So anything above the $300,000 mark has the corporate business tax rate applied…We know we just talked about reducing that from 14 to 11.5. So I've approached the Finance Minister. We've discussed a number of options that we're able to save money on BIP administration. This was but one of the options that we discussed. I would say, though, that I doubt he's going to be amenable to the tax break without a reduction of administration. We've got to pay for it somehow, Mr. Speaker. So obviously I'm not in a position to be able to decide what tax rates are applied. That's the Finance Minister's decision and the Cabinet's decision. But I do know that the premise was that if we could save administrative money, we could plough it back into the competitiveness of our small businesses. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Bell. Your final supplementary, Mr. Ramsay.

### Supplementary To Question 424-15(4): Incentives For Northern Businesses

**MR. RAMSAY:** Thank you, Mr. Speaker. I guess too many questions on this, and it is a sensitive issue for many people here in the Northwest Territories. I guess the last question I'll ask, and I'll try to keep it to one question, what is the time frame for the government's decisions regarding the business incentive policy and where we're going with this? I think it's important that we get this time frame out there so that businesses and residents here know what exactly the government's game plan is regarding the business incentive policy. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Ramsay. Mr. Bell.

### Further Return To Question 424-15(4): Incentives For Northern Businesses

**HON. BRENDAN BELL:** Thank you, Mr. Speaker. As the Member knows, I've met with the NWT chamber. I do intend to meet with the other local chambers. The NWT chamber is conducting a survey now of its membership. I think they've given them a month to respond. We'll take that feedback; take the feedback that we've heard from the Governance and Economic Development committee, and we'd like to make a decision this spring or early summer. I'm not interested in a year-and-a-half consultation exercise where we go far and wide and discuss a wide range of potential options. Governments previous have done that to no avail. It comes down to political will. Either we decide that it's more important to lower our tax rates and have a competitive regime, or it's apparently more important to say with this what I believe is an outdated protectionist policy. I don't say that in an absolutely negative manner, Mr. Speaker. I think the point here is that this was once very relative and very compelling and helped northern businesses get established. I just don't think it's doing the job anymore, Mr. Speaker. Thank you.

**MR. SPEAKER:** Thank you, Mr. Bell. Oral questions. The honourable Member from Hay River South, Mrs. Groenewegen.

## Question 425-15(4): Personal Directives Act

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. Mr. Speaker, my questions today are for the Minister of Health and Social Services, the Honourable Michael Miltenberger. Mr. Speaker, I was not on the standing committee that reviewed the personal directives bill, but I understand that a lot of concerns were raised about how the new act and the options that it provides would be communicated to elders, and especially those who do not speak English. My question for the Minister today is, what public education is being done, especially to reach out to the elders to make them aware of the act, where they can go to get assistance in drafting a personal directive? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. The Minister responsible for Health and Social Services, Mr. Miltenberger.

### Return To Question 425-15(4): Personal Directives Act

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, in December of '05, a contractor was hired and tasked with developing a story line and script to introduce the subject of personal directives to the public, and that this work would be translated into all the official languages of the NWT as well. So we will cover audio recordings in Cree, Chipewyan, English, French, Gwich'in, Innuinaqtun, Inuktitut, Inuvialuktun, North Slavey, South Slavey and Tlicho. A brochure and samples will also be prepared. To date, English, French, South Slavey and Tlicho have been recorded. The remaining languages will be recorded and ready by March 17th. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Supplementary, Mrs. Groenewegen.

### Supplementary To Question 425-15(4): Personal Directives Act

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker, and I thank the Minister. I'd like to ask the Minister, though, what support and training is the department providing to health care professionals so that they understand their obligations when they come across a personal directive, and also so that they can make patients aware, in appropriate circumstances, of their right to make a personal directive? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. Mr. Miltenberger.

### Further Return To Question 425-15(4): Personal Directives Act

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, there was a commitment made when we brought this bill forward that there would be the necessary training done. As this work is rolled out, there will be accompanying information and work done with the health centres, boards and authorities to make sure the staff are conversant in this legislation and are able to work with the individuals that may be interested to use the samples and brochures that are there, as well as access the CDs and other media work that’s being done, which will be sent out upon completion. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Mrs. Groenewegen.

### Supplementary To Question 425-15(4): Personal Directives Act

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. I realize a commitment was made. I was more wondering where we are at with that commitment, but I am going to move on to my last question. In practical terms, a personal directive is not of much use if a person’s family members and health care professionals are not aware that it exists. I understand that the act allows for the department to establish a registry of personal directives, which people could consult to find out whether an incapacitated person has made a directive. Has the department taken any steps, to date, to establish that registry? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. Mr. Miltenberger.

### Further Return To Question 425-15(4): Personal Directives Act

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, work is underway to ensure that that ability is there for people. We haven’t finalized it yet that I am aware of, but I know that we intend to honour that commitment. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Oral questions. The honourable Member for Sahtu, Mr. Yakeleya.

## Question 426-15(4): Consideration For Department Of Heritage, Culture And Language

**MR. YAKELEYA:** Thank you, Mr. Speaker. Mr. Speaker, last week, this House passed a motion unanimously naming Deline as the birthplace of ice hockey in Canada.

---Applause

Also, Mr. Speaker, earlier I talked about the split of the Department of Education, Culture and Employment. Over the weekend, I had an opportunity to go out on the land with some of the family members and cooked out there and had the elders there. We talked about the importance of language, culture and heritage. In my statement today, I talked about the department considering having a look at the split of this department because of all the responsibilities that it's undertaken so far. I want to ask the Minister of Education, Culture and Employment, has his department considered a split into something where Nunavut has the Department of Culture, Language, Elders and Youth and if it’s part of a 10-year review plan? Thank you.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. The honourable Minister responsible for Education, Culture and Employment, Mr. Dent.

### Return To Question 426-15(4): Consideration For Department Of Heritage, Culture And Language

**MR. DENT:** Thank you, Mr. Speaker. In honour of the motion that we undertook on Thursday here, I spent my weekend at the arena watching hockey, particularly watching teams from Tulita and Norman Wells in a Peewee hockey tournament.

Mr. Speaker, whether or not the department would be divided in two is something that we are going to consider over the next year-and-a-half and make recommendations to the next government. We are looking at perhaps making a recommendation that would see the department split along the lines of the two ADMs in the department right now, which would include employment and income support in the language and culture side.

We are finding that it is actually quite useful to have the language and culture component in the department. It helps us to strengthen the ties between language and culture in K to 12 schooling, and it helps us to make sure the college is aware of the importance of language and culture, too, and helps us to work with them to strengthen the Aboriginal Language and Culture Instructors Program. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Dent. Supplementary, Mr. Yakeleya.

### Supplementary To Question 426-15(4): Consideration For Department Of Heritage, Culture And Language

**MR. YAKELEYA:** Thank you, Mr. Speaker. Thank you, Mr. Minister. I hope you cheered for Tulita and Norman Wells this weekend here. Mr. Speaker, I was really happy to see that the honourable Members here dressed up in the clothes for today. I want to say, Mr. Speaker, would the Minister consider formalizing an elders’ advisory group or council, along with the consideration of the split of the department into culture, language and heritage? Thank you.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Mr. Dent.

### Further Return To Question 426-15(4): Consideration For Department Of Heritage, Culture And Language

**HON. CHARLES DENT:** Thank you, Mr. Speaker. Mr. Speaker, I believe that we have an elders’ council that works with the Minister for Health and Social Services right now. Right now, we have, providing advice for the department, an Aboriginal Languages Revitalization Board, as well as an Official Languages Board. They provide us with advice and recommendations as to how we should move in the area of official languages.

We work with stakeholders from across the Territories, the divisional education councils, and we talk with them about how we need to involve language and culture in the schools. I think right now, we are already listening to people -- the stakeholders across the Territories -- about how we should address these issues. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Dent. Final supplementary, Mr. Yakeleya.

### Supplementary To Question 426-15(4): Consideration For Department Of Heritage, Culture And Language

**MR. YAKELEYA:** Thank you, Mr. Speaker. Would the Minister then, in terms of utilizing the elders…I know some of the elders are on pension and some are on income support. However, when you utilize the elders, sometime they get penalized for their services in the form of compensation. Would the Minister overlook or give special consideration to the elders when they use their services in terms of helping us shape our government for the future and giving them some flexibility on these types of payments? Thank you.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Mr. Dent.

### Further Return To Question 426-15(4): Consideration For Department Of Heritage, Culture And Language

**HON. CHARLES DENT:** Thank you, Mr. Speaker. As the Member knows, we have embarked on a process whereby we are re-examining our income security programs. As we go through them, we will have to examine all of the rules and regulations for how income is treated, and I will certainly make sure this is one of the areas that comes up for discussion. Thank you.

**MR. SPEAKER:** Thank you, Mr. Dent. Oral questions. The honourable Member for Range Lake, Ms. Lee.

## Question 427-15(4): Incentives For Northern Businesses

**MS. LEE:** Thank you, Mr. Speaker. Mr. Speaker, my questions are for the Minister of ITI. I see that the BIP has reared its ugly head again and we need to address it once again, Mr. Speaker.

At the beginning, I was amenable to the suggestion that we might want to do away with the BIP and replace it with a two percent small tax cut. Since then, I am hearing that a lot of companies in the North don’t make enough money actually to benefit from a tax cut. If they could pay their expenses and wages and break even, for lots of companies that’s doing well. So they will not see the benefit of it.

The other thing is that in many other ways, BIP is an important aspect of doing business in the North for many companies. I was thinking about the potential for the Novel housing where there is a lot of money to be spent in the North and the government is promising that this is going to happen. I would like to know, then, without the BIP, would the companies that might bid on buying the units, or fixing the units, or doing the roadwork, how would they benefit from that if they don’t have the benefit of being BIP status? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Ms. Lee. The honourable Minister responsible for Industry, Tourism and Investment, Mr. Bell.

### Return To Question 427-15(4): Incentives For Northern Businesses

**HON. BRENDAN BELL:** Thank you, Mr. Speaker. Mr. Speaker, last question first and I guess it’s hypothetical. We know that it’s the Mackenzie gas project that’s supplying housing. I have never heard that the Mackenzie gas project intends to administer the BIP or talk about which companies are BIP registered that have any bearing or any effect on their procurement. So it isn’t this government buying housing. I think that makes it pretty clear as to what effect the BIP might have on a project of that nature. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Bell. Supplementary, Ms. Lee.

### Supplementary To Question 427-15(4): Incentives For Northern Businesses

**MS. LEE:** Thank you, Mr. Speaker. The Minister said last question first and then he didn’t deal with the rest of them, and then he misunderstood the question that he answered, Mr. Speaker.

Let me tell you this, the Minister of Finance, Housing and everybody has been saying that this $500 million investment into the North with Novel housing is a lifetime opportunity and there will be a lot of spin-offs. One of the spin-offs is northern labour and northern training. I want to know how can the companies stand to bid for these contracts without the BIP process, and will the Minister do an analysis of the impact of getting rid of BIP on these contracts? Thank you.

**MR. SPEAKER:** Thank you, Ms. Lee. Mr. Bell.

### Further Return To Question 427-15(4): Incentives For Northern Businesses

**HON. BRENDAN BELL:** Thank you, Mr. Speaker. It’s difficult to know exactly where the Member is going with this question. I am not sure what bearing the BIP would have on this process. If the government was procuring something, then BIP would apply. Even with BIP application, we don’t restrict southern companies, or Yukon companies, or Nunavut companies from bidding. They simply get the benefit of an added premium of 15 percent or 20 percent if the local allowance is included.

Mr. Speaker, I think it’s important to keep in mind on $200 million worth of procurement last year by this government, there was a $200,000 some odd, in around there, BIP premium paid to northern companies. The reality is what you have, especially in the bigger centres, you have two, three or four BIP registered companies bidding against each other and the BIP is moot. It really doesn’t come into play. So what we have found is on $200 million on procurement, $200,000 premium paid out. It isn’t doing much and it’s only having a bearing on government procurement. Let’s talk about a benefit or incentive to all businesses in the North regardless of who they are doing business with, and that’s what a tax cut would do. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Bell. Final supplementary, Ms. Lee.

### Supplementary To Question 427-15(4): Incentives For Northern Businesses

**MS. LEE:** Thank you, Mr. Speaker. I am going to have to suggest that the Minister and Cabinet get themselves Olympic-strength skis to keep up with Members on this side, instead of running shoes.

---Laughter

They are so far behind the ball. Mr. Speaker, the Minister of Finance and the Minister of Housing and everybody has been talking about at least $200 million out of this $500 million project is going to be spent in the North for northern businesses and northern labour in developing lots, converting whatever, electrical, everything. I want to know how are the northern companies going to be able to apply for contracts without BIP. What other plans do they have? What his answer tells me is they haven’t even looked at this question. Thank you, Mr. Speaker. How advanced are they on this topic?

**MR. SPEAKER:** Thank you, Ms. Lee. Mr. Bell.

### Further Return To Question 427-15(4): Incentives For Northern Businesses

**HON. BRENDAN BELL:** Thank you, Mr. Speaker. Hypothetically, if the Novel project goes ahead and is on the ground and we are talking about conversion, after the fact, into much needed housing, public and private sector stock in our communities, hypothetically, if then we are talking about that work being done, the BIP would only be relevant if we decided to go to a straight tender. If we do a negotiated contract with an aboriginal joint venture or an aboriginal corporation, if we go out to request for proposals, we can take into account northern benefits as part of the benefit package we would score. So only if we so narrowly scope this and decide that it’s tender only would the BIP even be relevant. Mr. Speaker, I think there is a lot of room here to make sure that northern companies are the primary beneficiaries of this project. We know that northern residents will be if we can get this kind of housing on the ground. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Bell. Oral questions. The honourable Member for Yellowknife Centre, Mr. Hawkins.

## Question 428-15(4): Crown Corporation Accountability

**MR. HAWKINS:** Thank you, Mr. Speaker. On the heels of my Member’s statement where I rose and spoke about the need for a Crown corporation’s accountability act, I have questions for the Minister of FMB, Minister Roland. Mr. Speaker, for a fact, we know Minister Roland sat for a number of years on Cabinet’s farm team, also known as a Regular Member.

---Laughter

But now he’s on centre ice in the majors and so he’s well aware of the problem of not having the right information at the right time. Mr. Speaker, I am sure he knows exactly what audits mean from a Regular Member’s perspective. Typically, as we all know, Crown corporations fall outside of a review of Regular Members’ purview such as WCB. Would the Minister consider and be open to discussions to look at options of creating a Crown corporations act that will review corporations under the government that are outside of Regular Members’ purview? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Hawkins. The honourable Minister responsible for Finance, Mr. Roland.

### Return To Question 428-15(4): Crown Corporation Accountability

**HON. FLOYD ROLAND:** Thank you, Mr. Speaker. Mr. Speaker, the fact that Crown corporations within the NWT fall under the purview of the Auditor General of Canada who has, from time to time on the request of this Assembly, done audit work on Crown corporations that work within the territory, we already have a process where we can get some information for further discussion around how our audit program works. If it can be incorporated in some way, I am open to discussions about that, yes. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Roland. Supplementary, Mr. Hawkins.

### Supplementary To Question 428-15(4): Crown Corporation Accountability

**MR. HAWKINS:** Thank you, Mr. Speaker. Thank you, Mr. Minister. Mr. Speaker, my next question would be to ensure that we can put this in writing. My issue is that we should create legislation that casts it into stone so that we have regular review. The Minister said we can request review, and I appreciate that. He’s very right. I remember last year when we pushed for a WCB review, it seemed like we were searching for…(inaudible)…So I would like the Minister to consider today, and I would like a commitment from the Minister, if they would look at and go back to the drawing board and consider creating a process by bringing in new legislation to create an act that would cause reviews for Crown corporations. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Hawkins. Mr. Roland.

### Further Return To Question 428-15(4): Crown Corporation Accountability

**HON. FLOYD ROLAND:** Thank you, Mr. Speaker. There are a number of things we have to consider before going down this path. Yes, I am open to discussions about the Audit Bureau’s work and what that incorporates. Right now, our portion of that entails work that is directed specifically within departments and, at the request of Ministers as well as Members of this House, we can look into the internal workings.

For the larger ones, as I stated, as has been done in the past, request from this Assembly to the Auditor General of Canada to have a look at overall value for money expenses, not only just a corporation but any department, as well.

One of the things we have to look at is if we decide to do something on our own, where it's going to be an added cost to that, we would also have to take that into consideration. Thank you.

**MR. SPEAKER:** Thank you, Mr. Roland. Final supplementary, Mr. Hawkins.

### Supplementary To Question 428-15(4): Crown Corporation Accountability

**MR. HAWKINS:** Thank you, Mr. Speaker. I will first say the Minister is right; if we create a process by creating a Crown corporation’s accountability act, there would be costs associated. The one value we could say upfront, without even knowing the long term of this, is we know up front we would be dealing immediately with problems if anything went off the rails. So we would have a step in process right there to deal with problems. We would be well aware of them up front.

Mr. Speaker, it’s the request that I want to take out of the picture. I don’t want us to have to request this. I want this to be written into stone so it’s automatic. So they know every five years, for example, that there will be a value for money audit to ensure that this will happen.

So, Mr. Speaker, would the Minister consider and be open to discussions to look at creating a Crown corporation’s accountability act that will cast this in stone, so that we take out any type of decisions, whether we should have one or we shouldn’t; it’s an automatic process? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Hawkins. Mr. Roland.

### Further Return To Question 428-15(4): Crown Corporation Accountability

**HON. FLOYD ROLAND:** Thank you, Mr. Speaker. Mr. Speaker, as I said earlier, I am open to having that discussion as to the merits of going further out there and establishing something in legislation. I am open to that discussion as to the pros and cons of it. We need to have that discussion. I am open to it and will work with Members if they see support there in wanting to proceed down this path. Thank you.

**MR. SPEAKER:** Thank you, Mr. Roland. Oral questions. The honourable Member for Inuvik Twin Lakes, Mr. McLeod.

## Question 429-15(4): Compensation For Long-Term Northern Nurses

**MR. MCLEOD:** Thank you, Mr. Speaker. Mr. Speaker, my questions today are for the Minister of Health and Social Services and it’s a question he’s probably heard quite a few times before and it’s a question that’s going to continue to be asked. That’s with regard to long-term nurses. We continue to pay southern nurses well for working up in the NWT. Again, I understand that they are needed. Do we have a similar plan to compensate our long-term nurses? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. McLeod. The honourable Minister responsible for Health and Social Services, Mr. Miltenberger.

### Return To Question 429-15(4): Compensation For Long-Term Northern Nurses

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, the long-term nurses are members of the bargaining unit for the UNW. They are covered under the negotiated contracts that are reached through the collective bargaining process. So that pay is set. We’ve taken a great effort to make sure they have been adequately classified. We’ve raised the issue within government. We’ve had positions reviewed more than once in an effort to make sure that their classification is adequate and recognizes the complexity of the job. We’ve also invested a lot of time, effort and money into training of nurses, as well as professional development support that’s there which is identified by nurses themselves as the second most important issue next to actual compensation. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Supplementary, Mr. McLeod.

### Supplementary To Question 429-15(4): Compensation For Long-Term Northern Nurses

**MR. MCLEOD:** Thank you, Mr. Speaker. We do put a lot of money into training and everything, but my bottom line is to compensate these long-term nurses financially. Like I said before, all their cost of living and everything else is a lot higher up here. A lot of these nurses are agency nurses from the South. Do we have means of recruiting nurses from the South other than through an agency? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. McLeod. Mr. Miltenberger.

### Further Return To Question 429-15(4): Compensation For Long-Term Northern Nurses

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, I think one of the pieces of good news is that this coming May, we are going to get our first class of graduating nurses with a four-year degree and we expect to have between 20 and 24 northern nurses trained at the bachelor level that are going to be ready to go to work in the Northwest Territories.

In terms of being able to be competitive, we are also looking at working with the nurses, and I have had discussions with the Minister responsible for the public service about ways we can better recognize the burden of smaller communities and the costs in more remote and isolated areas that may not be as adequately covered right now. Similar to what the federal government has done with their isolated post allowance, surely we have issues with the small and northern communities and we are stuck in a cycle of dependency with agency nurses which we are very interested in working hard to break. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Your final supplementary, Mr. McLeod.

### Supplementary To Question 429-15(4): Compensation For Long-Term Northern Nurses

**MR. MCLEOD:** Thank you, Mr. Speaker. I am glad to hear we have 20 to 24 graduating in May. My hope is that these 20 to 24 don’t move south and get hired on as agency nurses, because it’s more rewarding for them financially. I would like to know if the Minister would commit to working or has there been any discussion or plan to come up with some way that we can compensate our long-term nurses the way they deserve to be. Thank you.

**MR. SPEAKER:** Thank you, Mr. McLeod. Mr. Miltenberger.

### Further Return To Question 429-15(4): Compensation For Long-Term Northern Nurses

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, the agency nurses get their salary and they get their way paid in and out after they have done the term they have signed on for. My understanding is it’s not the nurses who get the bonus, it’s the agency who does the recruiting. So we are working with all the nurse graduates. We intend to work with all and I have discussion with the authorities to be very active in our recruiting for northern nurses and any other nurses that we know are out there in southern institutions that are from the North that we are paying to go to school. We have very generous return of service agreements, and we have negotiated through the collective bargaining process an agreement that’s going to carry us to 2008. Right now, it covers their pay and benefits for nurses. Thank you.

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Oral questions. Written questions. Returns to written questions. Mr. Clerk.

# ITEM 8: RETURNS TO WRITTEN QUESTIONS

## Return To Written Question 25-15(4): GNWT Diamond Strategy

**CLERK OF THE HOUSE (Mr. Mercer):** Mr. Speaker, I have a return to a written question asked by Mr. Bill Braden on February 10, 2006, regarding the GNWT Diamond Strategy.

1. Is the newly announced marketing venture with the diamond cutting/polishing/jewellery manufacturers a partnership, and how much money will each party contribute?

The "Rare in Nature" diamond marketing campaign is largely a private sector funded initiative involving cash and in-kind contributions from a number of interested parties. The GNWT is managing and facilitating the delivery of this initiative on behalf of the parties.

Key players involve the diamond cutting and polishing manufacturers here in Yellowknife, as well as a number of agencies and businesses. The manufacturers, through the GNWT Diamond Certification Program, provide upwards of $200,000 in cash, while the other parties provide between $300,000 to $400,000 in cash and in-kind contributions.

1. What are the objectives and tasks of this strategy, and will the department be reporting results to the Assembly on a regular basis?

The objectives of the "Rare in Nature" marketing campaign are to:

* + position the Northwest Territories as a diamond centre;
  + facilitate the development of the diamond industry in the NWT to provide business, investment, training and employment opportunities for NWT residents; and
  + increase the demand and add value to diamonds that are mined, cut and polished in the NWT.

Reports on work undertaken will be provided to the Legislative Assembly on an ongoing basis.

1. How much revenue will the Diamond Certification Program generate?

It is anticipated that future revenues will be similar to those received in past years.

To date, the GNWT Diamond Certification Program has generated revenues as follows:

2001-2002 - $41,278

2002-2003 - $39,262

2003-2004 - $130,020

2004-2005 - $24,735

2005-2006 (to January 31, 2006) - $149,099

Total to January 31, 2006 - $384,295

## Return To Written Question 20-15(4): Housing Program In Sahtu Region

Mr. Speaker, I am also in receipt of a return to written question asked by Mr. Yakeleya to the Honourable David Krutko, Minister responsible for the Housing Corporation on February 3, 2006, regarding housing in the Sahtu.

What is the latest assessment of core need of housing in the Sahtu?

The Northwest Territories Housing Corporation, in conjunction with the Bureau of Statistics, completes a survey of housing needs in the Northwest Territories every four years. According to the 2004 NWT community survey, 28 percent of households in the Sahtu are in core housing need. However, all communities, with the exception of Norman Wells, face core need in excess of 30 percent:

Colville Lake - 76 percent

Deline - 42 percent

Fort Good Hope - 37 percent

Tulita - 36 percent

What types of NWTHC programs are committed solely to elders/seniors?

The Housing Corporation has several programs designed specifically for seniors. These include:

* Senior Citizens' Home Repair Program
* Elders on-the-Land Initiative
* Seniors' Preventative Maintenance Initiative
* Home Adaptation for Seniors' Independence.

The corporation is currently undergoing a consolidation of homeownership and repair programs and will no longer be offering programs specifically designed for seniors. Seniors will be eligible for all programs under the new system.

Who in the Sahtu region have taken up the manufactured homes since they were brought in?

All units installed in the Sahtu under phase one of the market housing initiative are now occupied. In the community of Tulita, two units have been rented by teachers and a third has been sold. In Fort Good Hope, one unit is rented by a teacher and another by the Yamoga Lands Corporation. All five units in Norman Wells have been rented by professionals working in the community. Manufactured homes installed in the Sahtu under phase two of the market housing initiative will be ready for occupancy in February 2006.

When will the NWTHC begin regional discussion with our region on the concept of Novel manufactured homes?

The Housing Corporation has committed to participating in a Sahtu regional housing forum to be held later this year. The corporation is prepared to discuss the use of convertible workforce housing at that meeting. In addition, a model of a house developed using ATCO's Novel housing design is planned for construction in Norman Wells later this year.

How many homes did NWTHC sell to community members and what programs were used to assist them?

The Housing Corporation sold one home and constructed 10 under the Independent Housing Program, and sold one home through the Expanded Downpayment Assistance Program in 2004-2005. In 2005-2006, the NWT Housing Corporation built three homes through the Independent Housing Program and one through the Expanded Downpayment Assistance Program. The Housing Corporation has also sold one unit in Tulita through the market housing initiative.

What plans are in place to design new, affordable, efficient-heating homes?

The Housing Corporation considers energy efficiency to be a key component in the design and construction of new homes. The affordable housing initiative, a strategy to deliver 530 new units over three years, will provide new, affordable, energy-efficient homes in communities across the NWT.

Energy efficiency will be a key component of the Housing Corporation's business over the coming years. Electricity, heating fuel and water must be used more efficiently in public housing in order to reduce greenhouse gas emissions and reduce utility costs. The use of new technologies to improve the energy efficiency of homes is an important way to reduce shelter costs for homeowners.

The corporation continues to use innovative technologies on a pilot basis. Examples of technologies currently being assessed are high-efficiency residential heating systems, grey water recycling, and the use of solar preheating.

In 2005, the Government of Canada announced an extension to the Residential Rehabilitation Assistance Program, RRAP, dealing specifically with improvements to the energy efficiency of homes. The Northwest Territories is expected to receive additional funds to complete energy retrofits in 2006-07.

Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Clerk. Returns to written questions. Petitions. Reports of committees on the review of bills. Tabling of documents. The honourable Minister responsible for Environment and Natural Resources, Mr. Miltenberger.

# ITEM 11: TABLING OF DOCUMENTS

## Tabled Document 90-15(4): Caribou Forever - Our Heritage, Our Responsibility, A Barren-Ground Caribou Management Strategy For The Northwest Territories 2006-2010

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Speaker. Mr. Speaker, I wish to table the following document entitled Caribou Forever - Our Heritage, Our Responsibility, A Barren-Ground Caribou Management Strategy for the Northwest Territories 2006-2010. Thank you, Mr. Speaker.

## Tabled Document 91-15(4): Statutory Declaration Of Residence, Member For Nahendeh

**MR. SPEAKER:** Thank you, Mr. Miltenberger. Tabling of documents. Pursuant to section 75 of the Legislative Assembly and Executive Council Act, I hereby table the statutory declaration of residence dated October 27, 2005, of Mr. Kevin A. Menicoche, Member for Nahendeh.

Tabling of documents. The honourable Member for Monfwi, Mr. Lafferty.

## Tabled Document 92-15(4): Concerns Regarding Proposed Funding Changes And Secondary Students

**MR. LAFFERTY:** Mahsi, Mr. Speaker. Mr. Speaker, I would like to table a document dated February 3, 2006, titled Tlicho Community Services Agency concerns regarding proposed funding changes to ECE. Mr. Speaker, just to highlight, 22 years in a row, ECE proposed a cut in funding. The Tlicho Community Services Agency highlighted…

**MR. SPEAKER:** Thank you, Mr. Lafferty. You don’t have to explain the document. Thank you, Mr. Lafferty.

**MR. LAFFERTY:** Mr. Speaker, it’s a proposed letter of concern on the proposed changes to ECE funding. Mahsi.

**MR. SPEAKER:** Thank you, Mr. Lafferty. Tabling of documents. Notice of motion. Notice of motion for the first reading of bills. First reading of bills. The honourable Minister responsible for Finance, Mr. Roland.

# ITEM 14: FIRST READING OF BILLS

## Bill 19: Supplementary Appropriation Act, No. 3, 2005-2006

**HON. FLOYD ROLAND:** Thank you, Mr. Speaker. I move, seconded by the honourable Member for Deh Cho, that Bill 19, Supplementary Appropriation Act, No. 3, 2005-2006, be read for the first time. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Roland. The motion is in order. All those in favour? All those opposed? The motion is carried.

---Carried

Bill 19 has had first reading. First reading of bill. Second reading of bills. The honourable Minister responsible for Finance, Mr. Roland.

# ITEM 15: SECOND READING OF BILLS

## Bill 19: Supplementary Appropriation Act, No. 3, 2005-2006

**HON. FLOYD ROLAND:** Thank you, Mr. Speaker. I move, seconded by the honourable Member for Deh Cho, that Bill 19, Supplementary Appropriation Act, No. 3, 2005-2006, be read for the second time.

Mr. Speaker, this bill makes supplementary appropriations for the Government of the Northwest Territories for the 2005-2006 fiscal year. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Roland. The motion is in order. To the principle of the bill.

**SOME HON. MEMBERS:** Question.

**MR. SPEAKER:** Question is being called. All those in favour? All those opposed? The motion is carried.

---Carried

Bill 19 has had second reading and the bill stands referred to Committee of the Whole. Second reading of bills. Consideration in Committee of the Whole of bills and other matters: Bill 18, Committee Reports 5, 6 and 7, with Mrs. Groenewegen in the chair.

# ITEM 16: CONSIDERATION IN COMMITTEE OF THE WHOLE OF BILLS AND OTHER MATTERS

**CHAIRPERSON (Mrs. Groenewegen):** I call Committee of the Whole to order. What is the wish of the committee today? Mr. Menicoche.

**MR. MENICOCHE:** Thank you, Madam Speaker. The committee wishes to consider the Department of Health and Social Services.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Is committee agreed?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. We will do that right after lunch. Thank you.

----SHORT RECESS

**CHAIRPERSON (Mrs. Groenewegen):** At this time, I would like to ask Minister Miltenberger if he would like to bring witnesses into the Chamber.

**HON. MICHAEL MILTENBERGER:** Yes, Madam Chair, I would.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Is the committee agreed?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Mr. Sergeant-at-Arms.

Welcome back, Mr. St. Germaine and Mr. Murray. At this time, we are still on general comments for the Department of Health and Social Services. Any general comments?

I would ask Members, then, to please turn to page 6-14 in your budget book, information item, revenue summary. I am just going to give Members a chance to find their place here. Page 6-14.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Page 6-17, activity summary, directorate, operations expenditure summary, $6.089 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Page 6-20 and 21, information item, directorate, active positions. Any questions?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Activity summary, program delivery support, operations expenditure summary, $26.822 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. Could the Minister advise, under this area here we see a definition or description of the activity as responsible, population health division responsible for health promotion protection disease registries. What kind of initiatives or new initiatives can we expect, Madam Chair, in the coming fiscal year in the area of health promotion? Something that I believe we have not addressed as aggressively as we should is the awareness and the promotion of good health practice, so that we don’t have to come up with all the money for these expensive medevacs, and hospital beds, and treatment centres. So the area of promotion and prevention is one that’s of great interest to me, Madam Chair. Could the Minister give us some outline of what we can expect in this coming business year, Madam Chair?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, we recognize the need for prevention, as the Member has indicated, on a broader government-wide scale. Through the social envelope Ministers, we’ve worked collaboratively on the Get Active! campaign to support that. We’re working on the healthy choices framework. ECE is working with their boards to look at healthy foods in their facilities, as is Health and Social Services. We’ve invested, and continue to invest, a lot of money in terms of the alcohol and drug where it’s not just dealing with the problems, but we’re encouraging people to either drink responsibly or not drink at all. We’ve invested, quite successfully, money in the Butthead campaign and we’re going to repeat that through the second campaign. To name a few, some of the initiatives that we have under way. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. The tobacco reduction and the Butthead campaigns have earned accolades, and deservedly so. An area that, Madam Chair, I believe we’ve chronically undershot here is an area where we should be doing much more prevention promotion is alcohol use. Something that, regrettably, our government has not undertaken in a very serious way at all is a focussed campaign on alcohol abuse and its consequences. So I’m wondering where we are, Madam Chair, in addressing this enormously expensive and damaging social consequence, or social aspect, of our behaviour up here. Can we or when are we going to begin to look at alcohol in the same way, Madam Chair, as the department has so successfully looked at tobacco as something that we can do something and make a difference, Madam Chair?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, we started out about three years ago on a direction with alcohol and drugs and the Mental Health Strategy that saw us invest millions of dollars and dozens of positions at the community level to work with the issue of alcohol and drug, mental health and addictions, which are related issues and tie into a lot of the other work that’s going on. We’ve added money into public health to put in public health units in the communities that don’t have them. One of their jobs will be to work on the ground with pregnant mothers and families and children, along with the social workers and the mental health and wellness workers that are there to deal with some of these very basic issues. The rewrite of the Liquor Act, I believe, is going to be an asset. We’re one of the few jurisdictions that actually label our bottles. The work we’re doing with FASD is well through the part of the Canada Northwest Partnership and FASD is geared not only to treatment, but to prevention. We’re working with Manitoba, Saskatchewan, B.C., the Yukon territory, and Nunavut and the Northwest Territories, as well as the federal government, on how we can do that more effectively, as well. I recognize we have yet to be as successful as we’d like and we’re always looking at ways to do things better, but we are making what I think are some reasonable efforts in this very important area, as the Member has identified. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Madam Chair, the Minister mentioned the review of the Liquor Act, which is underway right now. I’m pleased he did so. I was one of the advocates of getting the act overhauled and one of my principle concerns, Madam Chair, was, as I stated in my previous question, that I just did not see our government seriously undertaking a responsibility, or a mandate, to do something about the way we abuse alcohol. It was through, hopefully, a review of the act. As I understand, it’s ongoing now and we don’t need to get into a discussion of that specifically, but I guess through this process, Madam Chair, is the Department of Health and Social Services looking at this in such a way that it could perhaps undertake that mandate, as it has with tobacco, so successfully with tobacco, and shoulder the challenge, the responsibility, of trying to do the same thing with alcohol? I’m talking about trying to fundamentally change the way society considers alcohol and the way we use it. One of the principle successes, I think, with the tobacco campaign is that we set out to de-normalize its use. We wanted to make it un-cool, uncomfortable, inconvenient, to use tobacco in any form, anywhere. A lot of success has been done with that. Can we look at alcohol in the same way and can we take on a commitment as big and as challenging as what we’ve done with tobacco? Can we do the same thing with alcohol and can this department, you know, is it planning? This is my question, Madam Chair: Is this department planning on taking an active role, a lead role, in the liquor review and seeing where it can assert its mandate? Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, Dr. Corriveau, the chief medical officer for the Northwest Territories, is on the board of the steering committee for the review, so he’s going to be playing a key role there. But I just point, once again, to all the work that we’ve done as a department and as a government through Health and Social Services to play what I think is a leadership role with a significant work that’s been done and the alcohol and Mental Health and Addictions Strategy that we built off of Dr. Chalmers report, the State of Emergency. In fact, we just got the Chalmers report back from the printers and that will be going to the Members today or tomorrow and you’ll have an opportunity to look at that. It gives us a clear indication that the direction that we have charted off on is one that we should continue to follow, but we have to make some adjustments which we’re going to look at. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. That’s good on this discussion. I would like to add, though, that I didn’t know that Dr. Corriveau was on the Liquor Act review group and I’m very pleased to hear that. That’s good stuff. Thanks, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Next I have Mr. Yakeleya. General comments.

**MR. YAKELEYA:** Yes, thank you, Madam Chair. I wanted to ask the Minister in terms of his support for training, upgrading of the home care services in the smaller communities. I believe that the Minister mentioned sometime that studies have indicated, from my region at least, that the elders, the people wanted more home care workers going into their communities. Right now, it seems like we have one home care worker for possibly over 20 clients. That I’m hearing back, just from the last weekend, is that these home care workers are so in demand that they only spend approximately maybe half-an-hour per client, and they don’t do justice to home care service. So I want to ask the Minister in terms of having support for these elders in their home care services in regions where they desperately need them. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, the Sahtu Health and Social Services Authority is working on their commitment and the government’s commitment to improve home care. They started out with 3.6 positions in April ’05 and are expected to have that up to 6.2 positions by the end of this fiscal year. As well, we’re going to, as a government, continue to look at ways we can enhance home care support. I understand, as well, that they recently hired home care support workers in Fort Good Hope and Norman Wells, and Fort Good Hope and Deline will be hiring full time in the near future. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. Also the issue in terms of home care, I just want to swing it over to the seniors in terms of the seniors’ facility in Deline. I know there’s been some discussion there, and just for the Minister to know that the people in Deline are somewhat anxiously awaiting to see the type of plans are going to be implemented into occupying or using that old seniors’ facility that was built in Deline sometime in ’93. Can the Minister, just for the record, indicate as to what type of plans his department has in terms of putting that facility to use and as to what deadline it will be ready to have funding there for the use of that facility? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, over the last number of months there was a committee struck involving representatives from Health and Social Services, Housing Corporation, the community of Deline, and the Sahtu health and social services, to look at the uses for the Deline facility. At the end of this exercise, it was recommended two things. That based on the work of that committee, and as well a review that was done of all the seniors in the regions, that we should look at trying to improve home care, which was the first request of all the seniors, and we should look at trying to use the Deline facility as an office space to bring together the community wellness programs in the community. That report with their recommendations went to ourselves, Housing, and back to the community of Deline, which agreed to those recommendations. The issue now at hand is the fact that to do that will require a significant amount of money, in the neighbourhood of a million dollars or so. So there were two choices: we could either wait for the regular capital planning process in ’07-08, or we could attempt to talk to the Housing Corporation and work out an arrangement possibly where they would do the tenant improvements and there would be a lease arrangement from Health and Social Services, and that is what has happened on the 14th of February. Madam Chair, with your indulgence, I’ll let the deputy, who was at that meeting, speak to the detail. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Murray.

**MR. MURRAY:** Thank you, Madam Chair. When we met with the Housing Corporation on the 14th of February, we agreed to pursue a joint project whereby the Housing Corporation would upgrade the building for maintenance issues and use issues based on wear and tear. Our role in Health and Social Services would be to define the tenant improvement upgrades, and we’ve agreed to attempt to come to an arrangement sometime during March so that some of the work could be done enough that we could open and start running the home care services and wellness day program and procedures sometime this summer, early fall. If there are more major renovations that need to be done, then that could be materials ordered in the fall/winter and then materials go in by winter road. But we’re looking at sort of a two-phased approach, short term, get the programming going, and then the longer term if more renovations are required. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Murray. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. The people in Deline will be pleased to hear that there’s progress being made on this facility that will be put to good use and that there are two phases to seeing the full utilization of this facility and the programs that are going to be running out of this building here. So I look forward to more concrete initiatives when you get closer to the dates, as you indicated, Minister and also deputy minister.

Madam Chair, I want to talk to the Minister about the disability issues. In our region there seems to be some concern in terms of the people who are living with a disability, mainly the wheelchair access people. Some of them don’t have ramps in their homes. Some of them have concerns that these ramps are not being put into play because they don’t know if it’s a housing issue or a Health and Social Services issue and they want to know what type of assessments and what type of programs and service delivery there are. Who checks on these people who are disabled? Not only for wheelchairs, but elders. There’s an elder that told me she needs to have a step up to her tub and right now it’s pretty dangerous for her. She’s 84 years old and it’s pretty dangerous for her to take a bath. She says she’s going to fall in and doesn’t know if she can get out. So these little simple things that we overlook sometimes, but when the elders are concerned about services that are provided to them it doesn’t seem to go very far. Same as that Charlie Gully, who is an elder in Fort Good Hope and desperately needs a ramp on his house. But there are other people who speak about disabilities, so I want to ask the Minister in terms of how do we know for sure that these people who have disabilities are being heard, number one, and that their places are being considered or assessed for some type of improvement to make their life easier? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, in regards to the issue of the ramps and the outside access, my understanding is that the Housing Corporation has programs available to assist homeowners and individuals requiring that service to get that service. In regards to support within the home, if it’s bars or steps or other such equipment, then the home care workers, home support workers, and the social workers, possibly the nurses if they’re doing any kind of visits, would identify those kind of needs and we would work with those individuals to try to make sure that they have those services. As well, I’d like to point out that we are also going to be enhancing our contribution, both to the seniors and the disabled, by $100,000 each this year for the next five years as part of the territorial health access fund and we’re going to be meeting to try to make sure that money’s allocated in a way that other communities or that all communities can have a chance to access some of that on a required basis. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. Good news, Minister, in terms of putting new money towards the seniors and the disabled citizens in terms of enhancement.

I just want to speak on the home care. As the Minister has indicated, the home care workers and the social workers, lack the efficient time to go into these homes and do a proper job. They go in there, they probably spend, what, 15, 20 minutes at the most, and then they have to go to another home. They don’t really do a proper assessment or a proper identification, or they’re so busy that they sometimes overlook or forget or just don’t take care of what’s needed in the senior’s home.

My aunt is a senior who has this tub issue. It’s over a year now and still nothing’s been done about Ernestine Lenny, her house in terms of building up a ramp to her bath. So these are the ones that I guess I want to talk to the Minister about, Madam Chair, are the home care workers. Because of the amount of work that they do, I want to ask the Minister, would he consider, with his department, hiring these retired CHRs in our region that have 30 years plus, who are looking after people, who have done the work in the past, that they would put together a training program for these young CHRs as the old CHRs can be instructors to teach the young ones how to work properly with the older people? Translation, elderly care, what the elders look for. Not just to come into their house, do a quick mop-up job on the floor. They don’t even do a proper house cleaning. So would the old CHRs be put to use? Because a lot of people still consider them as employees of the Health and Social Services, so they could help the young CHRs. I guess proper training for our young CHRs to identify needs and ask the old CHRs to come in to assist the workforce that the CHRs have to do. In a roundabout way, Madam Chair, I’m hoping that the Minister could figure out what I’m asking for and answer these questions.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, I’ll commit that we will, we already provide CHR training, but I will commit that we will make sure that we look at ways to incorporate the skills and experience and accumulated knowledge of those CHRs that have gone before into the program to help give the CHRs being trained the benefit of that advice and experience. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya’s time is up. I’m sorry that I called you Mr. Menicoche. I was confused, too. Mr. Ramsay.

**MR. RAMSAY:** Thank you, Madam Chair. I have a question for the Minister in terms of on program delivery support in terms of the amount of money that the Government of the Northwest Territories spends and has spent in the past on the professional development and recruitment and retention of frontline health care workers. The professional development I don’t necessarily have an issue with. I think that’s money well spent and I think the more that we have, the better. What I have issue with is the money that we’re spending on the recruitment and retention because, as I mentioned to the Minister last week, I don’t really see evidence of there being much success in that area. We continue to bring in locum nurses from the south, agency nurses. They work alongside of nurses in our health care system and earn more in benefits and rate of pay than the nurses that we have here on the ground. Something about that is not quite right, if you ask me, Madam Chair. I’d like to ask the Minister, what type of benchmarks or performance measurement indicators does he and his department have that would lend itself to justify the amount of money we’re spending? If we just keep spending money year after year and we’re not making any progress, then one would have to question what we’re doing. Is something in his system, in his department, broken and in need of repair? For example, in 2004-2005 this government spent about $4 million in this area and I’m not sure why. I guess that’s another question the Minister could answer, but why has that number been cut in half to $2 million? What are we getting and how do we measure the success of this expenditure? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Ramsay. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. What we need and what every other jurisdiction needs across Canada and North America, for that matter, is more trained, qualified nurses. We’re going to have, this spring, 20 to 24 nurses graduating from Aurora College with their degrees as nurses that we will be able to put to use, each and every one of them. As well, from hereon in we expect to be able to be graduating hopefully double-digit graduating classes for the foreseeable future as we continue our investment. There were decisions made back in 1992 nationally that affected dramatically the number of seats available for nurses and doctors, where it was determined by the people at the time that there was going to be some kind of glut on the market and that we would best be anticipating that and cutting back. It was a decision that turned out to be very wrong and we’ve been trying to recover since then.

These are investments that are long-term investments that take time to show progress. I acknowledge that we have issues in the Northwest Territories hiring nurses. We have an unfortunate reliance on agency nurses, which we’re working to correct. But I think the investments that we make in terms of the staff that we do have are good ones. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Ramsay.

**MR. RAMSAY:** Yes, thank you, Madam Chair. I know the Northern Nursing Program is going to be successful. It has been successful and it will certainly give us more nurses going forward. But of the $2 million that’s in the main estimates, is the Minister telling me today that the majority of this $2 million goes directly into the Northern Nursing Program? Because that’s what he’s basing his recruitment and retention strategy on is the Northern Nursing Program. What is this money spent on? What are we getting in return for it? Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Ramsay. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, there was money, about $2 million worth, that was transferred to the new HR department that’s going to be established as part of them taking over the delivery of that service. Madam Chair, I have an extensive list of what the money’s spent on, which I could either read to the Member or I’d be happy to share with committee. It was part of, I believe, the package that was sent to the Social Programs committee, but I recognize the Member is not a member of that committee. So I’ll take your direction, Madam Chair. I can either just share this information, or I can read it if the Member would like.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Ramsay.

**MR. RAMSAY:** Yes, thank you, Madam Chair. I can just get that at a later time from the Minister for the detail. But again, what I want to get back to is how do we measure performance? How do we know that the money we’re spending is achieving the goals that we set out to achieve? If we’re hiring more agency nurses, if we’re spending more money on agency nurses and locum nurses being brought into the Northwest Territories, then is the expenditure, this magnitude of funds, is it worthwhile? At what point do you have to start questioning the money that you’re spending here? Certainly, Madam Chair, it would seem to me that we have to have some type of performance measurement in this area so that we know what we’re doing and what we’re spending is being worthwhile. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Ramsay. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, I don’t disagree with the Member. I would suggest, however, or respectfully point out, that we have about a 25 percent vacancy rate, which is very high. But it also indicates that we are staffed up 75 percent and we’re managing to provide coverage on the other 25. We’re going to have a graduating class of our first-time degree'd nurses, which is a process that’s taken years to put into place. We’ve gone from relative ground zero with the nursing program over a relatively short period of time, to start turning out northern graduates. We have, or have had in the last year or so, 15 nurse practitioners in training that have started to come out of the door with their qualifications. That is a good investment. We’re building those folks into the system and we’re tying them into all the other allied health professions that we have with the midwives and the doctors that we’ve added. Our big measurement of success is going to be if we can break the cycle of dependence on agency nurses and see the vacancy rate start to diminish, in my opinion. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Ramsay.

**MR. RAMSAY:** Thank you, Madam Chair. I thank the Minister for that. There are certainly many issues at play here and I’d really like to know why nurses and why health care professionals are leaving in the numbers that they’re leaving the territory in. They come here for a little while and they leave. I think we have to try to find out what the real problems are. Why are we losing nurses? Why are they coming here for a short period of time, turning around and leaving? Why do we lose nurses that have been here for a number of years? Why do they go south? Why do they seek other opportunities? What is it that we’re missing here? I think that’s the key component to this and I think the department has a problem on their hands. If the vacancy rate is 25 percent, as the Minister stated, we have to try to find out what’s wrong. To me, I think conducting exit surveys on every health care professional that leaves the territory might get us some kind of indication on what that problem is and how we might be able to remedy it. I think the sooner that this type of work starts, the better off we’ll be. I’d like to ask the Minister if he can direct his department to start questioning nurses that are leaving the North, other health care professionals that are leaving the North, tendering their resignations, moving on, why are they leaving? I think that’s the big thing. So we have to start asking ourselves why are they leaving. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Ramsay. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, the Member raises a good point that is part of doing business, which is the matter of exit interviews. However, it hasn’t been done with consistency across the system. Now that we’re going to be having a coordinated, consolidated HR presence and function, then we will now be able to do this as a matter of course, and the issues the Member raises are good ones. We know that training was very important to nurses. We know that in the smaller communities the issue of the rent, and the remuneration, and the recognition of the challenges of living in the more isolated communities are issues that are there. They were struggling to deal with given the fact that all health professionals are part, with the exception of doctors, are part of the UNW bargaining unit and part of the Hay classification system, which poses its own unique challenges in that regard. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Next I have Mr. Menicoche.

**MR. MENICOCHE:** Thank you very much, Madam Chair. I’m quite interested in some of the program delivery support mechanisms as provided by the Department of Health and Social Services. I’ve spoken to them several times in this House, as well as during our opening comments with respect to deliberating Health and Social Service’s budget here. Just like my honourable colleague Mr. Ramsay speaking about many employees having like one foot out the door kind of approach to living and working in the North, and I’m not too sure why that’s there. Maybe there’s some uncertainty. It would probably be prudent enough, I don’t know, I would say to at least conduct some kind of interviews, or even exit interviews, with the people that are leaving. I’m not too sure of the standard practice in the department to conduct exit interviews, but at the time when we need to track nursing and get them up in the North, and even to the smaller communities, it would be appropriate to find out what would have made them stay longer just to help design a better retention and recruitment policy.

Some of the things I spoke about often are even like the community of Wrigley who really wants professional attention from nurses and doctors, even looking at activities like a rotation system into the communities for short periods of time. Even making it an option perhaps for some of our new nurses that are graduating, because I’ve paid great attention to the dialogue, as well, the Minister and the Honourable Mr. McLeod from Inuvik, their discussions this morning when they were talking about graduation rates and how do we keep our youth in the North, even get them into the communities. So this is one of the ways of doing it, is I would suggest rotate them in perhaps with some of their peers into the smaller communities because, granted, certainly the way of delivering services and having the help delivered in the communities is different when it’s a very small community; especially if there’s language barriers there, as well.

Part of the cultural aspect of our aboriginal people is there is a lot of trust involved and once you gain that trust, then I’m sure it will make the job easier for our health professionals that are trying to get out there, but it’s getting out there on a consistent basis is what I hear often, too. They’re coming in, but they’re only in for a couple of hours and people are saying, well, why don’t they stay longer, or even plan for an overnight visit. Some of those things go a long ways, you know, in that they’re willing to be part of a community, that they’re willing to pay attention to us. I think that’s all it is, is just the ability for our health professionals to be there and to pay attention to our people. It goes a long ways in that sense.

Of interest to me, as well, too, was Minister Bell was in the news earlier today talking about looking at some alternative ways of getting policing into the communities. That helps the nursing profession too because that’s always a concern that I relay to the communities. Yes they want a nurse, but in order to get a nurse you have to get your police, but you can’t get your one police, you’ve got to get your two police. Even that’s not good enough; you have to get 2.5 police because you need somebody to spell them off in between. So it seems like a huge bureaucracy problem. But in the end, all the people want, Madam Chair, is just to be taken care of and protected as well, and just to have their ailments taken care of and looked at. In the end they want security; they want that service there all the time.

In fact, there was an incident this winter in one of the communities that I represent where it was felt that proper care wasn’t given. I brought that up with the Minister, as well, and I think part of the incident there is what’s the root cause of that? Has the department looked into this situation and found out the root cause of why the proper care and attention wasn’t given? Just by exploring those root causes and doing the exit interviews, I think the department will find it very, very beneficial in creating proper programming, more current methods and it will help with the recruitment and retention of the professionals that we want in the North.

Just touching on a few other programming issues that I guess caught some attention is that as the communities I represent, they’re small communities so often our people are travelling for their medical needs either to Fort Simpson or to Yellowknife. They’re often saying, well, the translators or else family members are sometimes deemed, I don’t know who does it, but sometimes somebody deems those family members or translators, they’re not allowing them to go even though they have a translation problem. It just goes back to what I spoke about initially when I was first elected, was that the elders appear, they really do appear that they’re understanding because you’re talking with them, they’re nodding and they’re saying uh huh and uh huh, but culturally it’s a polite thing. That doesn’t mean that they’re understanding very technical explanations and instructions because going through airports, you know, it’s quite stressing. You talk to about 30 people before you finally get into a taxi, and to someone that doesn’t have a good command of the English language, that can be very, very stressful. In fact, often they get stranded. They just get stuck at the airport, and that’s happened on more than one occasion to constituents of mine.

So I don’t know who’s been making the judgement calls, but there’s got to be a better way of doing it to say, yes, you know, that person really does need that translating and it’s not just somebody wanting to go on a trip to Simpson or wanting to go on a trip to Yellowknife, because often that’s the focus. But the focus should be on the client, not on who is going travel with them to provide assistance.

Quite often, too, the clients are travelling and they’ve got no contact information with them. There was a case in the fall time where the client was travelling from Yellowknife back to Fort Simpson. Due to difficulties and missing connections, that person was actually at the Fort Simpson airport in excess of two hours; no contact information, nobody to phone. Quite often I think that we should provide a listing of phone numbers or contact information if you run into difficulties while en route from your community. Often it’s on the weekend so it’s not during the weekdays where these things occur. So that would help because I know that even in Fort Simpson and in Liard, there’s people designated as on-call personnel. So if their numbers were given, then at least the clients could call to their home base and find out how to get assistance, instead of just sheer luck.

In fact, last fall there was a taxi driver that showed up at the airport for some other reason and he noticed that there was an elder sitting there and he said, well, how long have you been here, and that kind of stuff. But I’m grateful for that taxi driver for being there and understanding that language was a barrier and that he’d been there for in excess of two hours and bringing him to town and trying to get attention for that person. In fact, even the cab fare, right? That was like $20 and who’s going to pay for that, right? But in this instance, the cab driver didn’t worry about that for the moment. The main thing was to take care of our people and that should be our focus all the time, is that we should be taking care of our people, Madam Chair. So for the regional and community services we could always use improvements. That’s one of the things that I think will help out, but the main thing is I think that we have to keep applying ourselves and looking at innovative ways of which to provide professional services like policing and nursing in our communities for extended periods.

With that, Madam Chair. I’d like to hear the Minister’s comments on some of those ideas. Mahsi cho.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, we, as well, share the same concern about the quality of care and the standards that that care is provided. I think, for the most part, the system we have tends to work fairly effectively, but to be sure, as the Member has pointed out, and others have pointed out, and we find out through phone calls to our office and such, there are times when things don’t work as they’re supposed to.

On the issue of contact information, that is a good, common sense, simple suggestion and I’ll commit here that we’ll make sure that in every airport, if it doesn’t already exist, we will have contact information for those travelling of who to call either in Yellowknife or in the community where the airport is.

In terms of the service or trying to improve the service, we’re continuing to invest, as the Member may know from discussion in this House. In this budget, there’s funding for additional nurse practitioners to go into the regions to provide more support to the communities. We’ve got two for the Deh Cho, two for the Tlicho, two more for the Sahtu, and two more for Inuvik with their function to be able to go to the communities and provide better support than currently exists. We also have the public health units which have been funded, and we’re working hard with the Deh Cho, the Sahtu and the Tlicho to get those units up and running. Those are three positions each where I think they’re about $900,000 per unit. As well, we’ve also announced that we’re going to make a significant investment in the rehabilitation teams that will allow greater service to the regions and communities and that’s going to be staged in over the next number of years.

The issue of medical travel is a very sensitive one and I recognize that one, as the Member has indicated. We try to ensure that it’s done carefully There’s medical decisions made, but the issue of making sure that elders aren’t inconvenienced or disadvantaged is one that we continually try to pay attention to. Whenever specific circumstances arise, we try to address it, as well as try to make sure that people are as sensitive as possible to the circumstances of the people travelling, which gets back to another suggestion that the Member made, I think it was last year, which was the whole issue of cultural awareness training and being sensitive to these issues, especially if you have a population of health professionals that may be fairly mobile and not aware of some of the circumstances that they are working in. That, as well, we hope will contribute to greater effectiveness in how the work is done. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Next I have, well, just to remind Members, we’re on page 6-23, program delivery support, the description's on 6-22, if we could keep to that page, thank you. Ms. Lee is next.

**MS. LEE:** Thank you, Madam Chair. Just a couple of things. One is to do with the Home Care Program and not necessarily for Yellowknife, although I’m a big supporter of this program and I think it’s a great program that needs to keep on going. What I do want to speak to is with respect to home care positions in small communities.

In our pre-budget tour, and I don’t want to mention any communities or names because I don’t want to get any employee in trouble, but I was quite startled to find out that, in fact, there is a half-time position in small communities. I can understand how some communities are so small that they may not be able to have full-time home care, but surely there’s a lot of programs being provided by this government in similar areas of social services per se, or health and social services. I just think having a part-time person, or just somebody being a half PY, does not provide the kind of job security necessary for that person to really get committed to a position. Even if this person was from that small community and this person will be there for a long time, this is a person that the whole elders or everybody who is in need of anything relies on, and obviously this person was working a lot more than part-time hours. I’d like to ask the government to undertake a review of the manpower that they have, or the womanpower that they have, in their communities and see if they could somehow combine the work there of related fields to make sure that wherever possible, that all of these positions are full-time. Because I think that full-time positions, unless, of course, somebody wants to work part-time, but in most cases where this person was quite young, very ambitious, she’s gone through three to five years of training and she desperately wanted to work full-time, but there was just not enough work there, but not enough budget money, but I’m sure there’s enough work there for her to be full-time. So I’d like this department to undertake a review of some of the conditions in small communities and what part-time positions they have, and whether or not they are like similar programs that they could combine to make it into a full-time position. It could be half social work and half home care for somebody; half-time nurse and half home care or something so that the persons could be employed as full-time wherever possible.

The second issue that I want to address also is something that’s already been addressed a number of times in this House. That’s with respect to recruitment and retention of health care professionals with specific emphasis for retention. I think that we would go a long way in addressing our health care professional shortage if we could just keep what we have, and I’m not sure if the government is doing enoughto keep people who have moved here, or who are from here, who have been trained into positions. I don’t know if we’re doing enough to keep them in the field and in the North. I think the Minister is aware of some questions I’ve posed to his office about people that are under the Maximizing Northern Employment Program where northern born, northern trained health care professionals are being left to wonder year after year whether they will be able to get a full-time job, even though there’s a lot of need for health care professionals and people trained in that area.

So as long as I have been here, there have been questions asked about doing exit surveys. I was watching the Olympics over the weekend and there was a commercial by Johnson and Johnson, and Mr. Johnson, one of the Johnsons, was on TV saying the reason why they are the best company in the world, or one of the best, is because they ask their customers about products they make and the only way you can improve and know whether you are producing products that work for people, and whether or not you are satisfying their needs, and whether you’re performing well, is by asking the customers. For the life of me, I don’t understand why we cannot have an exit survey. Make it mandatory. The Minister could make that a policy right now. Some people may be leaving for all the good reasons. They may have to transfer for family reasons; they may be leaving the field or whatever; but there might be some other information there that might be helpful to improving our retention programs for us to learn more about what we’re not doing well in, or what we could improve on, especially for Stanton Hospital.

I have to tell you, I’ve said before that I’m getting the sense that the human resource issue there is not as challenging as it had been years back, but I think the challenge is still there. I still do get phone calls from staff there from all different departments at all different levels about human resource issues. I could say that I get more calls about human resource issues out of that hospital than anywhere else. Perhaps we had that issue with the North Slave Correctional Centre and this government addressed that by having a special project person, reviewing the issues and one of the things they did was to do a survey. I remember being briefed on that survey about employee satisfaction and what’s happening and just learning from the employees themselves about what’s going on. I don’t understand why we can’t apply the same thing to Stanton Hospital. I’d like to ask the Minister if he would conduct a survey at the hospital and report to the Social Programs committee about what the findings are, and whether he would institute an exit survey requirement, a mandatory exit survey to all of the health care professionals. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Lee. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, if I can just go through the list that I’ve been making here. In regards to the issue of positions and half-time positions, or part-time positions, we will, as part of the business planning process for 2007-08, work with the authorities to make sure that we make every effort to have these positions as fully occupied as possible and, where it makes sense, possibly combining them.

In regards to the health professionals, as I indicated to Mr. Ramsay, exit interviews are a human resource practice. It hasn’t been very consistently applied. It’s our hope and plan, now that we’re becoming better organized, that that will become a standard part of the separation process with employees, keeping in mind that it’s an optional one, that they can’t be forced to do that. As well, we’ve already, as part of our facilities review with the work that’s going into the facilities review, have committed to doing more work with doctors, better assessment. As well, flowing from that, we recognized that we have to do more work with nurses in terms of the actual work that’s there, the needs that are in the various facilities and information from the practitioners themselves. So I’ll commit to the Member, as the chair of the Social Programs Committee, that when that information is finalized and ready, we will add that to our list of briefings that we will offer to the committee for their review and feedback. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Ms. Lee.

**MS. LEE:** Thank you, Madam Chair. I think I would like to get some more commitment from the Minister, especially about the exit interview. I do appreciate that you can’t force people to write about why they are leaving, but I think given the level of shortage of health care professionals and the money that we do spend on recruiting these people, I think we can’t afford not to know why these people are leaving when they do leave. It seems to me that it’s the best way to find out what we can do better or maybe we are doing just fine. I mean, this is a way to find out. I understand that human resources is just being amalgamated, but we’re coming to almost a year-and-a-half left of this Assembly and I do need to see something more concrete. So could I get the Minister to make a commitment to undertake a survey of the Stanton Hospital prior to the next business plan session this fall and have some results for us to look at? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Lee. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, we will report back on the vacancy rates and the exit interviews that were done. As well, we’ve already undertaken, and we have work underway, to look at the issue of nursing, not just in Stanton, but across the system. I’ll just restate my commitment to report back on those findings, as well. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. From page 6-23, program delivery support, operations expenditure summary, $26.822 million. Mr. Yakeleya.

**MR. YAKELEYA:** Just for clarification, I wanted to ask the Minister on this senior’s facility in Deline. When could they expect to see it open? I guess there’s a joint effort, as you mentioned, Minister, between yourself and the Housing Corporation and the community of Deline, and a motion was passed by the leadership in Deline to accept the recommendations by your report in terms of turning that facility into a centre for wellness workers and social workers. So I just wanted to ask the Minister in terms of this facility. He did talk about two phases and I guess I wanted to ask them when can they expect to see this facility open. It’s been dragging on for how many years now. I just want to get some commitment from the Minister in terms of when would this facility be open.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. It’s our hope and plan, as the deputy indicated, that there would be two phases and if we can get things worked out with the Housing Corporation that the first phase would allow the facility that’s currently unused to be used by late summer.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Should that work out good with the Housing Corporation, late summer, I mean I guess I’m concerned because I guess I’m asking the Minister if he could commit to sit down with the Housing Corporation and say like this date we’re going to have this open. You know, the winter road is opened up until the end of March and now we’re missing an opportunity. So that’s what the people wanted more in Deline, is that we seem to be dragging it on and we’re just dragging it on. So we’re just hoping right now to sit down with the Housing Corporation. I’m not too sure if the Minister understands what I’m trying to get at in terms of having this facility open. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, there was a meeting held February 14th with the deputy who is the senior ranking civil servant for Health and Social Services, as well as senior officials in Health. I’ve talked to Minister Krutko, who's responsible for the Housing Corporation, to initiate the process to look at this particular avenue to move this project ahead, keeping in mind that this is, at this point, an unfunded project that has been identified as a result of the work of the committee. Rather than just wait to '07-08, we're trying to be as creative and cooperative as we can to advance this.

So there was a meeting held February 14th. We've laid out the plan for the Member. We think it's going to be doable, in cooperation with the Housing Corporation, and we're going to be putting in our best efforts to make it a reality. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. I appreciate the Minister's commitment to work on best efforts to make this a reality. Again, it's a little bit of comfort for the people in Deline. It's just how long you've been working at this issue to reopen the seniors' facility. So I hope that there's commitment strong enough from all departments to get this facility open, and that the departments have some flexibility in their opinions, what's the best use, and how much this facility is going to cost to upgrade, and to have it open for the people there. So I'll just leave it at that. I'm going to take the Minister's word on that, that it's going to come about there. I hope before we finish, I finish my term here. I'm going to cross my fingers on this, Madam Chair.

The other one, Madam Chair, is I want to ask the Minister in terms of the policy by his department in terms of programs and services in terms of some of the confusion, I guess, for some of the elders who need to be escorted out of the communities for medical reasons. Sometimes, as Mr. Menicoche has indicated, they have to travel alone or they're lead to believe that they have to travel alone, or they're okay to travel by themselves just because they indicate by nodding of their head or saying yes or no in English that the nurses or some of the medical staff indicate that they could understand English quite well, so for them to travel on their own. I want to ask the Minister, is there a standard policy for elders in small communities, or even in larger centres, that they have to have an escort no matter what. If they're 60 years or older, or they're 63, that they have to have someone travelling with them for medication assistance, for accommodations, for making sure that they have someone at the airport to pick them up and take them to the home that they provide for them. So is there a policy in the medical travel for helping these elders travel to and from the communities on medical leave? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Medical travel is a topic that's covered in a page that's coming up; however, I'll ask Mr. Miltenberger to answer that question. But just in case Members are going to go on a medical travel tangent, I thought I'd point that out. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, there are policies and guidelines that govern medical travel. It's based on the need and its medical assessment that is done on a case-by-case basis. There are some parameters to that. We don't do what used to be called compassionate travel anymore. We do do travel and escorts based on what is the assessed need of the particular patient at a particular time, and that is done by the health professionals that are there and hopefully the other people in the community that are aware of the circumstance, either the CHR or other staff that is going to have, possibly, more knowledge of the community. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. Thank you for allowing that question. I apologize. I want to ask in terms of program delivery support, the services at the Stanton hospital, again I'm going to a line of judgment if this is the best spot to ask about the Aboriginal Wellness Program in Stanton hospital in terms of support for that by this department to enhance and increase and strengthen the Aboriginal Wellness Program in Stanton, because that's part of the program delivery support for medical services. It was indicated one time that 65 percent of clients at Stanton who are First Nations or aboriginal go through the program, so I wanted to ask the Minister what type of support he's going to lend to this wellness program and the Language Services Program. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. That's the next activity, but if it's the wish of the chair, I can engage in that discussion.

**CHAIRPERSON (Mrs. Groenewegen):** Please go ahead, Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, we are going to be putting in $184,000 into getting an Aboriginal Wellness Program up and running at Stanton, and that's based a lot on what was reviewed and visited when we went to Whitehorse. So we are committed to this. It was initially $234,000, but as part of our most recent reduction exercise, there was some small reductions done in different areas and this one of them since the program we hadn't started yet. But we are committed to getting this program up and running. We talked about it over the last number of sessions, and that is the commitment. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya, you're finished? Okay. Page 6-23, activity summary, program delivery support, operations expenditure summary, $26.822 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Agreed. Thank you. Page 6-25, activity summary, program delivery support, grants and contributions, contributions, total contributions, $13.923 million. Mr. Lafferty.

**MR. LAFFERTY:** Mahsi, Madam Chair. Just more so of a clarification to the Minister. Being from a small, isolated community, televideo is becoming a communication tool for providing health services in the small communities. So it's been highlighted here: telehealth coordinators, selected new locations. I'm just wondering which locations they are. Also, if small, isolated communities are excluded, are there plans in place to invest in these communities, whether it be purchasing computers or necessary equipment to have these in operation in the small communities? I'm sure there's plans in place to cover most of the communities, but I'm just wondering which communities are identified now, and the plans in place to cover the remaining communities. Mahsi, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Lafferty. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, over time the intent is to bring telehealth facilities capacity to all the communities. We've been working slowly at that over the last number of years. In some cases, due to budget restraint, we've only been able to do it to the level of the video capacity, as opposed to the full telehealth. But once again, Madam Chair, I'll let the deputy speak to the detail, and where we are and what's being proposed.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Murray.

**MR. MURRAY:** Thank you, Madam Chair. We're just finalizing the rollout of the communities for telehealth: Tuktoyaktuk, Fort Providence and Behchoko. We have telehealth sites in Holman, Deline, Inuvik, at Stanton, Lutselk'e, Simpson, Fort Resolution, Fort Smith, Hay River. So we're doing three more this year and our plan is, over the year, as the Minister stated, to keep adding additional communities and sites as the money's available. Since it uses communications equipment, as the communications technology allows us to roll it out, because the telehealth sites use quite a bit of the communications network. When you do a videoconference or where you do a consult, it uses a great amount of the bandwidth that's available. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Murray. Mr. Lafferty.

**MR. LAFFERTY:** Mahsi, Madam Chair. I see the 500K has been allocated to 2006-2007. Last year I guess it was 470,000. I’m just wondering, how did that work out? Like, $470,000, did that cover the whole year, or did the department require additional funding to establish these kinds of systems in the communities? Also, in the smaller communities, Wekweeti, for example, it’s on a dial-up. But my understanding is there’s a broadband connectivity that’s going to be taking place in the 33 communities, or most of the communities anyways. Is the department working with the contractor, I’m not sure who they are, but I think it’s SSI Micro or some contractor out there, connecting the broadband system into the communities? Is the department working with them as a part of their investment into the communities to provide this telehealth into the communities? Mahsi.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Lafferty. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, the money we have in the budget, or the money we had last year, the $470,000, was what we had available for this particular initiative. If we were able to allocate more we would, but it’s been always based on available resources. We are, as a government and as a department, making the contractors aware of our needs as they look at the increased broadband capacity in the communities and Internet capacity to the communities and that we have, if we don’t have it now, we’re planning down the road to come in and require the capacity to be able to install telehealth so that as they do their planning they’re aware of those requirements or potential requirements. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Page 6-25, activity summary, program delivery support, grants and contributions, contributions, total contributions…Ms. Lee. Oh. Total contributions. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you. Madam Chair, the telehealth coordinators…Could the Minister provide in terms of where these new coordinators or these new locations are going to be selected? I think it’s probably the way to go in terms of the future in terms of the health care, because I’ve seen it work and it seems to be fairly effective. If it’s implemented and the locations are well supported, it will cut down a lot of the trips into the communities in terms if we had telehealth services in some of the isolated communities. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger. Oh, Mr. Miltenberger. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Madam Chair. In terms of the $500,000, it’s been allocated to various health authorities to fund or partially fund positions that are responsible for ensuring that the telehealth sessions occur, they ensure that the equipment is set up, and ensure that the telephone lines and so on are all connected. Funding will be going to the Deh Cho, $40,000; Fort Smith, $40,000; Hay River, $40,000; Inuvik, $80,000; and Stanton, $210,000; and Yellowknife, $60,000. There’s another $30,000 that’s yet to be determined, but that’ll be decided later on this year. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. St. Germaine. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. The telehealth again, it’s worthwhile. I’d like to see it more in the…I’m hoping that we can see it in the smaller communities. Like, Deline has the telehealth services. You have it in Yellowknife here, I don’t know for what reasons. You have it in Smith and Hay River, Inuvik, and Stanton again in Yellowknife here. Again the Sahtu is not listed in here. It’s probably one of the, besides the riding of Nunakput, that needs to make more sense to have telehealth in those areas where it’s harder to get these services. So I’m quite disappointed that our region has been left out of this in terms of the telehealth services. Again, you’re going to have it in larger centres and other places where they have fairly decent health services. Now, it just doesn’t make sense to me how this telehealth service is being laid out. I want to ask the Minister if he would consider…They have the system already set up in Deline. Why is it just going to sit there and gather dust? Why don’t they improve on that system in their communities where they can put new locations and spending more money to implement it? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, we do have some facilities, like the capacity in Deline, but the Member raises a good point. If we had our druthers and we had the resources, we would be much more aggressive in how fast we roll this out, but it’s always been circumscribed by the resources available. So we’ll take the Member’s comments under advisement. I’d also like to just point out that on that list that Mr. St. Germaine just spoke to, there’s $30,000 unallocated and what we will do is commit, since I see no money in the Sahtu, that we’ll put that $30,000 unallocated for this coming year into the Sahtu as a start, or to build on Deline and look at how we can move forward from there.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you. Madam Chairman, the telehealth, is there a report saying that…I imagine there’s a report saying how efficient it is and what kind of money it’s going to save our department or enhance our health services in the smaller, more isolated communities. I say Yellowknife because sometimes in the smaller communities we have bad weather. Sometimes aircraft can’t get in there for 30 hours or so. So we need to have that type of service. I’m not too sure if that’s something to look at in terms of a report and making the assessment saying that telehealth is good or not good. I appreciate the Minister considering Deline or building Deline as a centre that will kick start their telehealth services again. Because it’s just sitting there, you know? It’s a crying shame that this telehealth service in the Sahtu is not doing what it’s supposed to be doing.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Minister.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, the Member points out the challenge to this particular program, and that is that we’ve invested a lot of time and effort and resources into putting in the actual physical infrastructure, and the piece that needs to be developed now is getting it built into the culture of treatment and care for the whole system so that the doctors, the nurses, the social workers, the CHRs are familiar and see this as a tool that they use as automatically, and without any kind of fear or apprehension, as they do their computers or any other piece of equipment in their facility. The Member is right; I’ve been to some communities where unless there’s a person there that’s interested in it, it sits there covered up and, for the most part, may go unused for great periods of time. The intent and potential is it could be an extremely valuable service and our challenge now is to build on not only the infrastructure, but, as I indicated, the practice piece of this equation. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Yakeleya. We’re on page 6-25, activity summary, program delivery support, contributions, total grants and contributions, $13.923 million. Mr. McLeod.

**MR. MCLEOD:** Thank you, Mr. Chairman. This professional development, recruitment and retention, human resources, $2 million. I’m just curious, Mr. Minister, a lot of the recruitment, in my understanding, has gone over to human resources. I see a line here for $2 million into recruitment and retention. Is there something other than, these are for the front-line workers. I’m just wondering, Mr. Minister, what else are we doing besides having human resources look after the hiring for the frontline workers? Is this for them to travel? I’m just curious to see where that $2 million is going. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. McLeod. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, there’s two parts. The hiring and HR piece of actual recruitment, or the recruitment piece we’re working with the human resources department. At the same time, we still administer control of funding for a lot of the support programs on the professional development side. I’ll let Mr. St. Germaine speak to some of the details of how that’s structured.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Murray. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Mr. Chairman. Yes, the $2 million in contribution funding is funding that goes directly to the authorities to support retention and recruitment activities. Specifically, there is money there for professional development, retention activities, the Graduate Nurse Placement Program that provides the funding for the graduate nurses in their placements in the authorities, and there’s additional funding for specialized training for physicians and nurses. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. St. Germaine. Okay, committee, we’re back on page 6-25, activity summary, program delivery support, grants and contributions, contributions, total grants and contributions, $13.923 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Mr. Yakeleya.

**MR. YAKELEYA:** I just wanted to ask the Minister on program delivery support funding, we’re down from last year. Is there a reason why we’re down from last year from $11.418 million?

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. That would be the money transferred to human resources.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. To page 6-25. Agreed?

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Thank you. Page 6-26, 6-27, information item, program delivery support, active positions. Are there any questions? Mr. Yakeleya.

**MR. YAKELEYA:** Thank you. The Minister spoke on this earlier, Mr. Chairman, in terms of the Aboriginal Wellness Program and he had indicated that $234,000 was allocated and went through the reduction exercise and reduced it to $184,000. With this $184,000 into the Aboriginal Wellness Program, what does it do? Because of the clientele in Stanton hospital is 65 percent of aboriginal people.

---Interjection

**CHAIRMAN (Mr. Ramsay):** Yes, Mr. Yakeleya, we’re on page 6-26, 6-27, program delivery support, active positions. Agreed?

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Thank you, committee. We’re now on page 6-28, 6-29, health services programs, activity summary. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you. Well, I want to ask the Minister what justifies the reduction if we have 65 percent of clients who are aboriginal in Stanton hospital and we’re reducing the funding to the Aboriginal Wellness Program? It just doesn’t make sense. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, that one percent reduction exercise caused us to look again at all the different areas of the department, and the decision was made that it was easier to take one percent of a reduction or take some funds from a program that has yet to start than it is to look at if we could avoid it taking funds from an already up and running position. I just point out that this commitment is for this year, but the budget for next year is back up to $359,000, or $360,000 for next year. So this will allow us to get a good start and we’ll be able to build on it in the coming years. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. Mr. Chairman, a budget of $265 million, do you have to take out this little portion from the aboriginal program? I understand what the Minister is saying, hoping to have a good start, but it’s reducing. This is a very important program where over 50 percent, over 60 percent clients are aboriginal people. We need this service; we need this type of program, and he has to do a cut out of a budget of $265 million. I just don’t understand it. It just doesn’t make sense in terms of the program. So for me it just doesn’t show that this government department is supporting this Aboriginal Wellness Program.

**AN HON. MEMBER:** Good question.

**MR. YAKELEYA:** So I want to again ask the question, would the Minister consider the funding to this program to go back to the original amount that he stated, $234,000?

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, the one percent for us was $2.6 million in addition to other reductions that we made over the past number of years. When we look at the list of demands that we have and the needs that we have, like more nurses and nurse practitioners, and better benefits and pay, and those type of things, we had to make some tough choices. This is an important program, which is why we have a significant amount of money in the budget and even more significant amount of money next year, that after all these years we’ve done enough work and recognize the fact that it’s time to invest in this, and we have done that to the best of our ability with the resources we have for this coming year and then the year after next. As I indicated, the number goes up to $360,000. So I believe that is a very clear commitment by the government, supported by the Social Programs committee. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Yes, thank you, Mr. Chairman. Mr. Chairman, the Minister makes a good point in terms of the next year funding in terms of upping the Aboriginal Wellness Program and the one percent cut represents $2.6 million of the total budget, then making other arguments as to reasons why this program needs to be cut. I’m saying again, out of $265 million this small program that is valuable to our people, it’s first contact in the hospital. We can’t even have people sit at the front desk who can address the needs of the aboriginal people. There are many things that we could talk about again as wide as this program. Of all the cuts that have to be on the chopping block, I mean, there’s certainly many other programs that could be looked at to reduce, but not something like this. Especially in terms of the clientele again is 65 percent aboriginal people who walk through Stanton hospital. This is one percent solution, I guess, to deal with it. I’m having a hard time. I do understand the Minister’s commitment to enhance the program for 360, but right now I think we went a little bit off track on here. So I’d like to again ask the Minister to really think about this and I don’t even know what the $184,000 would do. What kind of programs? Half time? One person? Two persons? It’s just not doing any good for the amount of money that’s going to this important program such as the Aboriginal Wellness Program. I think I want more to leave it as a comment. I hope that the government will consider increasing this position towards being more meaningful. We’re on the right track, but I think we’re taking a step back on this process here. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, considering the fact that at this point we have, right now as we speak, we have no funds invested in this area, I think this is a significant step forward. I know that we initially budgeted more than the final figure and that was one of the realities we had to live with, all of government had to live with, and we were required to do our share. We had to make some tough choices. I will indicate to the Member that we’ll look, if there’s unallocated funds, that we could possibly look at this area. But at this point, if we put more money here, I have to go back and take $50,000 from somewhere else and we just talked about all the other areas that we want to put funding into already that we don’t have money for. So it’s always a case of making difficult choices with resources that are never enough for the needs. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** You know, that’s the point here in terms of, you know, I didn’t know that some of this funding was going to get cut for the aboriginal, 100 percent again, support the Minister in putting this program forward and making sure that the clientele are being looked after and he’s looking at 360 for next year. In terms of now, I was shocked when I saw there was reduction in the Aboriginal Wellness Program. I was saying, well, what’s happening here? What’s going on here in terms of our clientele again is 65 percent of aboriginal people going through Stanton hospital, we’ve got to have a strong aboriginal language program, got to have a strong aboriginal diet program for the people there, got to have front desk or in the area where they get service. Sixty-five percent of aboriginal people go through Stanton hospital. It’s a territorial, major hospital and we’re making cuts to an Aboriginal Wellness Program. It’s just going backwards on the design and I’m not too sure how successful they’re going to be this year. I mean, we’re going to come up with the same complaints. I know the Minister is saying that he had to make, along with his officials, some hard decisions on some cuts, but $50,000 out of $265 million? I mean, come on. You can find somewhere else.

**AN HON. MEMBER:** Yeah.

**MR. YAKELEYA:** Put the program…

**AN HON. MEMBER:** Hear! Hear!

**MR. YAKELEYA:** …of $265 million…

**AN HON. MEMBER:** Unfair.

**MR. YAKELEYA:** …they have to make a $50,000 cut. You put that over 365 days a year you know how much money that is? It doesn’t make sense. It’s nothing to what we’re doing to service our people. That’s the bottom line.

**AN HON. MEMBER:** Picking on Norman.

**MR. YAKELEYA:** I’m just going to make that comment again. That’s why we asked to, I guess, have some real meaningful consultation with the Ministers when they’re going through this exercise. This is important. This is an important program. Maybe not to the whole Department of Health, but this is important to our people in the Sahtu and it’s important to the 65 percent of people that go through Stanton hospital. We have a strong aboriginal representation the northern people in the Northwest Territories. I’m going to leave it at that, Mr. Chairman. I think the Minister’s heard me.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. We are on page 6-29, activity summary, health services programs, operations expenditure summary, $149.105 million. Mr. Braden.

**MR. BRADEN:** Okay. Page 6-29. Mr. Chairman, in this program area I know that we’re looking at getting a more concerted effort underway in the area of aboriginal wellness and there is some part of this budget allocated to, I understand, hiring some coordinators in various centres in the NWT. I wanted to ask the Minister to what extent we are able to launch this program. Have we got adequate resources? What are, in a summary, Mr. Chairman, the coming business year’s program going to be to expand our focus on aboriginal wellness?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, if the Member is referring to the $180,000, there’s a coordinator's position and a half-time health and social services liaison worker, and a child life worker, both half-time. There will be funding for a traditional healer, as well, and two community liaison workers, as I understand. Mr. Chairman, as well, I mean, if you look at the health services programs, there’s a whole list of issues that look on the prevention side. We have, of course, 184 for the wellness program, we’re doing vaccination programs, we’re going to expand the nurse practitioners, we have the rehabilitations team on this, we’re putting in nurse practitioners which are going to work in the communities, hopefully help us deal more effectively at the community level, we’re looking at getting a chief environmental health officer, to name some other things that will have an impact on the prevention for all northerners, 65 percent or 50 percent of whom are aboriginal, as has been pointed out.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thank you, Mr. Chairman. I welcome this initiative. I think it’s something that Social Programs has been looking for. We saw what our neighbours over in the Yukon are doing with some specific focus and it is very encouraging. What are the expectations that the department has for or from this particular program? Are there things that we’re trying to do now with, if you will, conventional medicine or medical practice that aren’t getting results among the aboriginal community? How is this going to improve the delivery of health care to the aboriginal people, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, first I’d like to recognize the fact that most communities that I’ve been in, all the hospitals, all the communities I’ve been in do make efforts and I think are very sensitive to the culture where they operate. But there has never been a clear funding arrangement and a program recognition. It’s been done because it makes good sense. It’s been done just as part of daily practice. If you travel to Whitehorse and you look at the health centre there or the hospital there, you see that they recognize that there’s value and a benefit to the combination of traditional medicine and practice with western medicine and practice that allows people that may not feel as comfortable as they could without that support to be more comfortable, to be better treated. They deal with a lot of the translation issues, the traditional food issues, the combination of practices, especially when it comes to a time of severe sickness or palliative care. So I think it’s an overdue recognition that there’s more than one way that medicine can be delivered, and that it’s been done other ways for thousands of years, and we’re looking at trying to incorporate that practice into the standard western practice, the health model that we currently have. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Anything further, Mr. Braden?

**MR. BRADEN:** Yes, thank you, Mr. Chairman. Also in this area there is some enhancement, I understand, to the delivery of some cancer treatments at the Stanton facility. We are, I understand, endeavouring to expand our program of care and treatment in that area. I’m encouraged by this. If we can help patients stay closer to home while they’re receiving this treatment and potentially save ourselves some money, that’s great. I guess I wanted to find out what is changing that allows us now to do this at Stanton hospital. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. I’ll ask Mr. Murray to speak to the specifics of the improved cancer treatments.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Murray.

**MR. MURRAY:** Thank you, Mr. Chairman. What’s being proposed is to increase the visits by the oncologist out of the Cross Cancer Institute in Edmonton. Currently they only come north for three days per year to consult, and diagnose, and work with patients in the Territories. We’re proposing to expand that to 24 days per year by the oncologist. So that would allow more follow-up visits to happen with cancer patients within the territory, rather than having to travel south. In conjunction with that, work is already underway to allow us in the North to do more of the actual cancer therapy here, rather than having patients go down for chemo and some of those therapies they can also be administered out of Stanton. But this particular initiative is to allow for more visits by oncologist physicians to the NWT so our patients don’t have to travel south when they have cancer. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Murray. Mr. Braden.

**MR. BRADEN:** Thank you, Mr. Chairman. That’s all for me on this page. Thank you very much.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. We’re on page 6-29, activity summary, health services programs, operations expenditure summary, $149.105 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Page 6-31, activity summary, health services programs, grants and contributions, grants, total grants, $25,000, contributions, total contributions, $118.393 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Total grants and contributions, $118.418 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Ms. Lee.

**MS. LEE:** Thank you, Mr. Chair. Could I just get an update from the Minister as to where he is with this review of supplementary health programs? This has been under review for quite awhile now. I do understand it is a complex area, but could I just get information as to when might we be able to see the end results of his review? Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Ms. Lee. I think that question is more in line with 6-33. So perhaps we can approve 6-31 and we’ll just move on.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Okay, agreed. Thank you. Page 6-33, activity summary, supplementary health benefits, operations expenditure summary, $17.683 million. Ms. Lee.

**MS. LEE:** I had agreed on the previous page and I had moved on. So I think the Minister did hear my question. Could I get him to give us an update on where he is with the review of the supplementary health benefits? Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Ms. Lee. Mr. Minister.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, we’ve been engaged in a fairly long process of consultation and we’ve met with a number of groups just before Christmas to have another major consultation plan with the seniors, but we do plan to be able to come forward by this spring with the results of the work and some options for consideration. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Ms. Lee.

**MS. LEE:** Thank you, Mr. Chairman. That sounds like we may be able to get somewhere and have some action plan in by the business plan this fall. The Social Programs committee has periodic briefings on these items. When would the Minister be prepared to come before us and share with us what he learns, and could this happen before the June session? Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Ms. Lee. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chair. Mr. Chair, we’d be very happy to add that to the list of briefings that the committee is going to budget time for in the coming weeks. So we’d be very happy to do that at the convenience of the committee. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Thank you, Ms. Lee. We’re on page 6-33, activity summary. Mr. Yakeleya.

**MR. YAKELEYA:** Mr. Chair, can I ask the Minister again would he look at considering travelling for the seniors because they needed some support, and again, some of the elders they won’t stand up or if they go to travel out from the smaller communities into the larger centres in terms of travel with escorts, would the department consider a policy that would ensure that these elders have escorts when they travel out to larger centres, rather than just a case-by-case basis because a lot of them may fall between the cracks on this policy here? Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, what I will commit to is I will commit when I meet with the board chairs -- and we meet with the CEOs and, as well, with the Stanton folks -- that we reinforce the need to be very sensitive to the requirements of those elderly folks that are travelling that may need assistance, and that if there’s a question, the precautionary principle is that we err on the side of the patient so that we don’t have people falling needlessly through the cracks. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Anything further, Mr. Yakeleya?

**MR. YAKELEYA:** Thank you, Mr. Chair. Again, when they meet and look at the different policies on the board here that this can be communicated to the bands and the Métis and the hamlet, but also to the chairs and that the elders really understand this policy here. So the need to have a clear communication plan with this. Just a suggestion here. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. The Member has provided good advice and we will take the steps to ensure that the authorities, and the chairs, and the staff transmit this so it gets down to the people requiring the service. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. We are on page 6-33, activity summary, supplementary health programs, operations expenditure summary, $17.683 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Page 6-35, activity summary, supplementary health programs, grants and contributions, contributions, total contributions, $10.273 million. Mr. Braden.

**MR. BRADEN:** Mr. Chairman, I don’t know if this is the exact place to ask about recoveries of expenditures. I know that it’s been a chronic dispute or discrepancy that we’ve had with our friends in Ottawa at either Health Canada or Indian and Northern Affairs to collect all of the expenses that we put into providing health care services for aboriginal people and Métis. I’m wondering if, as I say, this would be the appropriate time to ask. How are we doing on that chronic financial aspect of recovering costs? Have we got things more or less sorted out with Ottawa? What’s our status here, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Murray.

**MR. MURRAY:** Thank you, Mr. Chairman. Over the last year, we’ve been successful in dealing with the president of Indian Affairs in Ottawa negotiating a change in the agreement for the hospital and physician services for aboriginal people, so that it’s now a grant program as opposed to a contribution-based program from the federal government to the territorial government. What that means is we don’t have the one, or two, or three-year disputes with the federal government over the amount of a claim. So instead of having to sometimes be three years behind in getting the final adjustments and audits done, we’ve been able to…Through the grant process, we’ll be able to get our money quicker and deal with that. What hasn’t been dealt with yet is the fact that the program is still capped by the federal government at two percent growth per year. Of course, the GNWT has to supplement that with our own funding and there is no additional funding being given by the federal government beyond their cap in this program. So I guess the good news is we won’t have to wait for the cash to come in, but it’s still at a capped level.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Murray. Mr. Braden.

**MR. BRADEN:** Thank you. That’s good news that we’ve finally got a more businesslike, I guess, approach to resolving this. Mr. Murray mentioned that sometimes it takes two or three years to reconcile the accounts. I believe it was the Auditor General, wasn’t it, who pointed out in recent times that we are leaving quite a bit of cash on the table, or having to finance a lot of cash flow because there was such lag between when we presented our invoices and when we got payment? How are we doing in the arrears department? Do we still have a considerable variance or outstanding amount that we are hoping to collect, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, this is a situation that we’re going to continue to raise at the table with our health colleagues and the Health Minister. With NIHB, or non-insured health benefits, we’re not doing too badly. But the program that was just currently being discussed where they capped the program, they capped non-insured health benefits as well, but they capped the program and, very clearly, we’re never going to recover the money that we have spent in the past number of years and that money, for all intents and purposes, is on our books as accounts receivable, but would probably be classified in the business world as a bad debt that you’d end up writing off because the federal government has refused to pay it because of their own caps.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mrs. Groenewegen.

**MRS. GROENEWEGEN:** Thank you, Mr. Chairman. I’m going to bring up something that I’ve already talked about in this House before, and that is the group of people who are not covered by any kind of dental or pharmaceutical insurance. As I said in a statement not so long ago that the Minister will remember, on some of these extra things if you are Dene, you’re covered; if you’re Métis, if you’re senior, if you’re indigent, if you work for a large corporation, but there’s a whole lot of people who work for the private sector, small business, who do not have access to employer sponsored insurance programs. There’s a group. I don’t know if I’d say it’s a whole lot of people, it’s probably not that many people. Anyway, I want to know in simple terms, and I know the Minister said oh, you know, we’re looking at extended health care benefits and we’re studying this and we’re studying that, but you know, what I want to know is has anybody from the Department of Health ever approached a medical insurance company, like Green Shield or Blue Cross or some other insurance company, and said look, how much would it cost to do a kind of a contract that the GNWT would put out for people who don’t have any insurance coverage for dental and pharmaceutical to subscribe to? The people would pay the premiums. People can’t do that and afford to do it on an individual basis. However, if they could tie into a group policy -- it would be a large group -- but if they could tie into a group policy, it could potentially cost the government nothing. They could just be the facilitators and the coordinators of it. It might cost them some administration dollars. So my question is, has anybody ever approached an insurance company to see if we could make something like that available to those people who I feel badly are not covered and should be? Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mrs. Groenewegen. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, we estimate it’s about 10 percent of our population doesn’t have third-party coverage, which is why we did some of the things we did a couple of years ago for medical travel and the $250 deductible. What work we’ve been doing here has involved Alberta Blue Cross. We’ve been looking at options of providing coverage for all northerners and it’s a fairly complicated process. If we’re seen to be providing a universal program, for example, then the federal government will just sort of walk away from non-insured health benefits saying you’re providing it for everybody else, we’re not paying anymore. So we are going to be coming forward with some options here that we think will allow us to help address this. It’s going to need some reprofiling, but there will be a number of options. So we are working on it. We have consulted with the insurance companies and specialists, and we’ve consulted with the homeless and we’ve consulted with the Salvation Army. We’re going to consult with the seniors and we’re walking through how do we close that gap, that 10 percent gap. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mrs. Groenewegen.

**MRS. GROENEWEGEN:** Thank you. I’ve lived in the Northwest Territories almost my whole life, but I do know when I was a kid growing up in Ontario, my parents used to get a bill occasionally that was the Ontario health insurance premium, and for a family it was a certain amount and for an individual it was a certain amount and people paid it, I don’t know, on a quarterly basis and they bought health insurance and it was not particularly overly expensive. I don’t know what it is now because I haven’t lived there for over 30 years and I’m not sure if they still charge that. I want the Minister to elaborate a little bit for me on why the federal government would take the kind of a clawback or diminished services approach if we were trying to do something separate that would be funded by the people who subscribe to the service? Why would the federal government have an issue with that in terms of the other supports they provide to the people who are covered? Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mrs. Groenewegen. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, what I meant to say, or what I was saying, is that if the government is seen to be paying or we come up with a scheme where like the other health programs that we have that there is no charge and we’re going to cover everybody’s costs at the same level, then the federal government, we anticipate, would take that as a universal program that they don’t think they should have to pay differently. If it’s a program where there’s an insurance program and people are paying a certain amount themselves, it’s not an issue. That’s the distinction I was trying to make. I apologize for any confusion. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Anything further, Mrs. Groenewegen?

**MRS. GROENEWEGEN:** Okay, thank you, Mr. Chairman. I’m glad we have that clear now. I recognize that you’d have to do some pretty serious battle to increase your Health and Social Services budget significantly enough. You’d need a lot of financial resources to extend universal access on Pharmacare and dental. I understand that. As an interim measure though, I’m talking about putting in place a program for others who are not already covered by third-party that people could pay into and pay a premium, and if it’s that large of a group, I maintain that the premium might be quite reasonable, but somebody has to instigate it. Somebody has to be the overseer of it and then people would pay their premiums and they would opt in or choose not to, if they don’t want to pay it. But at least people who are not covered now would have an option of purchasing coverage, insurance coverage, for those things at a reasonable rate, and I think it should be doable. There’s insurance for everything. You can buy insurance for everything out there. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mrs. Groenewegen. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, the Member is correct; Alberta has recently come up with an arrangement such as that, and that’s going to be one of our considerations as we come forward with options to look at in terms of how do we close the gap and get the third-party coverage and who pays, and if we pay, how do we pay, and if it’s going to be a shared responsibility, how do we offset that. So we’re going to be looking at that one as well. But the Member is correct; it is doable. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Anything further, Mrs. Groenewegen?

**MRS. GROENEWEGEN:** I think I’ve heard the three words I wanted to hear: It is doable. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mrs. Groenewegen. We are on page 6-35. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chair. The money that the Minister talked about before in terms of the one that is not likely to recover in terms of the non-insured health benefits. It seems like we may not be able to get some of our money back from the federal government. He said in the business sense we’ll call it bad debt in terms of we’re probably going to have to more than likely write it off, but I think that was money well spent. That’s a fairly good bad debt. So I wanted to tell that to the Minister in terms of I hope there’s some type of plan here to ask the new Prime Minister of any likelihood of us, because we carry that load of money to recoup or receive some type of recovery for that funding. I wanted to ask the Minister, are we just going to let it go and money well spent for our people and go on from there? Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, what we have to do is differentiate, as we deal with this, that non-insured health benefits is covered by Health Canada and our big problem comes with Indian Affairs who look after the medical hospital services of the Indian and Inuit people, which is where the significant amounts owing are there on our ledgers, and they’re the ones that have capped the program and have indicated that they’re not going to be compensating us for that. So we have a new Minister, Minister Prentice. They’re going to be looking at I think taking a very clear look at how Indian Affairs operates. Whether they will look at any kind of retroactivity is yet to be determined, but it’s an issue for us that has not been forgotten. I know the civil service in the previous government were adamant that they weren’t paying, but for us it’s going to be an issue worth revisiting. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Mr. Chair, is the Minister and his department putting some points together, or arguments together, in terms of ensuring that the federal government is not offloading some of its fiduciary responsibility in terms of health care or health services to the territorial government? We may get stuck with this in the future in terms of other governments in terms of how the federal government is possibly offloading some of its obligations in terms of the health care to the aboriginal people. I wanted to ask if the Minister has any type of position paper or any type of arguments to go to the new federal Minister? Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. We have provided information quite regularly with the various officials and politicians in Ottawa, including the former Member of Parliament for the Western Arctic. We’ve met with the national aboriginal organizations. It’s an issue not only for us, and we will be bringing this issue forward with Minister Clement from Health Canada, as well as Minister Prentice, when we get an opportunity to meet with him, as well. There are fundamental issues and the federal government will make the case that these non-insured health benefits are not a treaty right, they’re just because they’re a caring and good government that they provide this, and part of the argument is the conditions and restrictions they place on these programs. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chair. Mr. Chair, I guess the interpretation of treaties and treaty obligations is before courts, or through interpretations and different means of how they view health care education to the aboriginal people. Depending on what side of the bed I guess you wake up on, you will obviously get different, various interpretations. So I just look forward to the Minister in terms of how he’s going to proceed forward and something that we want to continue on. Again, its money well spent in the health service in terms of what he called a bad debt. But somehow we should continue on, and be vigilant, and be persistent and keep on moving forward. We’ll move somewhere, maybe not right away, but I believe that he has a good point in terms of the health care issue.

The one issue I want to talk about is a little different. It’s regarding the medical travel and the centralization of services by the Stanton Territorial Health Authority. Now the issue is it may be a good system setup, but it seems like we have some glitches in between the approval from Stanton Territorial to our regions and to our communities. Sometimes the health centres or the community itself has disagreement with the approval process and seems to have one department to have one person have a lot of authority to say yes or no to medical travel in terms of escorts. Again, it goes back to this whole issue of one person having a lot of authority to approve or not to approve certain escorts to go with certain people. I wanted to ask the Minister, would he consider providing the nursing centres and nursing stations some leverage or some flexibility to tell the medical services centralized office that this person really needs to travel and this escort needs to go with this person, and have some flexibility for our nurses to have that type of weight or argument? Otherwise, they usually get overwritten and central ops says, nope, sorry, and it just causes a lot of undue stress and abuse for the families in the communities. So would the Minister look at something like that that would give some authority to the local health centres? Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, just a couple of questions, but I believe I gave a commitment on the issue of medical travel and escorts to make sure that when we next meet with the board chairs and the CEOs and the senior staff, we’ll review the whole thing of medical travel and escorts. As well, I’d like to just make the point that as a matter of practice, the health practitioners are the ones that make the call. It’s not the place of a clerical person or a bureaucrat to necessarily, in their wisdom, decide to override a decision that’s been made by a nurse or a doctor. If those situations arise, then of course we backtrack on those very quickly to make sure things are operating appropriately. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chair. It’s good to hear that the Minister is clarifying the roles of health practitioners or doctors in our communities that make the call and that the bureaucrats could not override a decision made by the health centre. So it’s good for clarification that some of our health centres and that would have some clear indication as to when they ask for an escort, that it’s not judged or not being challenged by the central travel agency for medical services. So I wanted to thank the Minister for looking at some of these travel policies within his department. So I think that’s a good thing I heard about clarification. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. We’re on page 6-35, activity summary, supplementary health programs, grants and contributions, contributions, total contributions, $10.273 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Thank you. Page 6-37, activity summary, community health programs, operations expenditures summary, $65.487 million. Mr. Braden.

**MR. BRADEN:** Mr. Chairman, I believe it’s under this area that we would be including the move of the Territorial Treatment Centre from Yellowknife to Hay River, and I would like to ask the Minister whether his department has considered any of the many calls to reconsider this decision or, at the very least, Mr. Chairman, to look at what kind of programming could be left in place here in Yellowknife to serve the needs of the children and the families who are already attending the TTC here and who have come to rely on the extensive network of services that has built up over the last 15 years or so? So what can the residents of the Yellowknife and the North Slave area rely on for services to children who have severe behavioural disabilities, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, I’ve looked at all the correspondence, and the issues, and the program concerns, and the people of Yellowknife, like all of the other communities in the North, will have the comfort of knowing that they’ll have a well-run facility in Hay River that will help address those needs.

We’ve also committed to look at some repatriation initiative from the South that would better allow us to deal with some young people that may have other issues that they are dealing with, possibly with alcohol and drug issues or abuse issues or other things where we have the capacity, we believe, to provide them on a fostering small group home basis, and we are going to be looking at that initiative…We are looking at that initiative right now. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Braden.

**MR. BRADEN:** What arrangements have been made for providing the service in Hay River after the closure of the Yellowknife facility, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Murray.

**MR. MURRAY:** Thank you, Mr. Chairman. We are working with the current contract provider, Bosco Homes, who is a member of the committee. They will be the group we will be working with to establish the new facility in Hay River in terms of operations. They are involved in determining what the ideal situation would be and what rooms are needed and those kinds of things, security measures. They are involved in the planning of that piece.

As well, we have been talking with Bosco about what the other kinds of services we would like, as the Minister just mentioned, in terms of groups homes and those other types of facilities; repatriation of children from the South. We’ve also been talking about their level of interest in participating in that with us.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Murray. Mr. Braden.

**MR. BRADEN:** Has the contract with Bosco been extended, or has a new contract been cut? What is the duration of this contract with this very reputable firm, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Murray.

**MR. MURRAY:** Thank you, Mr. Chairman. The contract with Bosco was extended through March 31, 2007. That’s the operation here, and then we will be sitting down with them to talk about the contract operating in Hay River, as well. We just haven’t had those discussions yet, but those are planned.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Murray. Mr. Braden.

**MR. BRADEN:** Mr. Chairman, one of the aspects of this transition that has been looked at very carefully is the change from a Yellowknife-based staff to starting up a Hay River-based staff. One of the concerns I know was that as the operation here in Yellowknife spools down, and I understand that the schedule has it that the TTC will cease operation here in Yellowknife in the spring of 2007, that it is going to be difficult to retain the number and calibre of staff here in Yellowknife and yet, within weeks, anticipate that the same number will be recruited in Hay River and ready to undertake the training and transition for the start-up of the program there. This is not a straightforward transition. I wonder if the Minister could advise the Assembly of plans there. Will families be able to rely on a continuous level of service? Is it realistic to expect that there may be interruptions, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Murray. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you. I appreciate the deputy letting me answer that question.

---Laughter

Mr. Chairman, we are working very hard to make sure that this is as smooth and as seamless a transition as possible. As we look at establishing this program in Hay River. Clearly, we are going to be making offers and encouraging any of the staff in Yellowknife that want to relocate to consider that. In the meantime, we know there is a pool of labour there and skills that we believe we can make use of. Bosco have their own skills, as well, that they are going to bring with them, so we are going to make this as seamless a transition as possible. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Anything further, Mr. Braden?

**MR. BRADEN:** Mr. Chairman, that will leave a building here in Yellowknife of some potential future use and I would like to see what plans the department has for continuation of the existing TTC building for any potential further community program use, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. At this point, we have no identified use for that building, given the majority of the building’s condition. We see it, at this point, as surplus to our requirements and it will go on the government inventory as a government property, but we have no clear identified use for that that we are pursuing. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Anything further, Mr. Braden?

**MR. BRADEN:** Mr. Chairman, it is a residence with some classroom and cafeteria facilities in it. This community is hard pressed to care for or to have alternatives for the homeless, for treatment facilities for other kinds of illness or addictions. If we are going to be vacating this building by next spring, wouldn’t it make sense to see if there is potentially somebody out there who can take it on and use it for continuing good community sense? It’s kind of disappointing to hear from the Minister that I am not getting a sense that they are even interested in seeing whether this could be done.

Does the department plan on putting this building out for tender or proposal to see what kind of idea could come up, Mr. Chairman?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. We are fully allocated, I guess, is how I would phrase it at this point. We have projects on the list in Yellowknife that we don’t even have funding for, and I speak specifically about the consolidated clinic initiative which we think is very important and very valuable that we are trying to move on. We don’t have, in our planning schedule, an alternate use for this building, and one of the reasons or one of the factors that was considered when we looked at the move of TTC was the general condition of this building. That is not to say that if someone or some group was going to make the case for some type of program, that we would not look at that. The expectation being, of course, that there are going to be plenty of requests, providing we can give them the O and M funding to run the building. That’s where the struggle comes for us.

So what is happening now is that facility is following a normal disposal process that happens in government. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. The community health programs, I want to ask the Minister in terms of the…He’s acknowledged a few of the community wellness workers the last couple of days in the House here in terms of their training. I want to ask what type of training programs are the counsellors receiving in terms of the residential school issues? I know they’ve been trained on several fronts on addictions, wellness and prevention. Is there a specific training that these frontline workers, social service workers, mental health workers, addiction workers, drug and alcohol counsellors that have some idea as to working with survivors of residential schools and where they could point them to for treatment centres or wellness programs to help them and their families? Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. The training that wellness workers take part in is geared to giving them an expanded skill level to deal with a number of presenting problems and concurrent issues that may be there. Clearly, in the environment that we live in, the issue of addictions and residential school impact are all part of the landscape when wellness workers are learning about developing these skills and, included in that context, when people come to your door into your office with issues. What do you do and how do you do it? What are the referral agencies that you can draw down on? Should somebody, in your opinion, require that that wellness worker or mental health worker may not be able to apply or supply?

Case management becomes an issue with the clinical supervisor, the mental health worker and the wellness workers, as well. In our environment in the Northwest Territories, the residential school factor is one that is prevalent in all this type of work. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. The Minister is correct that residential school is prevalent in all areas of the small communities. Again, I support the Minister in terms of continuing to support his frontline workers, social workers, mental health workers, addiction workers in terms of dealing with this issue. We are just scraping the top of the iceberg on this issue here.

In terms of funding to the authorities for community social service workers in the areas of prevention, assessment, early intervention, counselling and treatment services related to children, youth and families, what type of funding that’s given to the health authorities in terms of some flexibility where communities would be empowered to design their own programs under one of these topics in terms of helping the children, youth or families? Is there a type of discretionary funds that the authorities can give to the communities and say here, design your own program for you, your children and your families, without following some of the policies that are in place by the Health and Social Services directive? Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. There are very few pots of what the Member referred to as discretionary funding. The funding we have for the authorities in the communities tends to be fully allocated when we get it. There may be specific program funding pots that we can request funding for for conferences or for those types of generally one-time events. In terms of just money that can be given to the communities to design their own systems, that kind of flexibility is not currently there. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. Mr. Chairman, these one-time conferences sometimes get into the space where we had a conference, we had some good discussions, now we have to follow up. In terms of some flexibility in terms of discretionary funds to have the communities come up with their own design to work with the family, the youth or the children, would the Minister look at some of his funding policies or criteria, what things he needs to do that would make it so that the communities can have some discretionary funding, so people can design their own programs which makes sense for their own community members? I would ask the Minister if he would give some consideration to reviewing some of the funding guidelines. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, just so that it’s clear to the Member -- and I apologize if I am not being precise enough -- out of our $260 million budget, about $190 million of that goes to the different authorities right off the top for all the program areas. They have latitude with that money with the board which is made up of community representatives, both in the Sahtu and every other authority, to make some program decisions on those areas that are not mandated or there is not a legal requirement to deliver things a certain way to work with communities to try to structure their arrangements. For example, some communities have chosen to have the regional centre provide service on a rotational basis from the regional centre to the communities. Some authorities or communities have chosen to try to do it where they have the staff in their communities, so there is some latitude there. When it comes to the type of structure and program services at the community level, the resources are already there. So if there is a desire to look at how those resources can be reprofiled; there is capacity to do that. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. Thank you, Mr. Minister, for that answer in terms of the funding. I understand the authorities do have some latitude in terms of funding; however, they leave some of the decisions to the department. I guess they work in joint effort to see how the funding is. Sometimes they come back and say headquarters have helped in this decision. It’s more communication back and forth. It’s not so much in headquarters versus the authorities, but it’s trying to find a community solution that would make it more reasonable and make more sense in terms of designing programs that would help the youth, children and families.

It doesn’t matter what areas, just in terms of health programs and the disabled people, the seniors or the ones dealing with suicide prevention or suicide crisis, mental health, addiction, alcohol and drugs. Those are huge issues in our communities, yet we are still spinning, I think, our heels in terms of how to deal with it in a real big way. It’s more of a concern to our people in terms of how do we deal with the alcohol and drug issues in our community. Younger and younger people are getting into alcohol and drugs. Weekends now are like an old broken record in our community. Youth are still using alcohol. People complain all weekend long. RCMP are out all hours of the night chasing around after the youth. Some of them are getting into trouble.

The Minister has a real huge area here to work on. So I guess in that sense, how do we work with the boards? Educate me on the process here. How do we work with the boards? How do we work with the communities? I understand we have representatives on the boards from our communities. I guess maybe taking time to have them know they have the power to say…Yet, we still can’t get there. I don’t know what it is. It has to be some leadership on your part to say the communities will have some leverage in terms of how they deal with the alcohol issue, the suicide issue or the disability issue. Some leadership has to be provided and I believe the Minister can do this with some support and cooperation from our boards.

It’s more important for the people in our communities because the boards seem to have a life of their own after they leave business on their own. Mr. Chair, I just want to encourage the Minister in any way he can help us deal with some of these issues. I know it’s a tough one, and it’s a big one, and it’s never ending. Maybe the Minister can tap into these issues here. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Villeneuve next.

**MR. VILLENEUVE:** Mahsi, Mr. Chair. I just have a couple of quick questions about the community health programs. Just to touch up on some of the stuff that Norman mentioned last week about the community wellness workers who graduated through the program this year and now they are all certified and going back to the communities. I am just wondering with the funding that goes into the health authorities, how accountable does the government ensure that the authorities are when community wellness workers seem to be overworked and underpaid and the salary levels haven’t changed for community wellness workers for quite some time? Is the government actually making sure these community wellness workers are treated fairly and equitably with respect to the Union of Northern Workers and any other government employees in the health industry? Are their salaries comparable to other jurisdictions? Are they at a level that’s fair? Do they get a northern living allowance? Do they get all the indemnities that other government employees get in any other health service industry? Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Villeneuve. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER**: Thank you, Mr. Chairman. When these positions were...Let me back up. When we started our Mental Health and Addictions Strategy, alcohol and drug workers tended to be contract employees in communities sometimes working for bands, or friendship centres, or Metis associations without benefits and very low pay. One of the first things that happened was there was a job description done. It was classified and, in the vast majority of cases, the alcohol and drug workers were converted to community wellness workers and those positions became authority employees, which is the same as being government employees. The positions were classified. They are entitled to the same benefits and pay as other employees. Because they are employees of the authority and those positions were classified, whenever collective agreements are negotiated, they get the same benefits and incremental increases as other employees. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Anything further, Mr. Villeneuve?

**MR. VILLENEUVE:** One quick follow-up, thank you, Mr. Chair. That’s good to know. They are public service employees with the GNWT through the health authorities. With regard to the training that some of the community wellness workers were talking about, a lot of them expressed their dismay with the School of Community Government because a lot of them were alcohol and drug workers before they became community wellness workers and many of them have spent many years in the alcohol and drug field of work in their communities. They were just wondering when they did decide to take up the program to become certified community wellness workers, a lot of them experienced pay cuts down to the 70 percent level in their first year of courses. Yet, the job for them really, on a day-to-day basis, after the one week of course, they still have 51 weeks of regular work that they are doing today as graduates. A lot of them feel that maybe the government owes them some back pay because a lot of them worked for three years starting at 70, 80 and eventually up to 90 percent and then to 100 when they graduate. A lot of them feel they were getting 70 percent pay for a job which required 100 percent of their time. I am just wondering if there is any consideration from the department to maybe review some of the people who actually completed this program and were involved in the alcohol and drug addiction counselling field in their communities for quite a number of years. Is there any avenue that some of these employees can look at getting some retro, I guess?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Villeneuve. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. This is an issue that I have not heard of and neither has the deputy, so we will take the Member’s comments and we will check to see what the circumstance is that he’s specifying and we’ll follow up on it.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Anything further, Mr. Villeneuve? Thank you, committee. I would like to call a recess; 15 minutes. Thank you.

---SHORT RECESS

**CHAIRPERSON (Mrs. Groenewegen):** Community health programs, operations expenditure summary, $65.487 million. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. An area I believe that also comes under community health programs is essentially all the program delivery that is channelled through health and social services authorities. The specific area that I was wanting to look into, Madam Chair, was the advancement of our treatment and care facilities for dementia and Alzheimer’s patients. Madam Chair, this has been predicted for some time and the forecasts are sadly coming true as our population ages. There is a growing incidence of this in the NWT. Sadly, we have not kept pace with designing services and facilities to do the best job of dealing with this very complex condition.

Madam Chair, through the department and the federal government, we know that, at least in Yellowknife, we have $1 million that has been put in place to advance the planning and detailed drawing up until the tendering stage for a facility, a custom designed facility here in Yellowknife. The department, I believe, deserves acknowledgement and appreciation for the support it has had there. We are still a couple of years away from it.

Madam Chair, there is something that does, though, seem to be coming up quickly, more quickly than we may have anticipated; it’s the pressure on families who are looking after loved ones with dementia for assistance. In order for them to continue looking after their loved ones at home, which is by far the best situation, both from a family and from a government point of view because it certainly helps to save money in resources, they do need help in the areas or respite and day programming services that can assist them in the pressures they are experiencing in caring for their loved ones, but also I think it’s a quality of life situation for these people.

I know that in organizations here in Yellowknife such as the seniors’ organizations, the Yellowknife Health and Social Services Authority, which has been delivering some of these. I believe the Yellowknife Association for Community Living is involved in a respite program. We have the skill and the wherewithal to help with this, but the dollars and the resources aren’t there yet, Madam Chair. So I wanted to ask the Minister what are the resources or the availability of putting this kind of thing together and helping to make a difference and make a difference soon for these families, Madam Chair?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Under forced growth, we have about $145,000 added in for home care and palliative care programs for Yellowknife Health and Social Services, and then another $200,000 as a new initiative to establish firmly the respite services and for the year following, we are going to put in money to expand that program outside of Yellowknife to the communities. That figure is about $400,000.

In terms of day programming, I anticipate that authorities will be coming forward with that request through the business planning process and we would contemplate it at that time. At present, this is what we have in the budget for 2006-07. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. Okay. This is good news. Can the department give me any idea how many extra hours of service or person years this will make a difference? Are we increasing our capacity by half or whatever ratio, Madam Chair? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, I would have to ask the Member to be a bit more specific. Is he talking about our capacity under respite care, what the money will do?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. I heard $145,000 in forced growth to the health authority here for home care and $200,000 more for respite care. So, Madam Chair, this is not the place to get into an extreme level of detail, but is this going to double or triple, or what’s the increment that we are increasing our funding here? Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. This will allow us to add two full-time positions which would bring the staffing complement from 19 to 21. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. The proposal, I believe I heard, in the business plan is another $400,000, but this would be in a subsequent year to enable expanding the service into the communities. Okay. Madam Chair, that’s all for now. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Next I have Mr. Hawkins.

**MR. HAWKINS:** Thank you, Madam Chair. On page 6-36 under the heading health promotions, provides resources and professional assistance to community-based programs, et cetera. Could the Minister give me a breakout of what that actually means specifically?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Hawkins. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Madam Chair, I was flipping back and, through the rattling of the pages, I missed the…On 6-36, which bullet?

**CHAIRPERSON (Mrs. Groenewegen):** Mr. Miltenberger, page 6-36, last bullet. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. I will ask Mr. St. Germaine to speak to that.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Madam Chair. Under health promotion, there is a combination of things going on there. A portion of it is to fund three positions in the department that undertake various health promotion activities including things like Don’t Be a Butthead campaign.

Under grants and contributions, we provide $754,000 to the authorities for health promotion activities at the authority level. There is also $50,000 in there for seniors’ games. There is an additional $250,000 for community development activities and a mass media campaign. There is an additional $160,000 for health promotion contributions to community groups. There is early childhood development funding of $179,000.

Under other expenses, there is money there for CHR training, tobacco reduction initiatives, health pregnancies initiative and, again, early childhood development funding. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. St. Germaine. Mr. Hawkins.

**MR. HAWKINS:** Thank you, Madam Chair. No, the assistant deputy…The director of finance, sorry. The director of finance got the areas I was concerned about. I just wanted to hear under health promotions that we would be giving $50,000 for the seniors’ game. That’s the type of detail I was looking for. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Hawkins. Ms. Lee.

**MS. LEE:** Thank you, Madam Chair. I just want to speak again, and just briefly, in support of the dementia centre that the other Members were waiving earlier. I am not sure if this area was covered, but I am well aware, as the Minister is, that he has been working diligently on this file, but we are not going to have the facility as quickly as we need to have it for those who are in need of care, residential care. This is not a new phenomenon. It’s just that a lot of elders who suffer from the condition of dementia have had to be housed in medical centres and hospitals. We are just coming to awareness of the necessity of putting them in care designed for their specific needs, which is quite different than the other long-term care conditions.

Having said that, it seems that while we are waiting for this facility to be built, there is support for and a need for a day care program for those families who are taking care of the elderly at home. I think these families are taking care of the elderly for reasons that they want to take care of their elderly as long as possible, and they want to provide them a place and care as long as possible and as long as they are able to and avoid them from being housed in a medical facility.

They are doing it for their own reasons, but they are also contributing to the public process because government services would be more overburdened if it weren’t for the fact that a lot of families are choosing to take care of their own elderly. So there is a partnership relationship that could happen here. This dementia facility is going to be the first one in the Territories and the hope is that this will also happen in other communities. But while we are waiting, I think the government should really look into a day care program to just give some relief to families who are having to take care of their family members 24 hours a day, seven days a week.

I know there are lots of people who have people who need 24 hour care, people of all ages. I know the Minister is meeting some of those needs by having this respite care program, and I am grateful that the Minister is extending that and he’s supportive of that. There are dozens of families in Yellowknife whose family members are taking care of their dementia elderly. I would like to know if the Minister has reviewed the possibility of creating a day care program for the families who are taking care of the dementia elderly and see if it is at all possible to look into that, whether it’s at all feasible. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Lee. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, we have been focussing our attention to get the basic issue of social respite up and running on a pilot basis in Yellowknife. The issue of day programs clearly are possible and, like many of the other things we have on our list, it would be dependent on the resources. At this point, we have put the resources we have in this area into the two areas I have touched on, that of the respite care and then some additional assistance for home care and palliative care. We anticipate that the need for day programs will be identified when the authorities come through the business planning process and identify either forced growth or new initiatives that they are making the case for. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Ms. Lee.

**MS. LEE:** Thank you, Madam Chair. I know this is an area that is not unique to the North. This is an issue that is front and centre across the country as we face an aging population. There is a lot of work being done in this area. I would like to know from the Minister whether any discussions he’s having with federal counterparts have any possibilities of accessing some funds to provide resources and assistance to those families who are choosing to take care of their elderly at home. I seem to recall some talk there from various parties in the last election about looking into something like this. Is there anything on the horizon that we could tap into from the federal government that could make it easier for this Minister to look into this program to see how it could become a reality sooner than later? Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Lee. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. We’ve identified through the federal funding that we’ve had access to the funds to cover off the million dollars that we’ve put towards the dementia facility. We are still waiting to see what the federal government’s position is going to be on all these prior commitments, some that they’ve agreed to honour: the territorial health access fund and the $42 billion 10-year plan is going to get honoured, but any other funding…At this point, the federal funding we do have access to has been fully allocated and we are waiting to see what the agenda is and what the priorities are for the new Conservative government. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Ms. Lee.

**MS. LEE:** Thank you, Madam Chair. Turning the question around, could I ask the Minister whether this is on his list of asks, as the popular saying goes, to his federal counterpart as something we need to look into in the North as we also face an aging population and we are working to keep people out of the medical centres as much as possible? There will be more and more need to take care of seniors and others who either through palliative care, home care or respite care whose interest it will be for the government to keep them out of the medical centres as much as possible with a little bit of help for the family. Could I ask the Minister whether this is on his agenda to push the federal government for a national program and national funding to help us out? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Lee. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. This issue is on our agenda and, as well, it’s on the national agenda at the FPT table. The question yet to be determined is what is the priority and where does it fit on the Conservative government’s agenda. The PT table is clear. We’ve mapped out a course of initiatives over the last number of years. We are just waiting to meet, hopefully as early as next week, with Minister Clement to get a sense of what the federal government is going to be saying. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Ms. Lee.

**MS. LEE:** Thank you, Madam Chair. I think I am going to ask the Minister to have this on the list for further discussion. I hope to see something in the business plan section for day care for the elderly with dementia or some other condition. I think we need to look at the home care, respite care, palliative care and the whole program to see what we want to get done, what we can do, and just to enhance and refine the programs. Hopefully, the Minister can find more resources for that area. Hopefully, he can get some success out of the federal government from his meetings, so definitely on the to-do list for all of us. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Lee. That was a comment. I didn’t hear a question there. Next on the list I have Mr. Menicoche.

**MR. MENICOCHE:** Thank you, Madam Chair. Just with respect to respite care, I have been dealing with it with the Minister on trying to expand it to the communities. Once again, having a good, hard look at it and providing some innovative solutions to help the families take care of their loved ones in the smaller communities. There has to be a way of doing it, either bringing in a nurse or training local people who want to get in that field. How much more thought has the Minister given with respect to that? Thanks.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. We’ve identified funds for 2007-08. We’ve gotten the issue of respite care off the pilot list funded as a program. We are going to do it in Yellowknife again this year on an ongoing basis, and then we are going to advance it to other communities. As well, we are continuing to work in advancing home care and home support in the communities. We’ve made some investments in training of home support workers at the college and by 2008-09, it will be up to $600,000 for respite care. So we see this as a clear need that goes beyond medical respite, the whole area of social respite that the Member is talking about. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Menicoche.

**MR. MENICOCHE:** Thank you, Madam Chair. With respect to another line item in this activity, it’s just with regard to emergency shelters and counselling services. I noticed that quite often, once again, we have to send people out for safety first, protection and then some counselling. I see the authorities delegate to the health and social services authorities. How much is dedicated to regional centres if there is any at all? Is the ministry also looking at establishing regional centres? There are teen shelters as well -- that’s another big concern -- and emergency shelters. I know that they have them here, but are they looking at expanding to the regions; Inuvik, Fort Simpson, et cetera? Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. We currently fund five shelters: one in Fort Smith, one in Hay River, one in Inuvik, one in Tuktoyaktuk, and one in Yellowknife. As well, we have access to the homeless money that we’ve been getting on a winter-by-winter basis that allows us some capacity to give additional bids; Salvation Army, as well as Turning Point. We’ve been working to assist SideDoor in Yellowknife for the youth to have accommodation issues over the night. The homelessness funding, as well, allows smaller communities to be able to access the money on a case-by-case basis for circumstances where people are without any warm place to stay over the course of the winter on an emergency basis. Those are the facilities that we currently have funding for. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Menicoche.

**MR. MENICOCHE:** Thank you, Madam Chair. Also, just with respect to treatment and rehabilitation services for addictions and mental health, I know that often we get lots of pressure for keeping the treatment programs in the North because we support and we’ve established them, but even though they are there, myself, as an MLA, I’m still supportive of getting some of our constituents and clients out to southern institutions only because the one or two treatment centres that we do have, some clients have been there three or four times. Is it going to work for a fifth time? Quite often, like many treatment programs, there are different alternatives again. So just providing that window of opportunity for clients to try out other facilities, even if it’s outside of our territory. I have no problem supporting that at all, especially if it’s going to work that fifth time. We don’t know unless they get out there and try some other programs. I, personally, have seen some success because people ended up in treatment centres down south. I am just wondering about even our local programs. I don’t know if I really want to ask the question about success rates and that kind of stuff. I really won’t bother, Madam Chair.

Perhaps the Minister can just indicate to me how much flexibility there is in the department in allowing people that extra avenue of going down to southern treatment centres. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Nats’ Ejee K’eh has a similar process or policy that Stanton does. We check with Nats’ Ejee K’eh to see if there is capacity to have this service provided and if it can be provided there, it makes good treatment sense to do that, then that’s where we would expect an individual to go. We recognize that there is a limited range of programming that Nats’ Ejee K’eh can provide at any given time. So we do have a selection of other facilities down south, as the Member has referenced, that we make use on a regular basis depending on the circumstance and the particular client need. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Menicoche.

**MR. MENICOCHE:** Thank you, Madam Chair. I am satisfied with the answers. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Activity summary, community health programs, operations expenditure summary, $65.487 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Page 6-39, activity summary, community health programs, grants and contributions, contributions, and over onto page 6-40, grants and contributions $50,304…I’m sorry. It’s $50.304 million. Mr. Braden.

**MR. BRADEN:** Madam Chair, something that came up very consistently in the pre-budget consultation was a call from various boards and agencies and non-government organizations that deliver services and that we contract, to become more innovative and, I think, more businesslike and more efficient, especially in the area of multi-year or longer-term contracting and commitment to these organizations. So in respect of that observation, Madam Chair, which I think applies across all departments of our government, but perhaps this one more than others because we do rely so extensively on NGOs and similar organizations, I wanted to ask the Minister if he sees areas or room for taking this advice and applying it in the department. Is it already doing some or taking any measures at all to satisfy this need? How is this department measuring up, I guess, Madam Chair, in that call for multi-year contracts with our NGOs? Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. We do use multi-year contracts to some degree, and I’ve committed in this House that we will expand the usage and will work with the authorities and the department to make sure that, to the maximum extent possible, we have that in place for the coming year. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thanks, Madam Chair. I’ll just see if we can take this perhaps a step further. Are the folks who sign these agreements and negotiate these agreements, are they under, say, an instruction or direction to actively look for multi-year agreement opportunities, or is it something that is entertained only if the department is asked? Where I want to go here is to see if we are really trying to make this work with our partners and with these organizations in the field, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, this is an issue, a long-outstanding issue, that goes back well beyond division even in 1999. The issue of multi-year funding has been something that’s been sought by NGOs for a long period of time. So it’s being communicated to folks that we have the capacity to do that and that we intend to make use of that capacity, keeping in mind that the NGOs still have to account for their funding on a yearly basis as well, just as we do, to the Legislature and that the Legislature, as in all cases, has the final say on budgets and it’s always dependent on the total budget being passed by this Legislature. But the capacity to commit to NGOs that funding will be there is one that we will commit to make better and greater use of. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Yes, thanks, Madam Chair. I get the sense that this is something that the department does want to pursue, where possible, and I would certainly advocate, along with the Minister, that any kind of multi-year arrangement has to have criteria monitoring capacity in it to make sure that we’re continuing to get value and that it’s a good relationship. Thanks, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Community health programs, grants and contributions, contributions, total contributions, $50.304 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Agreed. Thank you. Page 6-42 and 43, community health programs, active positions, information item.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** No questions. Agreed. Thank you. Page 6-44, 45, 46 and 47, information item, work performed on behalf of others, $15.855 million. Mr. Braden.

**MR. BRADEN:** Madam Chair, on page 6-44, the area of non-insured health benefits is detailed a little bit there. It relates, perhaps, to a discussion we had earlier this afternoon about covering off health care benefits for First Nations and Metis programs. This one also covers Inuit residents not covered under hospital or medical care programs. The amount of money that is booked here, Madam Chair, for the coming fiscal year is the same for the current fiscal year. I was wondering if there was any kind of an escalator clause or some kind of built-in inflationary aspect to this agreement with Health Canada, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Murray.

**MR. MURRAY:** Thank you, Madam Chair. There is no automatic built-in escalator. Over the last couple of years, we’ve been very successful, though, in working with Health Canada, First Nations and Inuit branch, in terms of increasing the amount of funding. For a number of years it had arbitrarily held low, and working with them, through a number of review processes, Health Canada has increased the funding. We don’t get an inflationary escalator, but they are in town this week and we are in the middle of discussions on the next year’s agreement.

**CHAIRPERSON (Mrs. Groenewegen):** Mr. Murray.

**MR. MURRAY:** I was just going to add, and rest assured we are talking about the costs, the increases in costs and things like that.

**CHAIRPERSON (Mrs. Groenewegen):** Mr. Murray adds, and multi-year funding. Mr. Braden.

**MR. BRADEN:** Well, great, if these folks are in town from Health Canada, then we’ll keep them busy. Madam Chair, you know, with these kinds of things, we know they’re going to be in place for a long time; we know the environment we’re operating in is one of steady and sustained increases. So trying to cut an escalator in there so that we don’t have to go back and revisit these things over and over just makes good business sense, at least from our point of view. Will an escalator and a clause on a multi-year deal be something that is actively being negotiated, Madam Chair?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Madam Chair, getting that kind of certainty and recognition of our ongoing costs are two very critical criteria for us. I would point out, as well, that there are other jurisdictions that have refused to administer these programs, and the federal government is left with the responsibility of setting up the infrastructure to administer this program on their own, and deal with all the costs and aggravation that the program entails. It’s not a step that we’re recommending be taken at this point, but that is an option for us should we reach a point where these programs are unaffordable to us. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Work performed on behalf of others, $15.855 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Agreed. Thank you. Back, then, in your books to page 6-7, Health and Social Services, department summary, operations expenditure summary, $265.186 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Agreed. Thank you. If you could please just turn in your books to capital, page 5-7, Health and Social Services, infrastructure acquisition plan, health services programs, tangible capital assets, total tangible capital assets, $9.301 million, total activity, $9.301 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Mr. Braden.

**MR. BRADEN:** Madam Chair, this page details a little bit of information about some infrastructure investment going into the Rockhill Apartment here in Yellowknife. I believe that’s the building that we own and lease to the YWCA for a variety of their program delivery. I’m curious about what is the nature of the improvement going in there for $250,000 that’s booked for not this current year, Madam Chair, but for the fiscal years two years out. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Madam Chair. The figure we have in there is based upon a preliminary technical status evaluation done by Public Works and Services. It identifies potential areas for work, including siding, hot water piping, door replacements, code upgrading, apartment fixtures, and work in the parking lot. We have done, or Public Works has done, over the last number of years, some upgrades such as shingles, the heating system, some of the skirting, structural repairs to the stairwells, and some patio door refurbishment. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. St. Germaine. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. To another area of infrastructure investment, we had heard over the last year or so, at least the last year or so, of work that was going on in Stanton Territorial Hospital. Madam Chair, this facility is now, I think, in the neighbourhood of 25 years old and some aspects of the mechanicals and the technical side are due for an up fit. There was also considerable discussion about some modifications to adapt the hospital, Madam Chair, to some new practices in day programming and things like this. But I don’t know if I see, or I don’t see where this might be detailed in here and I’m wondering if the Minister could outline what kind of infrastructure investment are we making in the Stanton hospital redesign, Madam Chair?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. This project, the master development plan, is yet to be finalized because of the work that was done on it, as I indicated earlier in this House. The general facilities review that was undertaken to look at all the hospitals and the acute care beds and the type of services that each facility would provide, combining that, as well, in relation to Stanton was the issue of the consolidated clinics in the downtown core, which we were wanting to make sure fit into the services provided by Stanton and which we think, if done right, will take a big burden off the emergency ward or emergency services out of Stanton. So that work is currently being finalized and at that point we’ll be able to finalize the master development plan and be able to lay out in detail some of the things that we want to do. But very clearly, the medical day care and services that are currently crammed into two or three very small rooms we’re going to look at expanding because it’s undersized.

Some of the other things we want to look at, as well, is when you look at Stanton and there’s a significant amount of administrative office space in that building -- and hospital space is probably the most expensive per square foot service in the world -- that it may make sense, if we require the space for medical services, to have our administration somewhere that’s not tying up within the hospital envelope. So those are the type of things that we’re going to be finalizing over the next number of months. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** So, Madam Chair, the Stanton master plan is on hold, or delayed, or deferred. What kind of timing are we behind? A year behind, a couple years behind, Madam Chair?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. We anticipate working towards having the master development plan finalized for Stanton, as well as for Fort Smith, as well as for, we’ll see with Hay River how the assessment turns out, whether it’s renovation versus new. It’s also presumed, then, that the Stanton master development plan will also be able to be related and tied to the consolidated clinic initiative. The two have to fit.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Mr. Braden.

**MR. BRADEN:** Thank you, Madam Chair. The budget document outlines a number of specific expenditures for territorial and Stanton investment. Quite a bit of equipment, for instance, over the next three years. There’s, I guess by a very rough count here, somewhere in the neighbourhood of between 30 and 35 million dollars booked for Stanton over the next three years, Madam Chair. Is this amount of money booked to take into consideration the kinds of changes and renovations that are anticipated, or should we anticipate that perhaps these numbers will change up or down, Madam Chair?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. At this point I’ve never seen in my 10 years, going on 11 years now, I’ve never seen numbers go down. These are estimates that are planning estimates that we’re working on, and as we flesh out the detail more and more, and we consider the environment that we’re operating in, which is a very heated economy with costs of everything being high and going higher, I would anticipate that some of these figures may move. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Next on the list I’ve got Mr. Villeneuve.

**MR. VILLENEUVE:** Thank you, Mr. Chairman. I just have a couple quick questions on the Stanton hospital spending on, in particular, the dialysis machine, the $60,000 for 2006-07, and dialysis equipment for Hay River of $180,000, 2006-07. Maybe the Minister can tell me, what is the cost of a dialysis machine these days?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Villeneuve. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Mr. Chairman, thank you. With all the water purification equipment, the whole complete unit is in the neighbourhood of $60,000 per complete unit. Then you need, for example in Hay River, you can’t just have one. You have to have at least two, depending on the number of patients you have, or as many as three. You always have to have one as backup in case something goes wrong. So that’s the requirement. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Villeneuve.

**MR. VILLENEUVE:** Thank you. Thank you, Mr. Chairman. Okay. My next question, I guess. We’re talking $60,000 range, so you need two, $120,000. How many dialysis machines do we have now in the NWT?

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Villeneuve. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Just counting roughly off what I know, we have in Fort Smith and Yellowknife it’s probably around nine or 10. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Villeneuve.

**MR. VILLENEUVE:** Thank you, Mr. Chairman. Okay, just, if we've got nine or 10 dialysis machines we have more on the books here, which is good. My next question is, why are they all here or in Fort Smith? Why don’t we have dialysis machines out in the small, remote centres, like in the valley communities, Fort Simpson, Norman Wells, even Hay River? Because I know when I visit the hospital I see people there that are from these communities, or close to them, that are just here because they have to be on dialysis machines. But I don’t see any point in people even coming here and being on dialysis machines if they’re withering away, they’re homesick, they’re slowly dying, they’re mind is slowly just fading away, and yet we’re keeping him alive by saying, well, they’ve got to stay here because we have dialysis machines. I think we should put more out in the smaller communities, train people to use them. Whether it’s putting them on the books, I don’t think $60,000 is an exorbitant amount of money, especially if we’ve got territorial Stanton hospital in the likes of $27.7 million in the next four years. You can buy a lot of dialysis machines with that and do a lot of training. Is there consideration for, you know…I don’t see any of these smaller communities on this capital assets list that have dialysis machines listed. Why is that? Is it all going to be here all the time? Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Villeneuve. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Our expansion of our Dialysis Program has been based on the need that is coming more and more evident everyday. The reason it started in Fort Smith is that we had some patients from Fort Smith that were coming up here; the very scenario that the Member laid out. We now know that there are patients in Hay River. We’ve been planning for that and there’s money in the budget to set up dialysis there, as well. Next on our list, once that is complete, because we know there’s a real demand, is into Fort Simpson, the other regional centre. We know that it’s only a matter of time until we’re going to be in other larger centres, probably Norman Wells and Inuvik, when the need presents itself. It’s a program that requires some complexity of care. It’s taken a lot of work just to get Capital Health and Stanton to work with Fort Smith to figure out the protocols, and procedures, and all the complexities of having the program delivered and train the staff to do that. Now that we’ve done that, it’s going to be easier to set it up in Hay River, and then we’ll be moving on to Simpson. These are going to be in the larger centres. There is another type of dialysis, home dialysis, that can also be used in much more remote communities, but that, as well, depends on the patient and depends on the type of medical requirement, but that is possible. Our focus has been on the dialysis that we can deliver out of the existing health centres outside of Yellowknife. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Anything further, Mr. Villeneuve?

**MR. VILLENEUVE:** Yes. Thank you, Mr. Chairman. I guess, just about the whole Dialysis Program. I know in the next five years there will probably be a larger demand for dialysis equipment and home dialysis units. So in this Dialysis Program, are we planning to wait until that need really kicks us in the side, or are we going to start training and start getting those things there so that they are there and they’re ready to go when the need arises, instead of waiting for the need to present itself and then reacting to it? Is there a more proactive approach that maybe the health department can consider with respect to just the individual home dialysis units, and the training, and the protocol and everything, so all that can be put aside and when the need arises we can react within the year instead of waiting for maybe four or five years to react to the need? Is there any thought put into that process? Thanks.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Villeneuve. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. We believe that we are being proactive. We made the first step outside of Yellowknife to Fort Smith. We have a need now in Hay River. We’re going to be doing that. Next year it’s going to be into Fort Simpson. So we do have a plan. We do now have protocols and procedures. We have to train the staff. We need to do some renovations to make sure that the water supplies are adequate. They have to meet a very clear standard. We recognize that the Yellowknife facility itself is also running flat out and is full almost to capacity. The Member is correct that we are just beginning to see the beginning of the need for this program, and we’re planning, clearly, to move up the valley, which is the way it seems to be going. We’re slowly moving north to anticipate the need and to get ready. All the redesigns, for example in Hay River, are going to accommodate whatever changes have to take place, as well in Fort Simpson. So, Mr. Chairman, if I could, I’d ask the deputy to speak a bit on the issue of the renal sufficiency program and give a bit more detail speaks to this issue. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Murray.

**MR. MURRAY:** Thank you, Mr. Chairman. There is a program, a renal sufficiency program, and that program works with potential clients for dialysis that allows us to plan for when those individuals may or may not require dialysis. They go through a number of steps as the illness progresses, and that’s one of the ways we’re able to start better planning for the future need, is by looking at the individuals that are in that program. That will allow us to get, if you will, caught up or even a bit ahead of where the future demand may be. I would say that most of the major demand is in the south here, but over time it’s going to be spreading north in the territory, as well.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Murray. Mr. Villeneuve.

**MR. VILLENEUVE:** Thank you, Mr. Chairman. Thank you, Mr. Murray. That’s good that the renal program is on the way and that they’re doing some preliminary planning. But just with respect to what the Minister had indicated a couple of minutes ago about Hay River being the next place where they’re going to equip the hospital with the training and such and then Fort Simpson on the books. So are we looking at 2010 or future years for Fort Simpson? Because I just don’t see it on the capital plan here, so I’m just kind of wondering if I missed out on something, or is that something that we’re going to have deal with after this budget is dealt with? Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Villeneuve. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chairman, this is going to be built into the business plan, the one that we’re going to be doing in June, to take a first look at and we’ll lay out the future years there, as well. But I mean, Hay River this year, Fort Simpson next year. It will be in the business plan. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Miltenberger. Mr. Yakeleya.

**MR. YAKELEYA:** The item here on equipment over 50,000 shortfall. Can the Minister just give me a brief outline as to the type of equipment that we’re talking about that’s indicated here? Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Mr. Chairman. For next year the major capital equipment that’s slated for replacement includes clinic analyzers in Stanton and Hay River hospitals, coagulation analyzer again for Stanton, microscopes at the Inuvik Regional Hospital, fume hoods for the labs in Stanton as well as Inuvik, microbiological systems again for the lab in Stanton, and haematology analyzers for the lab in Stanton. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. St. Germaine. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. Where does the basic equipment fall within this category, or is there a different category for the communities that don’t have basic equipment in their health centres? Again, I’m going to remind the Minister in terms of do not have a heart attack in the Sahtu region because there’s no defibrillators there, IV pumps, cardiac monitors. This type of basic equipment that do not fall in this category, they don’t have them in the Sahtu region, even stretchers, basic stretchers. They have various different kinds, but not the ones that we could use. So I want to ask the Minister, Mr. Chairman, in terms of basic equipment that the smaller outlying communities are lacking, where does that fall in terms of these major capital expenditures? Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Some of the equipment listed by the Member is fairly basic equipment that, in our opinion, should be there, and if it isn’t, we will have to make sure that it is. I will ask Mr. St. Germaine to speak a bit more about the small capital and how that’s built, where it’s covered and referenced.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Mr. Chairman. It’s small capital…It’s O and M items. They come out of our O and M budget. We have approximately $1.5 million budgeted for that item. We allocate $250,000 to the authorities to distribute it among the authorities to meet their pressing equipment needs. We are also in the process of purchasing the biomedical equipment and purchasing in excess of $1 million a year on behalf of all the authorities. The other items of equipment in the health centres, stretchers and so on, are part of the O and M responsibilities of the authorities. They should be ensuring that their health centres are adequately provisioned with those pieces of equipment. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. St. Germaine. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. Thank you, Mr. St. Germaine. I am not too sure how the funding is distributed amongst the authorities in terms of purchasing equipment. It should be a standard at least. Health centres have the equipment. Right now, they don’t have the basic medical equipment for cardiac patients in the region. I don’t know if priority is not given to them, or they just lack the funding, or the inventory is not kept up to date. Basic stretchers in the community…They have these boards, I don’t know if they call them stretchers, but they don’t have them in some of our centres. Are our own authorities not getting on with the programs in terms of basic equipment or the health department or just not enough money to go through the various different boards to purchase them. I am encouraged by Mr. St. Germaine saying about bulk purchasing of equipment and other things, but there is something out of whack here that we just don’t have cardiac monitors in the Sahtu, or IV pumps. Bad weather sometimes doesn’t allow emergency planes to land. It’s a good thing we have these nurses who are trained in these emergency situations, and we put them in some pretty hairy situations.

I appreciate what the Minister is saying. I appreciate what the staff is saying in terms of purchasing. I think that some basic things need to be put in our community. I am not too sure how that gets sorted out, Mr. Minister. I understand what you are saying, I just don’t know where the gap is in communication. There are dollars, but I don’t know if they are being spent in the right area. I want to let the Minister know the nurses in the communities are doing a wonderful job with the resources they have. Sometimes they are asking for something that doesn’t seem to get to the authorities or powers that be to say we need cardiac monitors, we need IV pumps, we need defibrillators, we need some decent stretchers to help us with our job. That must be a challenge for the Minister to work with the boards. I believe that’s something that can be and should be an automatic medical standard in our communities, Mr. Chair. I want to leave it at that and see if the Minister will make some comments to see how we can improve our situation. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Murray.

**MR. MURRAY:** Thank you, Mr. Chairman. Back in 2002 and 2003, we worked with the authorities to come up with an emergency equipment list for the various authorities based on the technology and what was available at that point in time. Items such as stretchers were definitely on the list. Every nursing station has to have the proper kind of stretchers and backboards and those types of things. What we can do is have our committee, that is made up of not just staff but also of providers, review the list again and come back to us and let us know if there are items on the list that should be updated. That would not take long to do.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Murray. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. Thank you, Mr. Murray. I understand being in the Sahtu, there was a list of wants, I guess, going around the region of what they wanted in their communities. I appreciate that they would go back and ask them to update their list again in terms of what they feel is a priority. I want to ask, Mr. Chairman, is there a set of basic, standard equipment in all health centres? You look at Colville Lake. You look at the poor dentist chair. I don’t know which Minister came with me and sat in that dentist chair and it was upside down. It was a second-hand dentist chair from Inuvik hospital. Colville Lake still had Medieval times equipment in terms of their equipment. It was a crying shame, I was saying today…

**SOME HON. MEMBERS:** Crying shame!

**MR. YAKELEYA:** …that we have equipment that is still in our health centres. I want to ask the Minister, is there a standard list of equipment that is in each of the medical centres? Stretchers, for sure; cardiac monitors, things that the other regions, other hospitals, take for granted. That’s what I am getting at. I am not too sure if the funding would allow for it, but is there funding that says here is a flat fee and, no matter what, you are getting some basic supplies and then add on as you need them? I don’t know if that makes sense, but that’s just something I want to pass on to the Minister in terms of the equipment into our smaller centres to help them. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. The Member also put a written question on the floor that he asked very similar information on and we are in the process of gathering that. In that letter, we will lay out the work this committee has done in terms of the basic standard equipment that the professionals think should be there. It will lay out in detail what that is and we will be getting that information to the Member. I appreciate his concern. As well, of course, before we go for a tour in the Sahtu, we would like to make sure we have some of these basic issues in hand. Thank you.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Minister Miltenberger. Next on the list I have Mr. Pokiak.

**MR. POKIAK:** Thank you, Mr. Chairman. Just to follow in line with my colleague, Mr. Yakeleya, I am still not clear if the department has a standard list. Earlier, the Minister indicated that 1.5 is submitted for operations and maintenance. For example…(inaudible)…How would the health centres in the small communities access this fund? Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Pokiak. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. The way this funding is accessed is through the collaborative approach where the communities in the region work with their authorities to the pull together their lists. They should be monitoring the supplies that are there. The folks who have been involved in setting up this basic list that Mr. Murray referenced are all from the authorities, as well as headquarters. So there should be, on a yearly basis, those kinds of lists monitored and updated. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. Mr. Pokiak.

**MR. POKIAK:** Thank you, Mr. Chairman. I am glad that Mr. Yakeleya brought it up because when I was in Sachs earlier in January, when I was visiting the health centre there, apparently they were short of quite a bit of minor, small equipment for the health centre there. It’s just something that I hope the Inuvik Regional Health and Social Services can work with the smaller communities to make sure they get the right…If they request more towels for just general hygiene stuff, they can access it under this fund. Maybe I will pursue it further, but with that, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Pokiak. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Mr. Chairman. Mr. Chair, what I can commit to do, and report back to the Social Programs committee, is, we will ask the authorities to provide us with a list of the communities and the status of their basic equipment that should be there to ensure that we have some current information that I can share with the committee through the chair, Ms. Lee. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Miltenberger. We are on page 5-7 of the CAP, infrastructure acquisition plan, Health and Social Services, health services programs, tangible capital assets, total capital assets, $9.301 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Total activity, $9.301 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Thank you. Does committee agree that consideration of the Department of Health and Social Services…Sorry, committee. We will go back to 5-9. We will go back to the start. Page 5-9, infrastructure acquisition plan, community health programs, tangible capital assets, total tangible capital assets, $3.8 million. Mr. Braden.

**MR. BRADEN:** Thank you, Mr. Chairman. The information page before us shows that $505,000 was committed in prior years to the Territorial Treatment Centre in Hay River. I would like to ask what that expenditure was used for, Mr. Chair.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Mr. Chairman. The funding has been used for the planning and design work for the Dene Konia facility.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. St. Germaine. Mr. Braden.

**MR. BRADEN:** Thank you, Mr. Chairman. I also have information, not on this page, that another $125,000 has been committed to the TTC in Hay River this current year. What was that $125,000 committed for, Mr. Chair?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Mr. Chairman. That was a residual from the TTC project from Yellowknife for site remediation. There was money in the overall budget for any contamination and so on that may be found on site. So that money is expected to lapse this year because we are not in a position to actually be doing that work this current fiscal year. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. St. Germaine. Anything further, Mr. Braden?

**MR. BRADEN:** Mr. Chairman, $2.595 million is booked for the TTC expenditure in Hay River. When may we anticipate that there will be tenders called and we will have a chance to look at how accurate our forecasting is on this project, Mr. Chair?

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. St. Germaine.

**MR. ST. GERMAINE:** Thank you, Mr. Chairman. We expect to have the detailed design done and be able to tender that sometime during the summer. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. St. Germaine. Anything further, Mr. Braden?

**MR. BRADEN:** No, that’s all, Mr. Chair.

**CHAIRMAN (Mr. Ramsay):** Thank you, committee. Thank you, Mr. Braden. We are on page 5-9, infrastructure acquisition plan, community health programs, tangible capital assets, total tangible capital assets, $3.8 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Total activity, $3.8 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Total department, $13.101 million.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Does committee agree that the consideration of the Department of Health and Social Services main estimates is concluded?

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Ramsay):** Thank you, committee. I would like to thank you, Minister Miltenberger, Mr. St. Germaine and Mr. Murray, for being with us this afternoon. Thank you.

At this time, judging the clock, what is the wish of committee? Mr. Menicoche.

**MR. MENICOCHE:** Justice.

**CHAIRMAN (Mr. Ramsay):** Thank you, committee. We will just give the folks a few minutes to clear up and we will proceed with Justice.

Thank you, committee. We will now ask the Minister responsible for the Department of Justice to provide his opening comments on his department’s estimates. Mr. Bell.

**HON. BRENDAN BELL:** Thank you, Mr. Chairman. I am pleased to present the Department of Justice’s main estimates for the fiscal year 2006-07.

The main estimates propose an operations and maintenance budget of $83.8 million and an infrastructure investment plan of $4 million. The operations and maintenance budget is an increase of five percent over the 2005-06 Main Estimates.

The increase is largely due to additional costs of policing in communities, the corrections services human resource action plan and the Collective Agreement. There has also been a reduction of $1.5 million due to the human resource amalgamation and over $800,000 in mandated reductions.

The department has six main areas of activity:

* Services to government: The department is, in effect, the government’s law firm. Staff lawyers draft legislation and provide legal advice to all GNWT departments. The department also works with communities and other departments to respond to family violence, improve supports to families in conflict, and prepare for the impacts of resource development; $8.6 million is budgeted for services to government.
* Law enforcement: Policing services are contracted to the RCMP. This year, six new RCMP positions will be created. This is in addition to the 22 positions that were added to communities in the past three years and $25 million has been budgeted for law enforcement activities.
* Legal aid services: The Legal Services Board ensures that all eligible NWT residents receive legal services. There are three clinics. The Yellowknife and Inuvik clinics provide criminal and family law services. A new Family Law Clinic was opened in Yellowknife last year. Lawyers provide legal services to eligible people in all NWT communities at no cost. The Legal Services Board provides public legal education and is responsible for the Court Worker Program in Northwest Territories communities. The department has budgeted more than $4 million for legal aid, which includes contributions from the federal government.
* Courts: The department also operates the NWT courts. The total budget of $8.56 million includes money for the Justice of the Peace Court Program, Territorial Court, the Supreme Court, and the Court of Appeal, along with the court registries, libraries and reporters.
* Community Justice and Corrections: The department has budgeted $34 million for adult and young offender facilities, probation, wilderness camps, and cultural programs to support the rehabilitation of offenders. This money also funds programs aimed at preventing crime within communities through increased community participation, that supports victims’ initiatives and supports community justice needs.
* Services to the public: Just over $3 million is budgeted for services to the public that includes funding for the coroner’s office, the public trustee, the rental office, legal registries and the Maintenance Enforcement Program.

For the past several years, there have been new pressures placed on the NWT courts. Outside of Yellowknife, this has meant longer court circuits and more jury trials in communities. In 2005, the Supreme Court had 113 sitting days in communities outside Yellowknife and that’s more than three times the number of days the court sat in communities the previous year.

This increase in court activity is also being experienced in Yellowknife, where courtroom usage has increased steadily and scheduled court appearances have doubled in the last five years.

Although the department has made good progress in implementing the corrections human resource action plan, there still is a lot of work to do. The main estimates include proposed new funding of $1.4 million to support training and staffing levels. This will make NWT correctional centres safer and support programs for inmates.

Those are the key points of the 2006-07 Department of Justice main estimates. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Minister Bell, for your department’s comments. I would now like to turn to Mr. Yakeleya to provide the Standing Committee on Social Programs opening comments. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chairman. I have committee members reading portions of our report. I will start off with Mr. Braden and then Mr. McLeod, followed by Mr. Jackson Lafferty and Mr. Calvin Pokiak. I will turn it over to Mr. Braden.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Yakeleya. Mr. Braden.

**Introduction**

**MR. BRADEN:** Thank you, Mr. Chairman. Members of the Standing Committee on Social Programs as Members of the Accountability and Oversight committee were involved in the new pre-budget consultation process with the people of the Northwest Territories in late August of 2005. Hearings were held north and south of the lake and gave ordinary northerners and non-governmental organizations the opportunity to provide input to MLAs on the priorities that the budget should focus on.

The committee then met with the Minister and his officials on Monday, September 22, 2005, to review the draft business plan of the Department of Justice.

Members also received a briefing from the Minister of Finance on January 19, 2006, outlining the changes to the budget of the Department of Justice since the committee reviewed the business plan in September.

The committee noted expenditures of $83.800 million for operations expense and $4.029 million to be spent on capital projects.

Committee members offer the following comments on issues arising out of the review of the 2006-2007 Draft Main Estimates and budget planning cycle.

**Pre-Budget Consultations**

As we referred to it a moment ago, Mr. Chairman, under pre-budget consultations committee members took note of the following issues that were mentioned in a majority of the communities we visited: more support for local justice committees; resources for on-the-land programs for people who have committed less serious crimes, especially youth at risk and young offenders; the need for offenders to reconnect with traditional values; the need for training and education for offenders to make them more employable; and increased RCMP resources in smaller communities. These issues will be commented on by my colleagues and I will turn the next chapter of the report over to Mr. McLeod. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Braden. Mr. McLeod.

**Community Justice Committees**

**MR. MCLEOD:** Thank you, Mr. Chair. During the pre-budget consultations in the communities we heard that more funding should be directed to the local justice committees.

During the business plan review in September, the Standing Committee on Social Programs was concerned that funding to community justice committees was not keeping pace with their increased workload. The standing committee recommended $50,000 in base funding for each justice committee.

Currently the Department of Justice is reviewing how they can revitalize community justice committees. One area they are looking at is their funding structure. The standing committee will be looking forward to reviewing the 2007-2010 Business Plans and seeing increased funding for community justice committees and programs.

**Policing In Smaller Communities**

The Standing Committee on Social Programs is concerned over the $200,000 reduction in the Police Services Agreement. During the last budget session, the committee supported the increase of $1.489 million to the Police Services Agreement. Now part of the increase the committee supported last year is being removed as part of a budget-cutting exercise.

During the business plan review in September, the committee supported the Minister making it a priority to increase police presence in communities without detachments. The Minister of Justice has since informed the committee that a joint RCMP/department strategic planning group has been formed, and one of their first priorities is to increase the police presence in smaller communities.

The committee is concerned that the proposed $200,000 reduction in the overall Police Services Agreement may make it difficult for the RCMP to increase police presence in communities where there is already minimal police presence, such as Sachs Harbour and Colville Lake.

The committee finds it difficult to see how the enhancement of police service through more frequent patrols, longer stays, and the support of crime prevention initiatives can be accomplished, when the department is proposing a $200,000 reduction. As a result, the committee does not support this reduction. At this time, Mr. Chair, I would like to pass it on to Mr. Lafferty from Monfwi.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. McLeod. Mr. Lafferty.

**RCMP Orientation Program**

**MR. LAFFERTY:** Mahsi, Mr. Chair. During the business plan review in September, the committee was concerned that some RCMP officers have not been able to integrate well into the community where they have been stationed.

The committee is interested to see progress of the RCMP Orientation Program and will be provided with information on the new RCMP Orientation Program from the Minister of Justice as it becomes available.

**Family Law And Legal Aid Files**

During the business plan review, the committee had concerns regarding lawyers not taking on family law or legal aid cases in the NWT. In general, there are difficulties in attracting lawyers to the NWT, and attracting lawyers to take on family law matters is of particular concern. The Minister’s staff explained that making mediation a prerequisite before using the court system is one alternative to decrease the backlog of family law cases.

Since the business plan review in September, the department has started a pilot Family Law Mediation Program in Yellowknife and Hay River that will run until the end of this fiscal year.

The committee will be provided with information from that pilot project when available.

The committee is also very interested to see possible initiatives to recruit more lawyers to the NWT in the 2007-2010 Business Plans. At this time, Chair, I would like to turn it over to Mr. Pokiak to talk about the wilderness camps.

**CHAIRMAN (Mr. Ramsay):** Mahsi, Mr. Lafferty. Mr. Pokiak.

**Wilderness Camps**

**MR. POKIAK:** Thank you, Mr. Chairman. The committee was concerned about the substantial reduction of $425,000 to youth wilderness camp funding.

The justification given by the department for the cut is the lack of youth receiving custodial sentences, and, as a result, there has been minimal use of the Youth Wilderness Camp Program. The committee is concerned that once this funding is cut out of the program, it will be difficult to reinstate this funding.

The committee is also concerned that minimal use of the Youth Wilderness Camp Program is a result of poor program delivery and/or design. The committee understands the potential benefits of the Youth Wilderness Camp Program and recommends that a program redesign may prove better than cutting out $425,000 from the program.

The committee would like to see the department develop new models for the Youth Wilderness Camp Program similar to the review the department is currently completing on the Wilderness Camp Program for adult offenders and provide committee an opportunity for input.

**Outdoor Recreation Area For North Slave Correctional Centre**

During the business plan reviews in September, the committee was left with the impression that the outdoor recreation area was going to be built as an arena.

However, the department has clarified that it “has no intention to build a new arena for the North Slave Correctional Centre.” Rather, “the Department has proposed an outdoor recreation area in the capital plan to provide a fenced area for inmate outdoor activity and programs such as healing circles, similar to the grounds of the old Yellowknife Correctional Centre.”

It should be noted that there was an outdoor arena on the grounds of the old Yellowknife Correctional Centre. Given the close proximity of the North Slave Correctional Centre to the new Yellowknife Multiplex arena, the committee is concerned that an outdoor arena may not be the best use of government funding That concludes the discussion on the Department of Justice, Mr. Chair. Thank you.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Pokiak. Thanks to the Social Programs committee for providing their comments. I would like to now go to Mr. Villeneuve.

**MR. VILLENEUVE:** Mahsi, Mr. Chair. I would like to report progress.

**CHAIRMAN (Mr. Ramsay):** Thank you, Mr. Villeneuve. There is a motion to report progress. The motion is not debatable. To the motion. All those in favour? All those opposed? The motion is carried.

---Carried

I will rise and report progress. Thank you, committee.

**MR. SPEAKER:** Can I have the report of Committee of the Whole? Mr. Ramsay.

# ITEM 17: REPORT OF COMMITTEE OF THE WHOLE

**MR. RAMSAY:** Thank you, Mr. Speaker. Mr. Speaker, your committee has been considering Bill 18, Appropriation Act, 2006-2007, and Committee Report 7-15(4), Standing Committee on Social Programs Report on the 2006-07 Pre-Budget Review Process, and would like to report progress. Mr. Speaker, I move that the report of Committee of the Whole be concurred with. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Ramsay. Is there a seconder for the motion? The honourable Member for Sahtu, Mr. Yakeleya. There is a motion on the floor. The motion is in order. All those in favour? All those opposed? The motion is carried.

---Carried

Third reading of bills. Mr. Clerk, orders of the day.

# ITEM 19: ORDERS OF THE DAY

**CLERK OF THE HOUSE (Mr. Mercer):** Mr. Speaker, orders of the day for Tuesday, February 21, 2006, at 11:00 a.m.:

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. Petitions
10. Reports of Committees on the Review of Bills
11. Tabling of Documents
12. Notices of Motion
13. Notices of Motion for First Reading of Bills
14. First Reading of Bills
15. Second Reading of Bills
16. Consideration in Committee of the Whole of Bills and Other Matters

- Bill 12, An Act to Amend the Territorial Court Act

- Bill 15, Court Security Act

- Bill 16, Tobacco Control Act

- Bill 17, An Act to Amend the Public Colleges Act

- Bill 18, Appropriation Act, 2006-2007

- Bill 19, Supplementary Appropriation Act, No. 3, 2005-2006

- Committee Report 5-15(4), Standing Committee on Accountability and Oversight Report on the 2006- 2007 Pre-Budget Review Process

- Committee Report 6-15(4), Standing Committee on Governance and Economic Development Report on the 2006-2007 Pre-Budget Review Process

- Committee Report 7-15(4), Standing Committee on Social Programs Report on the 2006-2007 Pre- Budget Review Process

1. Report of Committee of the Whole
2. Third Reading of Bills
3. Orders of the Day

**MR. SPEAKER:** Thank you. Accordingly, this House stands adjourned until Tuesday, February 21, 2006, at 11:00 a.m.

---ADJOURNMENT

The House adjourned at 17:52 p.m.