



**Nunavut Canada**

**LEGISLATIVE ASSEMBLY OF NUNAVUT**

**2nd Session**

**5th Assembly**

**HANSARD**

Official Report

**DAY 70**

**Tuesday, November 5, 2019**

**Pages 4388 – 4442**

**Iqaluit**

**Speaker: The Honourable Simeon Mikkungwak, M.L.A.**

## Legislative Assembly of Nunavut

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**Iqaluit, Nunavut****Tuesday, November 5, 2019****Members Present:**

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

>>*House commenced at 13:33*

**Item 1: Opening Prayer**

**Speaker** (Hon. Simeon Mikkungwak) (interpretation): Before we proceed, I ask the Member for Aggu, Member Quassa, to say the opening prayer, please.

>>*Prayer*

**Speaker** (interpretation): Good day, people of Baker Lake and Nunavut, today being November 5, 2019. Member for Arviat North-Whale Cove, Member Main.

**Mr. Main** (interpretation): Thank you, Mr. Speaker. Good day. At this time I seek unanimous consent to go directly to Item 19. Thank you, Mr. Speaker.

**Speaker** (interpretation): The member is seeking unanimous consent to go directly to Item 19 in the *Orders of the Day*. Are there any nays? There are no nays. Continuing on. Item 19. (interpretation ends) Consideration in

Committee of the Whole of Bills and Other Matters. (interpretation) Bills 8, 26, 29, 30, 31, 32, 33, and 34 with Mr. Rumbolt in the Chair.

Before we proceed with the Committee of the Whole, we will take a 10-minute break.

Sergeant-at-Arms.

>>*House recessed at 13:37 and Committee resumed at 13:47*

**Item 19: Consideration in Committee of the Whole of Bills and Other Matters**

**Chairman** (Mr. Rumbolt): Good afternoon, members. I would like to call the committee meeting to order. In Committee of the Whole we have the following items to deal with: Bills 8, 26, 29, 30, 31, 32, 33, and 34. What is the wish of the committee? Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. We wish to continue with the review of the capital appropriations for 2020-21, commencing with the Department of Health, followed by Bills 31, 32, and 33. Thank you, Mr. Chairman.

**Chairman**: Thank you, Mr. Main. Are we in agreement that we first deal with Bill 30?

**Some Members**: Agreed.

**Bill 30 – Appropriation (Capital) Act, 2020-2021 – Health – Consideration in Committee**

**Chairman**: Thank you. I would now like to ask Minister Hickes: do you have

officials that you would like to appear before the committee? Minister Hickes.

**Hon. George Hickes:** Yes, please, Mr. Chairman.

**Chairman:** Thank you, Mr. Hickes. Does the committee agree to let the officials into the witness table?

**Some Members:** Agreed.

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

Thank you. For the record, Minister Hickes, if you could please introduce your witnesses. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. To your left I have my Deputy Minister, Ruby Brown, and to your right I have Executive Director of Corporate Services Greg Babstock. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Hickes, and welcome. We had the Department of Health before us a couple of weeks ago and the department was deferred. At that time we did do the opening comments from both sides, from the minister and from the committee. Today we will jump directly into questions for the Department of Health. Before we do that, we are on page H-3 for Health under Directorate and it had a total capital expenditure of \$27,500,000. Questions? Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Welcome back, minister and your staff.

Following the deferral of the health department, the Regular Members'

Caucus did put to the minister a number of questions. My understanding is that a written response was not prepared, somewhat due to the computer issues within the government. I'm just going to go through these and try to gather additional information on behalf of my colleagues.

The first question being: from November 2017 to October 2019, when it comes to the department's work on elders' care and long-term care, what are the major milestones leading up to today, starting with the beginning of our election in 2017? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I do apologize. The lack of the written response was entirely due to the network issue that we have been experiencing. I do apologize. We were very close to finalizing it when the computers went down. My apologies and I will respond verbally as best I can.

To answer the member's question, starting in November 2017, Department of Health staff made regular visits with all existing GN long-term care facilities in Nunavut as well as Embassy West Senior Living in Ottawa.

In December 2017 there was a meeting with the Kugluktuk SAO, mayor, and consultant.

In 2018, in June, we engaged Partnerships BC to complete a business case and examine P3 opportunities for long-term care.

In September 2018 a functional program consultant met with Iqaluit elders' home staff, executive and scientific director of the Qaujigiartiit Health Research Centre, and the Qikiqtani General Hospital staff.

In October 2018 a functional program consultant interviewed staff from Gjoa Haven, Igloolik and Cambridge Bay continuing care centres. Telephone consultations also occurred with home care program staff in all health regions, in addition to a physician who provided services to communities in the Kitikmeot.

In October 2018 the program consultant interviewed long-term care experts from jurisdictions across Canada. Health and Community and Government Services staff consulted with staff of a leading facility in Ontario.

In November 2018 Health and Community and Government Services staff consulted with the Yukon long-term care staff in Whitehorse.

In December 2018 Western Health Associates completed a preliminary functional program to inform the business case.

In March 2019 Partnerships BC conducted telephone interviews with 15 construction contractors and long-term care service care providers across Canada to seek feedback and gauge market interest in this initiative.

In March 2019 the completion of a market sounding report.

In July 2019 we engaged the GN's technical team to prepare a design-build RFP, indicative designs, and

performance specifications.

In September 2019 the completion of the project risk report and cost estimate in a class "D" for phase 1 of the facility proposed for Rankin Inlet.

In October '19, as I mentioned earlier in our previous sitting or previous standing committee, we had completed the business case for seniors long-term care facilities. Thank you, Mr. Chairman.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm going to try to go through these questions as quickly as possible, but just a clarification on that last one, the minister mentioned a business case was completed on the facilities. Is there one business case for the three regional facilities or is it one business case for the one facility currently proposed? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickey:** Thank you, Mr. Chairman. There were up to nine different options that were explored. Thank you, Mr. Chairman.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) The next question that we posed in the letter was a list. We asked for a list of all non-Government of Nunavut entities that the Department of Health has engaged with

concerning proposals or other discussions regarding long-term care facilities and elder care. (interpretation) That will be my question for now. Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I'll do them in not necessarily a time order but a project order.

Mr. Chairman, in December 2018 I received cabinet direction to negotiate with the Hamlet of Kugluktuk to discuss their proposal for a long-term care facility in their community. I don't want to go into a lot of detail as those negotiations are currently ongoing, but in December 2018 GN staff met and did their first negotiation in Yellowknife; in January a second negotiation meeting in Edmonton; in June the third negotiation meeting in Ottawa; and the fourth meeting is yet to be determined. Thank you, Mr. Chairman.

Sorry, I will continue. There were discussions with the Sailivik Society. The GN has a record of correspondence with the Sailivik Society. The MLA for Iqaluit-Niaqunngu is the Chair of the Sailivik Society and other members of their board of directors regarding long-term care dating back to February 2016.

The society's concept was to construct a multi-use, multi-level of care, long-term care facility that included long-term care beds, dementia care beds, assisted living accommodations, hospice and elders programs and services, and an Inuktitut daycare. Initially the society was aiming to construct the facility and request a fee-for-service contract from

government for elder care services provided at the facility.

The GN met with the society again in person in February 2017 and again during the summer of 2017, during which the GN raised concerns regarding what would need to be addressed before it could enter into a service contract. I went into quite extensive detail on that previously.

On June 30, 2017 the society provided its business plan and executive summary to construct the facility. However, the chair of the society noted in that same correspondence that Sailivik required support from the GN to raise \$12.4 million in order to advance the project. This substantially changed their position from a no cost for construction to a project potentially requiring significant capital funds.

The Qikiqtani Inuit Association and the Qikiqtaaluk Corporation sent a joint letter to the Minister of Health, me, regarding long-term care facilities in Iqaluit and Nunavut in November 2018 and I responded on December 10, 2018. Thank you, Mr. Chairman.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm just trying to go through these questions just to get clarity so that my colleagues will be able to follow up.

The minister mentioned in his first response a market sounding report and the three entities that were listed there, in the second response, the Hamlet of Kugluktuk, Sailivik, the QIA, and QC.



My question is: did that market sounding report involve Nunavut-based companies? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I don't have that level of detail. There are 20 different organizations and businesses that were contacted across the country, of which 15 provided feedback. Thank you.

**Chairman:** Thank you, Minister Hickes. Mr. Main, please continue.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) The next question posed in our letter was a detailed rationale for why and how existing facilities, continuing care centres, and elders' homes were included in the scope of the current capital plan respecting the establishment of new regional facilities. (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. There were a number of different sources that we looked at regarding the existing and what would be needed for the current capital plan. It has long been identified as a very well-known need that we need more long-term care beds in the territory.

With regard to specifics of what to do with existing facilities, that is not before us as a decision item today. Thank you, Mr. Chairman.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) My next question is the department's timeline for drafting a formal elders' care strategy. (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. With regard to an overarching elder care strategy, it requires the involvement of many different departments and is quite an extensive undertaking, of which we would have to go through the normal budgeting process and secure O&M funds to move forward with a project of that nature. The long-term care facility portion of that is just one small component of an overarching elder care facility. Thank you, Mr. Chairman.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm just going to follow up on that. What is the timeline for drafting a formal elders' care strategy? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. If we were to receive the appropriate funding, we estimate a minimum of one year. Thank you.

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

Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Will the government be initiating that work? The minister mentioned a one-year time frame and mentioned that it would be an extensive undertaking, that it would involve other government departments. Does the department plan to initiate that? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I appreciate the question. With the recent reassignment or reallocation of responsibility of responsible for seniors to myself, first we have to work at the terms of reference and mandate for what my role is going to encompass, which will involve coordination with partner departments and organizations. At that time we would take a look at developing a strategy. When I say one year, it is to develop the strategy. It is going to take some time before we fully encompass what terms of reference and the mandate for this portfolio will undertake. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) That ends my questions on behalf of the caucus. At this point I will just take a pause there and let other members ask questions. (interpretation) Thank you, Mr. Chairman.

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

Mr. Quassa.

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. I will probably be asking different questions and I will have the same line of questioning.

It is now clear that there is no long-term plan concerning our elders. There is none. We have only heard it orally as there's nothing in writing. It has been two years since we were elected. We said at the beginning of our term that yes, we have to take our elders home. We have been saying that for two years. We already know, as the minister just stated, that it would take one year or more to develop a strategy. If we're going to come up with a strategy, it will take that long.

As I stated, it has already been two years. If they had started the process at that time, perhaps we would be far more ahead today. It seems that we're just starting the process. Why is the process just starting now? As he just stated, there are studies that need to be done for the design of the facility. Why are they finally thinking of a strategy now? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. With regard to a long-term centre plan, we have one. With regard to an elder strategy, again, like I had mentioned earlier, that's an O&M item and we will be revisiting that when we go through the terms of reference and the mandate for my new role as Minister responsible for Seniors.

As members are aware, the long-term

care bed need has been identified for a long time and there has been substantial amount of work over and above what I listed earlier and a lot of resources that have been utilized to further that plan. With regard to long-term care beds, we do have a plan. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Hickee. Mr. Quassa.

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. We are also aware that there was a 2015 report on elders' care. There's already a report written. In reading that report, there are recommendations on government activities in 2015. He has probably read that report as well. They didn't follow the recommendations that were written in 2015 and here we are in 2019 and there doesn't seem to be any strategy on that report of 2015. That's my question. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Quassa. Minister Hickee.

**Hon. George Hickee:** Thank you, Mr. Chairman. I would respectfully disagree with the member. Back after that report was brought in, we were negotiating with the Kugluktuk project as well as with the Sailivik project, so there was a fair bit of action behind those negotiations to further long-term care bed access in the territory.

With regard to the information in that report, whether recommendations were or were not followed, many members have brought it up in the past. We're inundated with reports. We take information from various sources, including the report that the member is

referring to, to utilize information within there to develop our long-term care plan. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Hickee. Mr. Quassa.

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. Still on the 2015 report, written in there is that the new health centres that will be constructed will have elder care beds that are needed. That was also written in the 2015 report. What is the status as of that today? I think there have been a number of new health centres built and others are in the process of being constructed. What is the status on the recommendations, such as elder care beds? What is the status of that to date? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Quassa. Minister Hickee.

**Hon. George Hickee:** Thank you, Mr. Chairman. Like I had mentioned earlier, there are a number of reports on this topic that we have gleaned information from. That was one recommendation that wasn't deemed as a positive step forward. To put a few beds in a health centre determining the 24-hour care to cover three or four beds is not feasible. We have recognized for many years that we need to bring more beds into the territory and doing it piecemeal, as I had mentioned the other day, if we were to put a small elders facility in every community, it would cost probably between \$400 million and \$500 million and nearly \$100 million a year to maintain. We have to take not only a factor of how important it is to bring our elders home but how to do it as fiscally responsible as possible as well. Thank you, Mr. Chairman.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. We have experienced and we have also seen that when the new schools are being built, they have daycares. Looking at that, we're envisioning one or two beds in the new health centres being built. It doesn't seem to require a huge amount of money when it comes to elders.

He said that they have visited communities from November 2017 to date to different areas of the country. Looking at Igloolik, they visited the continuing care centre. After your visits, did you get new ideas on the continuing care centre in Igloolik? Did you come up with new ideas after your visits? What came up? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. When we look at long-term care facilities, there are a number of different factors. It's not as simple as just providing a bed and someone to make sure that somebody doesn't fall down because, depending upon the level of need, there's quite extensive level of training and care that's needed to be provided. One of the things that have come up during our consultations is the need for more recreational programming and getting the elders out around the community to different events. That was one of the things that came out of our consultation. Thank you.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. As you state, when it comes to elders, you stated in the past that there are existing facilities, for instance, in Igloolik, Gjoa Haven, and other places like Arviat. These are existing facilities. You stated that they have to be kept open and in use. Do you still have that mindset? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Yes, I have stated very publicly in this House that there is no intention for this government to close any of those facilities. Thank you.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. We also read letters from the minister to members. We read the correspondence, of course. He stated in the letters that they will have no more use for the existing facilities when we build new ones and that they may become redundant. We have seen that through correspondence and we seem to understand that if new facilities are being built, then the current ones will be redundant. Is that still your vision? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I can't speak to what future decisions will have to be made on that until we have actually met the need of this territory, which this is the step 1 of. That's something a future government

will have to decide upon. Thank you.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. Now, all governments practise long-term planning with a vision for different time frames. This is proven by the fact that it is a long-standing custom. Now, as an example, in our written materials we have five-year and ten-year plans that are passed in this Assembly. Ministers also provide these types of documents. I don't put much faith in his response.

Nonetheless, I want to move on to this other topic. With examples of the minister stating certain principles such as the term (interpretation ends) "partnership," (interpretation) he announced their willingness to partner with other organizations, but in looking at the document, it seems to imply that this facility is being pursued solely by this department. I see this as a sole departmental pursuit rather than in partnership with other organizations already in Nunavut.

I would like to clearly understand your comprehension of the term (interpretation ends) "partnership" (interpretation) in this context, especially when looking at capital projects, to work in partnership with other bodies that have a stake in this facility. How do you understand partnership for these types of capital projects? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. We are open to partnerships. We have explored that with nationally renowned institutions as well as we are in negotiations right now with Kugluktuk as a partnership. The Rankin Inlet facility was deemed too small. It's not a large project, so it didn't get any interest. There is still an option. Like I said, we are still three, four, five, or six months away from phase 2 of our plan for Iqaluit and our negotiations proceed with Kugluktuk, but there are always opportunities for partnerships to be organized and taken advantage of. Thank you.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. With his past announcements in this regard about existing elders' care facilities requiring higher levels of care, he said they would continue to operate and we also heard the statement about this topic publicly. I would like to ask if that is still the case. Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Absolutely. We have recently invested in fibre optic connectivity to the Arviat elders facility and as well as here in Iqaluit so we can hook it up to MEDITECH. There was correspondence with the Minister of the Nunavut Housing Corporation with regard to the renovations for the Arviat facility, which I have been actively working on for too long now. I have been in the facility a few times and recently with the minister from the Nunavut Housing Corporation

to recognize the need to bring that place up to more comfortable living. The windows, the kitchen, a number of different cosmetic aspects of the building need to be dealt with. Absolutely we're still investing money into these facilities. Thank you.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. I want to make this clearer to get a better understanding of the fact that the existing facilities need to continue to be active. The minister apparently believes that they will continue. Elder facilities do exist in some communities, so those places should be able to continue. Is there enough money in the capital estimates for the renovations and other work needed to be done on the existing elder facilities? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. There were recent budget allocations for long-term care. Yes, there is money in the budget for maintenance and renovations. Specifically we recently did a number of renovations here in Iqaluit and there was budget appropriated previously for the Arviat centre.

Mr. Chairman, with your indulgence, I know we're here to talk about opening facilities, not closing facilities, so I would like to close the door on that discussion. Thank you.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. We are here to ask questions, so we should be free to ask any question. This will be my final question. I know that we have many more questions and I have many more questions, but this will be my last one for now.

Looking at the elder facility in Igloolik, it's always full and there is a long waiting list. It's the same with Gjoa Haven. They have a long waiting list of elders. The Igloolik facility seems to be too small now and it has been open for many years. Has there been any consideration to increase the size of the Igloolik Continuing Care Centre? It is heavily utilized and there is a long waiting list. With that being the case, has the minister made any consideration to expand the building? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Just to maybe explain a little bit on how continuing care centres work, such as Igloolik and Gjoa Haven, and the difference between a long-term care facility being an elders' home like in Arviat and Iqaluit, when we're looking at the different levels of care provided, we're not able to repatriate our residents who have been shipped out of the territory for higher level need of care. To be able to provide that higher level of care, we need to do it in regional centres where there are more physician services. There's expanded medical health expertise already existing in the facilities. It's a very specialized service. We need to make sure that if we're able to repatriate people, we need to have the

appropriate facilities. I thank the member for reinforcing my argument that we do need more beds in this territory. Thank you.

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

**Mr. Keyootak** (interpretation): Thank you, Mr. Chairman. I have a brief question. First of all, I'll say that I know my constituency community of Qikiqtarjuaq, which has been my community for a very long time. We have a very old health centre that was probably built in the 1970s. I think it is one of the oldest health centres in all of Nunavut. We heard last year that work was going to begin on the architectural design drawings for the new Qikiqtarjuaq Health Centre. We were told when the design would be done. Can you give us an update on the planning and design for the Qikiqtarjuaq Health Centre? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. It is on our capital plan. It is one of our top three priorities of moving forward with construction. We know the building is 47 years old. It's almost as old as I am, Mr. Chairman. Not that I consider myself that old, but for a building, maybe I have aged better than the building. It was most recently renovated in 1992, so that was some time ago as well. I do want to assure the member that the health centre in Qikiqtarjuaq is still on our capital plan. Thank you, Mr. Chairman.

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

Mr. Keyootak.

**Mr. Keyootak** (interpretation): Thank you, Mr. Chairman. That's how long it takes for the small communities to get something. It takes a very long time for things like that because the smaller communities are never considered a higher priority than the larger communities. It seems like there is more of a rush to build things in the larger communities and the smaller communities are left behind. Now it's obvious this is how long we take in the smaller communities and that health centre that we use is very old now.

My colleague was asking to ensure that when new health centres are being built, they have elders' rooms. Will the plans for the Qikiqtarjuaq Health Centre include an elders' room due to the fact that we need dedicated space for elders? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I will again respectfully disagree with the member. If you look at the last five capital projects with regard to health centres that the Department of Health is undertaking, Sanikiluaq and Cape Dorset are under construction right now, but the previous ones to that were Taloyoak, Naujaat, and Arctic Bay, which are all small communities.

Mr. Chairman, when we look at replacing or renovating existing infrastructure, we take a look at the ages definitely being a component to it, but it's also the condition rating. We work very closely with Community and Government Services on the condition

ratings of our infrastructure.

I'll commend the community of Qikiqtarjuaq on how well they have maintained the facility there. Like I said, it is an old building, we recognize that, and it is on our capital plan. With regard to a specific elders' room, I'll forward that for discussion with my officials and we will see how the design can be incorporated. Thank you, Mr. Chairman.

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

**Mr. Akoak:** Thank you, Mr. Chairman. Good afternoon, minister and staff.

If you will allow me first, Mr. Chairman, today is a special day for my wife and myself. We're celebrating our 42nd anniversary.

>> *Applause*

Thank you. I have always been here for my anniversary ever since I got elected, but I wish her a very good day and enjoy it.

I would like to start off by when I asked the minister about the level of care a few days ago, October 31, and he didn't answer some of the questions I had. In one of his responses with the level of care in Gjoa Haven, "With regard to the Gjoa Haven facility specifically, it is level 2 and 3, although there are some people who do age in place where they are requiring up to level 4 care." When I'm reading that, does Gjoa Haven have the capability of looking after level 4 care clients? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Akoak, and happy anniversary to you and your wife.

Minister Hickee.

**Hon. George Hickee:** Thank you, Mr. Chairman. Again, happy anniversary to you and Annie. I remember hearing this every year. It seems you're always away for your anniversary, so my apologies.

With regard to specifically the Gjoa Haven facility, it is a level 2/3 facility. Some people do age in place up to level 4. We have to work very closely with the facility staff and the families to make sure that as the needs raise or as they increase, we do have to take a look at other options for care. Typically, I would say in response to the member's question, no, it is not intended to be a level 4 care facility.

We move people the least amount as possible. If the care level being provided with the facility staff in Gjoa Haven, as an example, is able to meet the elders' needs, we will leave them there. We don't want to move people around unless we absolutely have to, but if the needs do increase to a point where we do have to look at other facility options, then we will. Thank you.

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

**Mr. Akoak:** Thank you, Mr. Chairman. Level 4 clients require complete assistance with mobility, as limited ability to communicate requires moderate professional nursing care, all of which is provided in a continuing care centre. You stated that we do look after some level 4 clients in the community of Gjoa Haven. I'm just curious: when people are sent down to Ottawa, and again this was not quite answered the other day, are there any levels 1, 2, and 3



clients in that facility just because we don't have any room in Igloolik or Gjoa Haven? Are there any clients like that in Ottawa, levels 1, 2, and 3, just because there are no beds available in either Igloolik or existing facilities? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Forgive me, I'm not going to answer the question directly just because there are a limited number of elders in that facility and I wouldn't want to jeopardize any privacy issues, but at the same time I will say that if the needs can't be met in the territory, that is an option we would look at. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Hickes. Mr. Akoak, I want to caution you that you're leaning towards operations of facilities and if you could stick to capital, please. Mr. Akoak.

**Mr. Akoak:** Thank you, Mr. Chairman. In your opening address on October 29, on page 42, fourth paragraph, it states right at the bottom, last three lines where it says, "Nowhere in our capital budget does it state we are opening one facility at the expense of another. We want to build facilities, not close them." When you say "not close them," it is not a very strong word. If you would say "not close existing facilities," it would be fine with me. Is that what you meant? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I can't say with 100 percent certainty, but I do know that we operate the Gjoa Haven and Igloolik facilities and there is no desire to close those right now. Thank you, Mr. Chairman.

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

**Mr. Akoak:** Thank you, Mr. Chairman. You have no desire to close the facilities. How many years ahead? May I ask that question? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. This is phase 1 of a long-term care facility plan. It all depends on how everything rolls out; how everything integrates with each other. We are looking at providing a higher level of care in the territory so that we can provide spaces for our residents that need that increased level of care and specialized care and repatriate people that we have had to send out of the territory, so I don't envision anytime soon. Thank you, Mr. Chairman.

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

**Mr. Akoak:** Thank you, Mr. Chairman. Present facilities do have up to 10 beds. They are always full. We do have a lot of people on the waiting list, even in the community of Gjoa Haven that want to move into the facility. This would be just a comment that we do need and require and ask that you provide more beds in the present facilities, and we do need them.

In that I will go into another line of questioning which would be under mental health. There are currently two mental health facilities in Nunavut, one in Cambridge Bay and one in Iqaluit. Previous capital plans included planning initiatives for a mental health transition house in Rankin Inlet. However, the project did not proceed and is not in the current five-year capital plan. Mental health issues are a growing area of concern across Nunavut.

What is the current status of the Department of Health's plan to establish a mental health facility in Rankin Inlet? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. As all members will note, in another line item of the capital budget that's before you, there is beginning work on the addictions and trauma centre here in Iqaluit. At that time we will be re-evaluating the mental health needs and facilities across the territory. The Rankin Inlet facility is still on the radar; we just have to continue to plan.

Again, I will reiterate that the Department of Health or the Government of Nunavut overall don't make knee-jerk reactions. We use well-thought-out plans and strategies and we rely upon industry experts. We rely upon internal experts. We have a number of people in our staff that work directly with all health facilities and we rely upon their expertise and direction to provide the best care possible for all residents. That's it for that topic so far, Mr. Chairman.

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

**Mr. Akoak:** Thank you, Mr. Chairman. Even in the last Assembly and up to today I have been trying to get a facility in Gjoa Haven. I have mentioned it just about every time I am here and I don't know if anybody is listening, but I have been telling the government that we do need a facility. I know we are on the other end of Nunavut, but we are still a part of Nunavut also. I have been asking for that facility to... It hasn't even shown up in the plans yet.

On August 19, 2019 the federal government, the Government of Nunavut, and NTI signed a declaration of intent to construct a treatment facility in Nunavut. What specific financial commitments were made by each of these entities towards the construction of this facility? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. The federal government has offered support through its infrastructure planning with regard to the capital side of things as well as participating with O&M.

When we look at NTI as an example, there has been some commitment for some actual money or land, but I think more importantly are the training dollars that NTI and the Government of Nunavut have secured from the Makigiaqta Inuit Training Fund, which will go a long way to making sure that there is proper staffing and training for that staff.

Well, the item that is before you in this House is the Government of Nunavut's initial contribution, but we're anticipating this to be up to a five-year project. Thank you, Mr. Chairman.

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

**Mr. Akoak:** Thank you, Mr. Chairman. I'm just going to go to *A Youth-Informed Review of Mental Health Services for Young Nunavummiut*. It's a report and it's on page 26 in the top paragraph. This is all coming from the youth and it has to do with mental health. It says, "The lack of mental health services for children and youth in Nunavut was a predominant theme that emerged during our review. Specifically, the absence of a mental health facility for children and youth in Nunavut, and the reality that young Nunavummiut often have to be referred out-of-territory to access appropriate treatment, was reported as a significant shortfall of the current mental health system."

That paragraph alone tells you mental health is a big issue and we do need help. That's why I have been asking for such a thing in my community. That would just be a comment and I hope you look into it and get your colleagues to think about what I have been asking for. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Akoak, for your comment. Moving on, Ms. Angnakak.

**Ms. Angnakak:** Thank you, Mr. Chairman. Welcome. Obviously this is a topic I like to speak about. I feel very connected with this topic and feel that we need a long-term care facility in

Iqaluit as soon as possible. I really don't think waiting for the one in Rankin Inlet to be finished before we do this one is the answer, if that's the plan. I just want to state that I think it would be nice to see all regions get this kind of help at the same time because we need it.

I don't want to look too much into the past because we can both say all sorts of things and we might not get anywhere with it because we have our own opinions of who said what. Even today I'm a little surprised that you had negotiations with Sailivik and I could tell you Sailivik never knew we were in negotiations with the Department of Health. We thought we were just busy trying to bring attention that we have a proposal and that we would like to enter into a partnership. I have nothing on paper to say that we are in negotiations.

We've had meetings that were initiated by Sailivik. We've never had a meeting that was initiated by the government. I just want you to know that's why nothing more...I guess we have been waiting, for the record, on that on the Sailivik board. When I became a minister, I stepped down, so I'm not on the Sailivik board, but I'm talking about when I was on the Sailivik board.

You mentioned about partners and I just would like clarification. You said the consultant group had gone to different partners to see if there was any interest and if you could talk a little bit more about that because I'm curious to know what kind of partnership you were looking for and why you couldn't find anybody who was interested. Thank you, Mr. Chairman.

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

Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. There were a number of different large entities from across the country that were consulted and discussions were held regarding different levels of partnership, from partnerships in the construction, partnerships in the operations, ongoing running a facility versus us running and them supporting. There were a number of different options that were put forward and ultimately the risks associated with providing care in the territory. There are national accreditation standards, like I had mentioned earlier, that are up to 600 pages long.

I'm sure the member is well aware through her previous discussions on how complex it is to open up a long-term care facility, especially with higher level needs. When we look at partnerships such as that, the risk was deemed too high for outside partners. That being said, we're still open to partnerships. Again, we're negotiating with Kugluktuk. I would be very open to discussions for an Iqaluit facility here.

I do want to just clarify that we are hoping to have our phase 2 plan in the next three to six months, but that being said, this is phase 1. Without phase 1 there won't be phase 2. Thank you, Mr. Chairman.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. For the record too, I would like to state, because I think some people have come to me and said, "Are you against the Rankin Inlet one?" I am not

against the Rankin Inlet one. I agree with the department that we need to build long-term facilities now. I don't think, "Oh, if we do this, we shouldn't do this." Do you know what I mean? I am in agreement, but what I want to see is one done in every region at the same time because our elders all need that and they're all equal.

I'm wondering why the department did not go to the Inuit organizations for partnerships. I called up the Inuit development corporations just to ask, "What's going on?" When you said partnerships, I thought it also included them and I was shocked because I didn't know why they wouldn't want to do this when a couple of years ago when I was involved, we would say that we had that partnership. That was something and so I wondered why they wouldn't be interested and they told me they were never approached. Nobody ever went to them. I wonder if the minister can please tell us: why didn't you go to the Inuit organizations when they have the money to do this kind of thing?

Furthermore, I asked if the government were to go to the development corporation within the next couple of months and say, "You know what? We want to enter into a partnership." On the phone, the president of QC told me that within a year and a half they would be able to open up a facility if they knew within the next two months or so. We do have an opportunity here to build something fast-paced and get it quicker than what we would have to do if we went through the normal processes.

I wonder if the minister could say why he didn't go to the Inuit organizations and whether or not he could do that over

the next couple of weeks. Thank you, Mr. Chairman.

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

**Hon. George Hickee:** Thank you, Mr. Chairman. When I answered the member for Arviat North's questions earlier, I identified that we have just solidified this plan in the last month.

A month ago we were upstairs talking in standing committee and I was asking the committee's patience with bringing forward upcoming projects regarding additions and long-term care, at which time I sent a letter on October 9 stating that we did finalize these plans. With the expedited procurement that we utilized for the school in Kugaaruk and another facility...it escapes my head at the moment. Using that expedited model, the school in Cape Dorset, I believe it was... Using that expedited model, we could get started on Rankin Inlet right away.

We are definitely open to suggestions and discussions through the RFP process for here in Iqaluit. I would love for Inuit organizations to be participating in a venture such as this. We want to make sure that we're providing a safe space for people, but more importantly or maybe not more importantly, but as important, a culturally relevant space. That is the whole purpose of building these facilities in the territory, so we can provide care in the territory. Thank you.

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

**Ms. Angnakak:** Thank you. Just to be clear, when I asked if the department

would be willing to go and speak with the development corporations about building the elder facility using a different model than the one you were proposing for Rankin Inlet, is that something that as a minister representing your department...are you open to that? Thank you, Mr. Chairman.

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

**Hon. George Hickee:** Thank you, Mr. Chairman. The Rankin Inlet project is not the high-level need that we have. With regard to level 5, that is going to have to be located here in Iqaluit. There are a couple of different models that we're looking at and that's why we need the time to complete our planning. Thank you, Mr. Chairman.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. I didn't really get an answer. I start to hear these bits coming out of the department, "Oh, it's going to be in Iqaluit. We want higher level care." We didn't know that. I didn't know that. It would be so good if we could just discuss things so we know the whole picture right away instead of parts of the picture.

Even when it is a high-level care, I think there are still opportunities. There are different ways of funding such facilities. I would just like to encourage the minister to please be open and go and talk with the Inuit organizations. They are willing to use their money. I think, if it's going to increase our debt cap, however that all works on paper without actually the money, it's a good one to

use to do that with because the elder facilities are such a high priority. If we have to alter the debt cap, well, I can't think of a better reason. You're the finance minister, but I think we have something like \$400 million or around that still available.

I'm just wondering: again, are you willing to go and talk with the Inuit organizations about some different options in building the facility here in Iqaluit for the higher care facility? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I can't get into discussions here right now, but we do have very strict procurement policies that we have to follow. It's something that I could speak to the Minister of Community and Government Services on.

With regard to the member's comment or segue into her question, I have been available since my October 9 letter to the standing committee. I and my staff have been available to discuss this in-camera with a lot more detail. Thank you, Mr. Chairman.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. Going forward, again, I know there are some things that we have to talk about what happened in the past, but I don't want to dwell on that because I really do want to see something built here. I do. If there is something I can do, even just me, for that discussion to take place, I will do that, whatever it is.

Thank you.

**Chairman:** Thank you, Ms. Angnakak. That was just a comment, I do believe, and we will leave it at that. Before we move on, we will take a 20-minute break. Thank you.

*>>Committee recessed at 14:56 and resumed at 15:19*

**Chairman:** Good afternoon. I would like to call the committee meeting back to order, please. Next name on my list for questioning for the Department of Health, Mr. Qamaniq.

**Mr. Qamaniq** (interpretation): Thank you, Mr. Chairman. I have a few questions on what the minister stated, if he can reply. (interpretation ends) Mr. Chairman, the minister had indicated that there were nine different options. Can you share the information as to what types of different options were on the table? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Pretty much everything from a small facility in every community to one large facility and everything in between. Thank you.

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

**Mr. Qamaniq** (interpretation): Thank you, Mr. Chairman. Did you identify which communities those facilities would be built in? You had a very short reply. Were the communities identified where those facilities would be built? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. The only ones we ultimately ended up considering were ones that would allow us to repatriate elders and provide level 5 care in the territory. Thank you.

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

**Mr. Qamaniq** (interpretation): Thank you, Mr. Chairman. He keeps stating level 1, level 2, level 3, level 4, and level 5. Was he thinking there would be a need for a level 5 care facility here in Iqaluit? I would like to get an answer on that. Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. With level 5 it is the highest level of need. It's pretty much a 24-hour level of care. It's very specialized care. That's why we determined it needed to be here in Iqaluit so that we have the hospital here and we have a number of different medical resources available.

With regard to the actual facility, it's still being planned out. There are a couple of different options of one larger facility encompassing level 2 up to level 5 or two separate facilities, similar to Rankin Inlet and Kugluktuk, and then having an additional higher level care need. Again I state that when we're taking about phase 2, we're still in the planning process. Thank you.

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

**Mr. Qamaniq** (interpretation): Thank you, Mr. Chairman. (interpretation ends) As the minister had mentioned that the long-term centre plan operation and maintenance item was a mandate and had been identified, has the Department of Health shared this plan with the regular MLAs? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. I would say yes, we want a 24-bed facility in the Kitikmeot, a 24-bed facility in the Kivalliq, and up to 108 beds here in Iqaluit. Thank you.

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

**Mr. Qamaniq** (interpretation): Thank you, Mr. Chairman. He said what I wanted to hear.

Thank you, Mr. Chairman. (interpretation ends) The Government of Nunavut's current plan is to build a 108-bed long-term care centre in Iqaluit. What levels of care will the 108-bed facility offer? I think I have two questions here, and what number of each type of bed? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. I'm just going to take a step back for a moment, Mr. Chairman. When we're planning for long-term care facilities, we work on what's called a "house" and what that house entails is 12 beds. One of the aspects when we're looking at 108 beds, it is multiples of 12, but with regard to how many beds of each level of care, it would depend upon

the need. If we found we needed more medium care, we could allocate so many of those houses within the 108 beds to that level of care and it would be adaptable to meet the needs of the facility of the residents. Thank you.

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

**Mr. Qamaniq** (interpretation): Thank you, Mr. Chairman. We are all in agreement as MLAs of the urgent need to create a long-term facility for our elders in Nunavut. The focus isn't that we don't want this facility built in a specific community. Nonetheless, the regional centres must be more equitable.

The planned facility for Iqaluit has a 108-bed capacity and the minister outlined the different levels of care, from 1 to 5, and that the beds may be available, although I believe the beds should be divided regionally. As an example, 24 beds should be set aside specifically for North Baffin, and the remaining beds totalling 84 beds would remain allocated to the facility in Iqaluit, and those beds set aside for North Baffin would be for care levels 1, 2 and 3.

In the other regions, for example, looking at the communities in the Kivalliq and Kitikmeot, they only equal half the Baffin communities. The number of communities in the Baffin almost equals the number of communities in the Kivalliq and Kitikmeot combined.

Can you be open to that possibility? I'm asking the minister: (interpretation ends) is the door open to this or have you made your mind up on Iqaluit? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. There has been a lot of planning. This isn't my pet project. This is a very cooperative government overall plan on meeting the needs of long-term care. We currently do have a facility in North Baffin, so at this point it would not be something we would be exploring. Thank you.

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

**Mr. Qamaniq** (interpretation): Thank you, Mr. Chairman. You mentioned earlier that there will be (interpretation ends) phase 1 and phase 2 (interpretation) components, and for the number of beds identified for the Baffin region and with a facility existing in Igloolik, I feel one should be allocated to Pond Inlet with 24-bed capacity that would be for the North Baffin elders sometime in the future. I believe this will require further consideration when we are looking at this in the future, which the minister should consider. He said that a phase 2 component was included. Thank you, Mr. Chairman. I'll stop there for now.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. I could go down the row and if every community would want to have an elders facility in every community, as I stated earlier, if I had the \$400 million to \$500 million to do that, I would do it tomorrow, but that still would not bring level 5 care to the territory. It's something that we have to take into very serious consideration at the work and thought process that has gone through all



these different phases.

As we have been looking at providing care in the territory, we need to make sure we're encompassing all levels of care. Right now with the hospital here in Iqaluit, it's the only place where we could actually provide level 5 care. The other facilities across the regional facilities are... Rankin Inlet, as an example, is situated because the health centre there is more robust. There are physicians on staff. There's a higher level of care that's able to be provided than a normal community health centre.

As I stated earlier, first and foremost, the health and safety of the residents of these facilities is paramount, but at the same time we do have to take into consideration realities. Like I said, I would love to build a facility in Pond Inlet, but it's just not reasonable at this time. Thank you.

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

**Mr. Kaerner:** Thank you, Mr. Chairman. Good day, minister. Let me start off with this continuous care annual report from 2015. On page 15 and that is for elders' homes, for those elders who are on level 2 and level 3, they are provided with an elders' home. In one of my ridings in Hall Beach, there is no elders' home and one of the elders in Hall Beach had approached me to see if the Department of Health can establish an elders' home for those elders back in Hall Beach who experience elder abuse financially or any abuse.

This is my question: is the Department of Health willing to work with the Inuit organizations such as the Qikiqtani Inuit

Association in establishing an elders' home? Under the GN's *Inuit Qaujimaqatuqangit* principle of working together, is the department open to working with any Inuit organization such as opening an elders facility which don't have an elders' home? Is the department willing to be open to that? (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. I stated earlier that I am open to any and all partnerships that are available, but we do have to take a very serious look at the economies of scale. To put a facility in place to have, like I mentioned earlier, two or three or four beds and having 24-hour staff is a very inefficient model.

I'll use housing as an example. A number of years back there was a lot of call for single family dwellings, so housing took the initiative and listened to the population and built a lot of single family dwelling houses. They came in way over budget estimates where we have realized now that, to maximize the effectiveness of every dollar that we have that is limited, we need to build multiplex housing units.

This is the same type of idea where we can't afford to build elders facilities in every community. We can't. We don't have the money. We need to do the next best thing and provide the level of care that's needed in the territory in a way that we can support our elders. I think it's very important and I think it's a very positive initiative to actually have some strategy behind the locations of these facilities. Is it the end-all, be-all?

Probably not.

When we look at the different levels of care, our goal is to provide care in the community for as long as possible. We want people to stay home for as long as possible through home care, working with families on identifying needs to be able to leave the parents or grandparents in the home. Our first goal is to not send somebody to a facility, but when we do have to send somebody to a facility, we want to make sure it's an appropriate level of care for safe levels, for one, but also to make sure that our elders get treated as good as or better than anywhere else.

There's national accreditation. There are standards that we have to conform to. I said earlier that it's not a simple endeavour to just open up an elders facility. There are a lot more requirements. There are a lot stricter codes, building codes, and operational structure that have to be met. It's not an option. For the complexity in something like that, I'm open to any and all discussions and partnerships, but at the same time we do have to take a serious look at the economies to scale. Thank you.

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

**Mr. Kaernerck:** Thank you, Mr. Chairman. I strongly believe and I have been strongly advocating for elders throughout these past two years, and where have I gone? I'm still trying to answer myself this question each day, "How can I represent my elders in Nunavut if they need some kind of a safe home?" In this report it says, in creating a four-plex with one bedroom, with one

caregiver, and on the bottom of the page it says, "increase home care hours."

I would like to suggest that the Department of Health approach these organizations such as you mentioned, the Qikiqtaaluk Corporation. As the MLA for Niaqunnguut has mentioned, they weren't approached. Can the department approach these organizations to come up with a four-plex unit, just four? You have mentioned that it costs \$400 million to \$500 million throughout Nunavut. I'm just talking about my Amittuq region. Is the department willing to commit to working with these Inuit organizations under the mandate of *Inuit Qaujimagajatuqangit* in working together? (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Like I said and I have said it a few times now, I am open to any and all partnerships and ideas. Thank you.

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

**Mr. Kaernerck:** Thank you, Mr. Chairman. I'm glad that you're willing to work with these organizations. I would recommend that you approach these Inuit organizations to come up with a strategy for not just in my riding; for all Nunavummiut. We have Inuit organizations in three regions: the Kitikmeot Inuit Association, the Kivalliq Inuit Association, and the Qikiqtani Inuit Association. I'm sure they have a good surplus with their budgets, so I'll stick with the partnership here.

Under the mandate for *Turaaqtavut*,

working together, I do believe there should be transparency between the government and Inuit organizations to have a good strategy and come up with a good plan for all Nunavummiut that elders need good care. I would recommend if you can commit to working with these Inuit organizations. You have been saying that, but would the department be willing to be committed to working with these Inuit organizations? (interpretation) Thank you, Mr. Chairman. (interpretation ends) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Like I said, I don't have a problem with that. Like I said, I'm open to any and all discussions from any interested parties. I'll discuss with my colleague from CGS, who has the procurement side, and we will figure out a way to see if there are partnership opportunities available. I can't commit to working with anybody. It takes two to tango, as they say, but if there are opportunities to work with Inuit organizations on increasing the level of care, I'm open to it. Thank you.

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

**Mr. Kaernek:** Thank you, Mr. Chairman. I'm glad, I mean, since the health was deferred... I'm in support of the Rankin Inlet elders facility, but it would also be great if the department can collaborate with these organizations to have elders facilities in three regions. I'm sure they're willing to help the government in establishing these buildings. Not that I'm against, it's just we need more care for elders in Nunavut

rather than sending them down to Ottawa, Edmonton, Winnipeg, or wherever. There are families who are willing to help their elderly parents when it comes to this.

I'm just making a recommendation that if the department is willing to commit to working with the partners, it could be through the organizations, to come up with an elders' care facility throughout the three regions. That's my final question and my final suggestion and recommendation. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. All I can say is that I hope the boards of the regional Inuit organizations or NTI agree with you. Thank you.

**Chairman:** Thank you. Moving on, Mr. Qirngnuq.

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

I haven't really understood the responses to the questions, so I would like to ask the question myself. If the department can make a plan for elder care and the planning starts today, how long would it take for the plan to be completed? Mr. Chairman, I am asking that because I would like to know. Thank you.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Our plan is finished. It's a 24-bed facility in the Kivalliq, a 24-bed facility in the Kitikmeot, and a 108-bed

here in Iqaluit. Thank you.

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

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. I didn't get the response I was looking for. Let me ask this question. During the Fourth Assembly there was a member that is no longer a member now who pushed hard for an elders' care facility in Rankin Inlet. When was the plan for the Rankin Inlet elders' care facility started? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. We put out an RFP in May of this year and it was closed in August of this year, and then we took that information and that's what we're working with now.

I will say that I talked to it a little bit earlier, but I just want to maybe reinforce all the different levels of discussions. This may seem like it's an overnight project. This has been ongoing for a long time. There has been a lot of work and a lot of money invested into our long-term care plan. We have a long-term care working group made up with officials of Justice, Health, Finance, and CGS. They have been working on this for a long time. We have run it through differing layers of approval, from deputy ministers' committees to right up to cabinet.

We looked at all the facts and available information from numerous sources. This is the plan that we feel is going to be best suited to meet needs currently, as fast as possible through this expedited

plan for Rankin Inlet because we did have that ready to go. That being said, we do need a little more time to work on the Kitikmeot and the Qikiqtaaluk. Thank you.

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

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. I would like to ask a resulting question since he used this example earlier about Kugaaruk's school project and he mentioned another school which burned down first. He used this example to immediately make the funding available for the project, including designs.

I wonder about that in light of the planned facility for Iqaluit, as it seems to be inching closer to fruition since he mentioned \$400 million was available. Another thing he mentioned was the operational funding for each year of \$100 million. With the expedited process, will this operational funding be appropriated? Mr. Chairman, I'm asking for clarification here. Thank you.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. That was a ballpark number that I used to emphasize the point that if we were to build a 12-unit facility in every community in the territory, which we are not planning on doing, there are no efficiencies there. We are still not able to provide the level 5 care if we use that model. The model we're using and we're looking at an appropriation today for is to start phase 1 with the project in Rankin Inlet. Thank you, Mr. Chairman.

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

Mr. Qirngnuq.

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. If we plan to fast-track the process for the Rankin Inlet facility, along with the planned facility here in Iqaluit for the Baffin region and the Kitikmeot, I wonder if the same design plans already developed can be adapted for these two facilities. When would they begin the planning for these two projects? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Through the RFP process that closed in August, it was where we got our plans to move this project forward. The planning is done for Rankin Inlet. We're ready to go. Thank you.

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

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. Let me move to another topic, as continual queries on the same subject can become tiresome. I want to ask about something new and it is in the opening comments presented by the chairperson on behalf of the committee. It is on page 2. The committee outlined the fact that many of the health centres in the smaller communities are becoming decrepit due to age, and there are three planned health centres to be constructed in Qikiqtarjuaq, Baker Lake, and Kugluktuk. After the completion of these health centres...now I can't guess when that would be. Which communities are in the next grouping for future health centres or have no plans been set, Mr. Chairman? Perhaps the minister can respond to that. Thank you.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. It does mention Qikiqtarjuaq, and then Baker Lake and Kugluktuk. Kugaaruk and Rankin Inlet, and then Coral Harbour follow those. Thank you.

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

**Mr. Qirngnuq** (interpretation): Thank you, Mr. Chairman. For Qikiqtarjuaq, Baker Lake, and Kugluktuk, when is your targeted completion date of this construction? I would like to know, hence my question, Mr. Chairman. Thank you.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. We're not even at the planning stages yet. We still have a number of projects before the Kugaaruk, so I wouldn't be able to give a firm date on that right now. We are, again, following through with the capital plan that we've got now. As projects arise, we would do the planning for them, where I would be able to give more information down the road or my successor. Thank you.

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

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. Thank you for recognizing me again. Following the response that was provided earlier when he was talking about Rankin Inlet, he indicated that they used quite a large amount of money on the planning which started in May. My first question is: how much money did they use? You

indicated that an RFP was sent out in May and they used a large amount of money. Exactly how much money did they use? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. So far, approximately \$900,000 has been expended and up to \$2.2 million committed with the design. Thank you.

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

**Mr. Quassa (interpretation):** Thank you, Mr. Chairman. The government usually says they don't have enough money. He also indicated that they envision the Iqaluit facility being the only one that's going to have level 5 care. We repeatedly say that those three should be built at the same time. You state that the facility in Rankin Inlet will go first, followed by the other two facilities that won't have level 5 care.

Now, our elders who require level 5 care will be waiting in Ottawa for quite a while, as the facility in Iqaluit will be the only one with level 5 care. They will be waiting even longer, even though we state that it is an urgent matter. Would the level 5 patients be staying in Ottawa while they wait? We see people dying down there while they're waiting. Is the facility in Ottawa going to be used while they're waiting for the facility to be built? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. As I had mentioned earlier, maybe I'll either repeat or maybe I'll expand upon. The facilities that we're looking at in the Kitikmeot and in the Kivalliq are not intended to be walk-in level 5, but as I stated earlier, we do try our best to minimize moves of people. If someone were to age in place and the level of care could be met in the Rankin Inlet facility, they would stay there.

I do again respectfully disagree with the member that if we wait for all three to come through at the same time, we don't know what types of partnerships are available. We don't know what type of capital expenditure we have budgeted for this one. We have moved around our capital budget, recognizing the urgency of providing long-term care beds in the territory. This is our first step of three facilities. If we were to wait for all three, we might end up with none.

We've got to make sure that we're planning this properly. There has been a lot of work put into the planning of this. There has been a lot of thought that's put in behind how to work our capital budget so that this project will work. I'm sitting here asking for money so that I am confident that it will work. Thank you.

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

**Mr. Quassa (interpretation):** Thank you, Mr. Chairman. It is becoming noticeable as we go along that what the minister is speaking to is new information about these facilities, which is why we were so deeply concerned with the lack of planning. We are hearing information that is new, which we didn't hear about

yesterday or even last week. We are now hearing previously undisclosed information.

As an example, Iqaluit was the only facility wherein they would offer level 5 care. This is a piece of information we didn't receive previously. It seems with every question, new information is cropping up. It further illustrates the lack of planning as that is becoming quite discernable. This is why members were trying to point out the lack of a strategy and to immediately pursue the construction of these three facilities simultaneously. These elder care facilities should be built at the same time.

Now, since the minister keeps referring to the 24 or 108 beds and separating them into three distinct facilities means that the beds would be numerous. Now, that makes me focus back on our existing elders' care facilities. They already exist and in use or no longer used but the facility remains.

The previous comment made by the hon. member is there is a possibility that these facilities will become redundant. That seems to be the way he is planning, as he probably isn't considering the other facilities. Is he giving careful consideration on the facilities that already exist? What is also stated from time to time is that these existing facilities already have employees who are quite capable.

Up to today, do you have enhancement plans to accommodate the needs of the existing facilities while the elder care facilities are being built? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Yes, I have stated here and I'll state it again that we're not closing any other facilities. Thank you.

**Chairman:** Thank you. Mr. Quassa.

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. Actually I am almost out of questions, but I wanted to reiterate this fact we keep touching upon. We anticipated starting two years ago that the facilities would be built simultaneously.

Now I want to make this statement, Mr. Chairman. We could have initiated the planning two years ago, as it is becoming clearer that it is only now that finally plans are being drafted two years later. We already stated then that these facilities are needed and the existing facilities need to be maintained properly. We already stated that.

The information we are hearing now is new and many of these details were previously not disclosed to us. As we hear this new information, it seems that the work is finally happening now. With the way the minister is speaking, I can perceive the lack of planning on his part. This is just a comment, Mr. Chairman. Thank you.

**Chairman:** Thank you for your comment, Mr. Quassa. Moving on, Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) In terms of the breakdown of levels 1 to 3 and 4 and 5, there is repeated mention of inefficiencies, economies of scale, and

the minister stated earlier that we can't afford elders facilities in every community. I think that's a statement that should be unpacked and explored a bit. It comes back to the issue, in my mind, of planning and consulting not just with the regular members, but consulting with communities and consulting with elders themselves.

I guess my first question is: to what extent does this current plan for three regional facilities represent a centralization of elders' care in Nunavut? (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickeys.

**Hon. George Hickeys:** Thank you, Mr. Chairman. I'm not sure if the term is "centralization." It's more recognition of where the higher need level of services can be provided using facilities. Again going back, I'll use this. We're here to talk about Rankin Inlet. The health centre in Rankin Inlet is able to provide a higher level of service than any of the other health centres in that region. That is why we have chosen that community to build this facility is to be able to provide the best care for elders that we can. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you, minister. Levels 4 and 5 need to be located in regional centres. That's the kind of the understanding that I'm getting. For those other levels, levels 1 to 3, there's nothing stopping those from being located outside of regional centres. Maybe the minister could

correct me if I'm wrong on that one. (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickeys:** Thank you, Mr. Chairman. I would like to say that our current facilities are meeting the needs of those levels of care, but as numerous members have brought up, there are waiting lists from their communities of elders who need to get into these facilities. We need to make more beds. If we can use a higher level care facility, if anything, it might extend the ability for somebody to stay in their community in a facility such as here in Iqaluit or in Arviat. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I mean, I have some feelings or opinions on this issue, but there are a lot of other people who have feelings or opinions on this too.

In terms of cost per bed and returning to that efficiency concern, how big of a factor is this cost per bed within the Department of Health in determining future plans for elders facilities? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickeys:** Thank you, Mr. Chairman. It is a factor. It's not the factor. The number one priority is obviously providing healthy and safe



locations for our elders. When we're looking at the cost per bed basis, when you look at, like I talked about the house, the 12-bed house that is a standard across the field of long-term care, that is where you're maximizing your efficiencies of staffing; facility needs. Again, going back to some of the numerous consultations that came across this project, having more recreation space, having more common space, having more outings, having more resources available, access to medical care, those are all factors into it as well.

I hope that answers the member's question. If not, I'm sure he will let me know. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) It does answer my question to a certain extent. Thank you.

To what extent are cultural factors coming into the department's plans? We have a very strong attachment to our home communities here in Nunavut. When you look at dollars and cents, it doesn't make sense, but we're human beings. We don't operate like robots. We're attached to our communities, whether they're small, whether they're disadvantaged, and I think the concept of putting an elders facility in every community was mentioned as not being realistic or reasonable.

I'll just put this out there: what if the most culturally appropriate thing for us to do as a government is to put an elders centre in every community? On the dollars and cents side, yes, it's a

challenge, but so is public housing, so is so much else about our territory. In terms of the cultural considerations that were put into place when they planned for three regional facilities, I would just like to hear how it was incorporated. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Again, I appreciate the member's question. It's a very personal one and a real one, and it's not something that is taken lightly. I would say that after health and safety, the cultural component was number two. That's why we're looking at the regions. At the very least we could have built one great big facility here in Iqaluit and shipped everyone here.

We recognize the importance of maintaining family connectivity. When we look at some of the reasoning behind Rankin Inlet, it's not just for the clinical side of things; it's also an airline hub for people from outlying communities. Every flight goes through Rankin Inlet. No matter where or why people are travelling, they would have an opportunity to at the very least visit their families or friends in a facility in a centralized location. I'm using your word, "centralized."

When we look at the recognition of keeping people closer to home, I would say that this is the next best option to having a facility in every community. It at least helps people stay in their region. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm going to go to the figures that the minister put out there, \$400 million to \$500 million and \$100 million per year to maintain and this is for an elders facility in every community. Based on the Rankin Inlet facility, it's approximately \$2 million per bed to build, so it's very expensive. If you multiply that out, 156 beds, okay, so we're already looking at \$300 million plus. That's my back-of-the-envelope math based on this substantiation sheet here.

What is the ballpark figure for the current three regional centre option in terms of capital and then operations and maintenance? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. We're not here to talk specific numbers to specific projects. That can be done in committee meetings, but these are rough estimates of what we're looking at and it would be to scale. Not every community would need a 24-bed facility.

When we look at what we currently do have to what we would currently need and, again, the member brings up some very real issues and things that we have to consider as a government, there are many competing interests and factors for our capital dollars. There are health centres. There are schools. There are power plants, not that we fund it directly through the government, but there are capital dollars expended. There are a number of different programs that we

have to run through our capital budgets to maintain buildings that currently exist. There are ongoing lifecycle capital dollars. There are small capital dollars. There's a lot of competing interest.

If we were to stop building schools and health centres and stop building public housing, maybe we could get it done in the next seven or eight years, but again, we have to balance all Nunavut's needs and this is the best path forward. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I do appreciate that this is the minister's or the government's opinion that this is the best path forward, but I think on this side of the House we're trying to make our voices heard and we're trying to make sure that all options are on the table and that other things are considered.

I think, as somebody who has an existing elders centre in my home community, if that was ever to be taken away, it's like ripping the heart out of the community, honestly. It would be devastating. I have spoken to people from Baker Lake and it is pretty sad stuff when you have that happening. It's a real core need that every community has and I realize we have financial pressures, but I would hope that the department has realized that this is something that needs to be approached very carefully. It needs to be considered from all angles before any of these decisions are made.

In terms of these existing facilities, the minister mentioned earlier national accreditation standards. How many of

the existing continuing care centres and elders centres are accredited nationally in Nunavut? (interpretation ends) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. It's an apples and oranges question, Mr. Chairman. When those facilities were first built and put into operation, it was at that day's standards. To today's standards, I would have to check, but I would doubt any of them would be up to today's standards. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) These new facilities would be nationally accredited, but there is no requirement to have the existing facilities nationally accredited, just for clarification. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. We're looking at a lot of our facilities when we're looking at accreditation standards and looking at how we can bring them up to national standards. There are a number of different benefits to that, the quality of care that is given being paramount. It also assists in other avenues with regard to staffing and training to make sure that your insurance requirements are being met, to make sure that the guidelines from the industry are being followed and that we can have more interconnectivity

of staffing if need be as well too during emergency situations. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm trying to get through my questions here.

In this 2015 report, *Continuing Care in Nunavut*, it shows on page 17 that there are a number of facilities that are currently providing level 4 care, including the Arviat Elders' Home and the continuing care facilities. Is that just a reflection of the aging in place practice that exists or were these continuing care facilities actually planned to offer up to level 4? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. The former, aging in place. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) On page 15 where it says that "Each facility..." This is in reference to the continuing care centre. "Each facility provides Level 3 and 4 nursing care to ten residents." That was not the original plan for those facilities, just to clarify that. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hicks:** Thank you, Mr. Chairman. It was recognized that when

those facilities were being built, there may be a need to provide level 4. We look at that with our staffing and the training model so that if somebody ages in place, we don't have to move them as soon as they hit that level 4. Our goal is to try to keep people moving as least amount as possible, especially when there are familial connections. The member from Gjoa Haven talked about an elder in the facility in his community that the spouse visits every day. It would have to be an extraordinary occurrence for us to move somebody out, unless the facility and staff were just not able to meet their health needs. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm going to come back to the initial topic, one of the first topics we brought up in our letter, which is the need for an elders' care strategy. The minister mentioned that long-term care facilities would just be one part of that strategy, and the minister also mentioned that it would be a... I forget what the exact phrase was, but he said it would be an extensive undertaking.

Well, I think it's an undertaking that needs to be started. It should be made a priority, particularly when you consider that such a strategy would involve consulting widely and take into account every community's desire to care for their elders as long as possible, just like the minister mentioned, keep them in place as long as possible, in their home community as long as possible so that these regional facilities are not the first place they have to go once they need care.

Would the minister be able to commit to getting this work started as soon as possible in terms an elders' care strategy for Nunavut? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hicks:** Thank you, Mr. Chairman. Again I appreciate the member's question and suggestion. As I mentioned earlier, it is something that is already on my radar. Again, I am fairly new to this portfolio. I need to figure out exactly what services interdepartmentally and other partners and stakeholders, but it is my intention to move forward with an overarching elder strategy. I think it would help me, for one, to be able to help coordinate resources, to be able to make sure that any partner departments or agencies have a clear path. It is something I am definitely planning on following up on. Thank you, Mr. Chairman.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Thank you, minister, for committing to that. My suggestion for pillar No. 1 of that strategy is the existing elders' care facilities across the territory. That's just a comment and suggestion. (interpretation) I also thank him. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Main. Ms. Towntongie.

**Ms. Towntongie:** Thank you, Mr. Chairman. Just a comment, to me, sending down elders to Ottawa deprives them of their language, their culture, and

the access to their family. As long as the Government of Nunavut could keep them within Nunavut, this is their home unlike the rest of us that are younger. A lot of them have never experienced living in the south. Yes, there are a lot.

In saying that, I have been around government for a long time. I know that no plan is perfect and I recognize the need for the government to make further efforts to refine and clarify its long-term plans for elders care in Nunavut, a strategy for Nunavut elders. In saying that, I also recognize the need of the legitimate concerns raised by a number of my colleagues concerning the lack of clarity surrounding the future use of existing facilities, and they are valid concerns. My question to the minister is: is there a strategy in place so that the existing use of the facilities will continue? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Our long-term care plan is designed to meet the needs of Nunavummiut. That does take into consideration existing facilities. That being said, we don't know. We're estimating populations, growth, and different needs. Mr. Chairman, it is all part of our plan. We need to make sure that we're covering off the existing needs and the level of care that is needed in the territory so that we don't have to send people to outside territory facilities. I have stated it numerous times here today that there is no plan to close existing facilities. Thank you.

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

**Ms. Towtongie:** Thank you, Mr. Chairman. I think Adam left. I think his wife is having a baby. Congratulations, Adam.

>> *Applause*

An elder that was being sent to Ottawa told his children, "*Qaplunaat nunanganut aullaqtitaujumanngittunga.*" "I do not want to be sent to the white man's land." I'm just saying that, but I appreciate the fact that the strategy by the minister will address the clarity and refine the long-term care for elders in Nunavut.

In questioning that, residential long-term care units often do not have the resources to provide the level of care for individuals with dementia. My question is and it's my final question: has there been any consideration given to creating a secured dementia care unit in Nunavut? It's my final question, Mr. Chairman. (interpretation) That's it.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Yes, that's phase 2 in the Iqaluit project.

If the Chair will indulge, I just want to touch on one of the topics that have been brought up a couple of times. I want to go into one of the rationale reasons of this project and it's to identify that there are an insufficient number of beds currently provided within Nunavut. There is a commitment to repatriate seniors currently being cared for out of territory for a number of reasons such as there's a greater likelihood that care staff will be able to speak Inuktitut.

If seniors are able to move back to Nunavut, the quality of life for those seniors will be improved by having family located in reasonable proximity for visiting and will allow for life that is respectful of culture and traditions. I can honestly state that that was a very high focus in our endeavour. Thank you.

**Chairman:** Thank you, Minister Hickey. We are on page H-3. Directorate. Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I have some questions on this other project on the addictions centre. It's a very small amount that is budgeted for this year, \$150,000, but it is an important first step with the addictions and trauma treatment centre. What is the proposed size of this facility? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickey:** Thank you, Mr. Chairman. Right now we're looking at 32 beds with outpatient services. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) On the substantiation sheet it provides a breakdown in terms of the funding commitments, some from the federal government, some from the GN, and then there's also a contribution from NTI. Some of that, I think, is under O&M, but could the minister give us a summary of how the capital portion is proposed to be split up between the parties? (interpretation) Thank you, Mr.

Chairman.

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

**Hon. George Hickey:** Thank you, Mr. Chairman. I'm just going to give percentages; I don't want to get into dollars here. We're looking at approximately 75 percent from the federal government and 25 percent between the GN and NTI. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) The other pillar under the addictions treatment strategy or the first pillar, I believe, was community-based treatment. As it pertains to capital, is there any need there for additional equipment to support those regional, I believe, on-the-land treatment or are all the capital needs being met? (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickey.

**Hon. George Hickey:** Thank you, Mr. Chairman. The groups that we're working with are doing their own capital under the contributions that we're providing them. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Moving on, the health centre in my home community of Arviat is very rarely fully staffed, but when it is fully staffed, it's too small. I was hoping that something would be moved into the preplanning envelope in terms of

expanding that existing health centre or looking at expanding it, but given that it isn't in the budget, I can assume that it's dropped off the list.

I would like to confirm that the department is aware that there is a serious space shortage at the Arviat Health Centre and there's also a space shortage that is affecting the home care workers. I recall looking at the home care workers' office this summer and they had medical supplies in their office stacked up. Is the department aware of these capacity constraints in terms of the capital in Arviat? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Those are priorities that we're looking at. The Arviat Health Centre isn't that old, so we're looking at an expansion on that one. The growth of the community, as the member is very well aware, has doubled since the year 2000. The growth wasn't anticipated when that building was built or wasn't anticipated as accurately as, I guess, maybe reality has proven, but it is definitely on our radar. I do want to assure that it is right in front of me. Thank you, Mr. Chairman.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Just going back to this Rankin Inlet facility in terms of how it's going to be built, on page 4 of 5 it mentions the design-build, which is the same process that was used for these schools that burnt down. It says

here, "The GN is intending to deliver the project with very limited external support." It also mentions that there are some risks involved with that model of contracting. If the minister could detail what types of risks are entailed when you're going into a project like this without any partners, going in alone for the total cost. (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Again the member has got a very good question. When we're looking at the risk with the new facility such as a long-term care facility, the standards are very tight. They are very strict. We want to maintain a facility that's going to be providing the highest level of care that we can. We also have to recognize that, building the capacity in a community that doesn't currently have a facility, we have to create that capacity. One of the aspects of this project is we're looking at running training modules before the construction is complete so that we do have staff that are ready to hit the ground. We've already had some initial forays with Nunavut Arctic College on that front. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) If we can learn from the mistakes of the past or experiences of the past, the Rankin Inlet Regional Health Facility, I believe, has never been fully staffed as it was designed to be. The building was completed, but the real limitation in my understanding is human or it has been to

date in the ability to fill positions. When we look at the plans for a regional elders facility, how has the department considered the human side of things in terms of the labour market, in terms of being able to staff the positions that will be created? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. That's the main reason why we want to make sure we get a jumpstart on the training side of things so we can have as many local residents; the personal care workers and the different levels of advancement in that field so that we can have as much local employment, so the volatility isn't there. When you're talking a health centre of nurses, physicians, and specialized health care professionals, only a small percentage of a long-term care facility have that high-level qualification that is needed. The base of it, as I'm sure the member is aware, in his home community there are a lot of local employment opportunities at long-term care centres, so that's what we're counting on. Thank you, Mr. Chairman.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. I just wonder if the minister just can briefly give me the status on the renovations. Is that all completed now from the old new hospital? I don't know. We always call it the old new hospital. If he can just tell me a little bit more about that. Thank you, Mr. Chairman.

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

Minister Hickes.

**Hon. George Hickes:** Thank you. I apologize for the delay. I just wanted to clarify one aspect of the scope of project. It is complete, the building and inside. Thank you.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. One thing that has come to my attention, and I have known it personally and also from other people, as you know, the rapid access, every morning you've got to get there before eight o'clock in order to get a number to see a doctor that day. There's often quite a lineup before eight o'clock because the doors are locked.

I have seen elders there. There are no chairs, there's like nothing, and in the wintertime it is cold, it really is, but everybody wants to go because they want to get that number. Telling everybody to come when it's open is just not going to work because everybody wants to get there early.

I'm wondering if the minister is aware of that problem and if he would give any consideration as to either there's a security in the other end of the hospital that maybe can come down a little earlier. The reason I was told that it is always locked is because there is no security in that area, but there are a couple of security guards that are in the newer side of the hospital.

If that doesn't work, would the minister consider providing some kind of shelter there because most of the people that are lining up are there because they are sick



and they really want to see a doctor. I just feel that this is an area that requires your attention. Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Angnakak. Your question is more of an operations question than it really is a capital question, but Minister Hickey, if you are prepared to answer it.

**Hon. George Hickey:** Thank you, Mr. Chairman. It is operational, but there are other doors that are open. There is the emergency side where people can go in and wait. There are the cafeteria doors where people could wait in there. I can't remember exactly what time it's open in the morning, but people go there for breakfast. I have stopped there myself.

With regard to putting out chairs or benches and that outside, I don't think that's something we would be looking at right now. There are options to wait indoors where it's more comfortable. There's a security window at the emergency portion. Again, this is always an adapting, like the rapid access clinic, and doing Wednesday night clinics and we're looking at doing Saturday clinics. We're obviously continuously assessing the usage and uptake of these things. Thank you.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. I know that perhaps the Chairman and maybe the minister views it operational, but it is about shelter. It is about wanting to request that something be looked at.

Usually we are not encouraged to go into

the hospital. Maybe the emergency area; maybe people can go wait there. That's one thing, but to go through the side doors and that, they're usually locked. I have tried it myself. The hallway doors are locked. They're not open until the security guy goes down. Everybody who is there are there because they want that number. I don't think you would find many people just waiting in the emergency, even though it's much more comfortable, like you said, and it's warm and everything, but I think everybody is worried that they're not going to get that number because everybody else is lining up on the outside.

Regardless of saying, "Oh, you could go over there," the reality is that everybody is waiting to get that number. That's why I have brought this up to your attention. Just that I think some kind of shelter, even if it's just to get the people out of the wind or if it's raining or snowing, whatever it is, just to look at it just to see how many people are lining up outside. The winter is upon us, so I think it can be very uncomfortable. That's just a comment.

I don't know if I am allowed to ask about an incinerator. Is that capital, Mr. Chairman?

**Chairman:** Thank you. I will let you complete your question and we will make a decision after that. Ms. Angnakak.

**Ms. Angnakak:** Thank you. I'm just wondering about whether or not the hospital got a new incinerator because the last one, I think, needed some kind of repair or replacement. Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Angnakak. I will allow the question. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. By all means, the incinerator has been on our radar and the planning is ongoing for that right now. The last incinerator, I believe I even had a message from one of the MLAs on the smoke coming out of there and the filtration system and that it wasn't up to current standards, so we are looking at replacing that. Thank you.

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

**Ms. Angnakak:** Thank you. Yes, I think I have heard that it is in need of replacement.

The other question I have is regarding the storage area that's behind the hospital. I understood that was in really poor condition. What is the status on that? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. We're utilizing alternative space right now until we can get a new warehouse on the capital plan down the road. Thank you.

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

**Ms. Angnakak:** Thank you. Just my last question, I was looking at the substantiation sheet for small lifecycle and for Iqaluit, for the hospital, it talks about fuel tank replacement and it was expected to start in the summer of 2019. I'm just wondering: has that started and

are you finished or what's with that? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. It's scheduled to be finished later this month, November 2019. Thank you.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. I thought of another question. The building that was the damp shelter for a while, is that Building 526? I'm wondering: if it is, what's the status of that building? I know it belonged to Health and I'm wondering: how is Health going to be using that building? Right now it's all boarded up. What's the plan for that? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. That building has been surplused and Family Services, I believe, had permission to use it for a period of time for the damp shelter, but I don't know what its future plans are. Thank you.

**Chairman:** Thank you. Ms. Kamingoak.

**Ms. Kamingoak:** Thank you, Mr. Chairman. Welcome, minister and your officials.

I just have one question. In your opening comments you state that Baker Lake and Kugluktuk continue to be the next two community health centres that were

identified for replacement in consideration for addition to future capital plans as planning projects. When do you anticipate those to be in the books? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. We're anticipating going into the capital planning the next capital budget. Thank you.

**Chairman:** Thank you. Ms. Kamingoak.

**Ms. Kamingoak:** Thank you, Mr. Chairman. That is 2020-21? Thank you, Mr. Chairman.

**Chairman:** Thank you. Minister Hickes.

**Hon. George Hickes:** Off by a year, '21-22. Thank you.

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

**Ms. Kamingoak:** Thank you, Mr. Chairman. I just want for the record, as you all know, I have been lobbying hard on behalf of my hamlet for the Kugluktuk long-term care facility. I would like to thank my hamlet for being the driving force on this project. I would also like to thank the minister for not closing the door on this issue. I really hope that the department and the government continue to support any community-led initiatives and projects on elder care. That's just my comment. Thank you, Mr. Chairman.

**Chairman:** Thank you, Ms. Kamingoak. Mr. Quassa, you had a question? Mr. Quassa.

**Mr. Quassa (interpretation):** Thank you, Mr. Chairman. You will give me clear direction if this is appropriate, Mr. Chairman.

Right after sealift, some of the communities were donated ambulances that are going to be owned by the communities. For example, I know Igloolik received one. Mr. Chairman, my question is: with those donated ambulances, will they be utilized by the health centre or am I out of line? Are they going to be used by the health centre or are they going to be contracted out to provide the services? Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Quassa. It's my understanding that these ambulances were provided in accordance, I think, with NAM was the driving force behind that, but Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. I thank the member for the question. Typically the way it works right now is it's on a fee-for-service basis. Thank you.

**Chairman:** Thank you. We are on page H-3. Health. Directorate. Total Capital Expenditures. \$27,500,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Go to page H-2. Health. Total Capital Expenditures. \$27,500,000. Agreed?

**Some Members:** Agreed.

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

**Some Members:** Agreed.

**Chairman:** Thank you. Minister of Health, any closing comments? Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Just briefly, I want to thank the members. I know there seemed to be a fair bit of confusion and this was an extraordinary addition. Like I had mentioned back in September, we would be bringing forward a last-minute addition and the understanding through this network outage created a gap in the written correspondence that I regret, obviously all of us do.

I just want to emphasize that we talk a lot about transparency and keeping people informed. I just want to reiterate my office is open all the time. If anyone has any questions or any committees want to call me to appear before them, I'm open anytime, anywhere. Thank you.

**Chairman:** Thank you, Minister Hickes. Do you want to make another comment? Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. I would be very remiss if I didn't thank all the staff that have been working extraordinarily hard over this last couple of months to move this project forward and the staff from the partner departments that have gone into the long-term planning, the working group, and the officials from Justice, CGS, Finance, and Health. There has been an extraordinary amount of work in a short period of time.

I really want to take the time to thank not just the officials that are with me in

the room, but there are many other people back at their desks and I hope they're listening because this project couldn't have moved forward without obviously the support of the legislature but with the preparation from all the staff. Thank you.

>> *Applause*

**Chairman:** Thank you, Minister Hickes. As you can see the amount of time in debate that we spent on this particular subject, long-term care is very important to all of our communities and it's something that the department really needs to keep in mind.

With that, when we started today, you said that you could not reply to the letter because of the issues we are having with our systems. I just want to remind you that when the systems are up and running, the committee will still expect a reply to that letter.

I thank the staff here for all the good questions they have asked over time. I will ask the Sergeant-at-Arms if he could please escort the witnesses out. Thank you. It has been a long couple of weeks.

This concludes our review of the proposed capital estimates, and I ask members to go to Bill 30 in your legislative binders for a clause-by-clause review.

We're going to take a quick five-minute break because the legal counsel has to be present here at the table. We will take a five-minute break until he gets here. Thank you.

>> *Committee recessed at 16:51 and resumed at 17:01*

**Chairman:** I would like to call the meeting back to order, please. Earlier I asked members to go to Bill 30 in their binders. Bill 30, *Appropriation (Capital) Act, 2020-2021*. Clause 1. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 2. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 3. Agreed?

**Some Members:** Agreed.

**Chairman:** Go to Schedule on page 2. Schedule. Amounts Appropriated for the Fiscal Year Ending March 31, 2021. Vote 2: Capital. Total Capital Appropriation. \$143,028,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Clause 4. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 5. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 6. Agreed?

**Some Members:** Agreed.

**Chairman:** Do members agree to Bill 30 as a whole? Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I just wanted to make a comment on this bill as it pertains to the budgeting process on the record for future years, just looking ahead to future years'

capital appropriations, if that's appropriate, Mr. Chairman. (interpretation) Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Main. If you could go ahead briefly, please. Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I just wanted to acknowledge all the passion and effort that everyone in this House has put into this budget on both sides of the House.

As regular members, we struggle to make ourselves heard sometimes, and I think the budgeting process is a crude mechanism that we have to exert influence over the government. As you know, Mr. Chairman, we do not have the ability to commit the government to spend money on things. When it comes to budgeting, we are left with a simple decision as regular members to approve or not approve.

I just wanted to acknowledge that the regular members, my colleagues, have done a very good job, I feel, of questioning the underlying assumptions that have gone into this year's capital estimates. Going forward, I think it's fair to say that we look forward to working with the government to make sure that Nunavummiut, their concerns and their wishes are reflected in future years' capital appropriations. (interpretation) That's all. Thank you, Mr. Chairman.

>> *Applause*

**Chairman:** Thank you, Mr. Main. Again, do members agree to Bill 30 as a whole?

**Some Members:** Agreed.

**Chairman:** Thank you. Do members agree, pursuant to Rule 62(2), that Bill 30 can be placed on the orders of the day for third reading?

**Some Members:** Agreed.

**Bill 31 – Supplementary  
Appropriation (Capital) Act, No.  
3, 2019-2020 – Consideration in  
Committee**

**Chairman:** Thank you. We're now going to move on to Bill 31, Supplementary Appropriation for Capital, No. 3, 2019-2020. I will now ask Minister Hickes if he has witnesses that he would like to appear before the committee. Minister Hickes.

**Hon. George Hickes:** Yes, please, Mr. Chairman.

**Chairman:** Thank you. Does the committee agree to have the witnesses come before the committee?

**Some Members:** Agreed.

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

Thank you. I will now ask Minister Hickes if he could introduce his witnesses and then proceed into your opening comments. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. To your left I have Deputy Minister of Finance Jeff Chown, and to your right I have Deputy Minister of Community and Government Services Constance Hourie.

Thank you, Mr. Chairman. I appear before you today to present Bill 31, *Supplementary Appropriation (Capital) Act, No. 3, 2019-2020*.

Through this bill, the government is seeking to increase its overall capital appropriation for 2019-2020 by \$10,363,000. There are three parts to this request, largely related to adjusting carryover amounts to reflect the results of our usual year-end work to prepare the financial statements.

First, Mr. Chairman and colleagues, we are seeking to carry over an additional \$766,000 from 2018-19 for the Department of Economic Development and Transportation. This includes \$207,000 as a carryover in respect of its Iqaluit Marine Infrastructure Project, as well as \$559,000 related to the Iqaluit International Airport. In this instance we are seeking this appropriation to return the airport's capital budget to where it should be had officials not coded a rebate as general revenue, a simple accounting error the department has taken steps to avoid going forward.

Second, Mr. Chairman and members, we are seeking to carryover an additional \$9.74 million from 2018-19 for the Department of Community and Government Services in respect of 25 separate projects. Rather than read out each project here, we have provided members with the full list of projects and the specific adjustments required in the briefing materials.

In both cases, our department's year-end accounting activities identified approved capital funding the departments had not spent in 2018-19, but also that we did not carry over to 2019-2020 already

through our *Supplementary Appropriation (Capital) Act, No. 2* in June 2019.

Third, Mr. Chairman and members, we are seeking to reduce the Department of Education's 2019 appropriation by \$143,000 for essentially the same reason. In this particular case we identified that the GN had spent this amount in 2018-19 but had also carried forward the spending authority into 2019-2020. Through this current bill we are now asking the Assembly to take back the authority for the Department of Education to spend this amount in 2019-2020.

The need for these adjustments relates primarily to timing and specifically the assumptions our departments make in the early spring ahead of our June session about when certain expenditures will be invoiced, paid, and accrued near fiscal year-end. Later in the spring and over the summer our departments work through the many transactions to provide us an accurate, point-in-time snapshot of the GN's specific financial situation on March 31. Such adjustments are a usual part of the year-end accounting procedures.

In no case does this bill seek to change the overall budgets for these projects. Instead our request will align more accurately the spending authorities we as an Assembly provide our departments for these projects with the actual spending and accounting treatment.

Mr. Chairman and members, this concludes my opening comments. I would be pleased to take any questions about this bill, but I would suggest that detailed questions about the state of

minor capital projects may be directed towards the responsible minister. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Hickes. Are there any general comments? If not, I will ask members to go to page 4 of the bill, which is Bill 31. Government of Nunavut. Supplementary Appropriation (Capital) No. 3, 2019-2020. Education. Not Previously Authorized. -\$143,000. Mr. Main. No? Sorry. Okay. -\$143,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Continuing. Community and Government Services. This would be on pages 5 and 6. Not Previously Authorized. Total Department. \$9,740,000. Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) In the information provided, one of these projects mentioned here is GN server room upgrades. My question is: what is the nature of these upgrades and specifically is it related to cyber security? It says "project ongoing." (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. This project is the relocation of the main server room. The current location cannot meet needs for expanded capacity. Thank you, Mr. Chairman.

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

**Ms. Angnakak:** Thank you. I just want

more clarification about the emergency water treatment. Under the comments in our briefing, it says “in planning, project ongoing.” I would just like to know: what is that all about? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. That is to purchase a portable reverse osmosis unit and a generator that can be flown anywhere in Nunavut except for Grise Fiord and Kimmirut due to the runway length to deal with any emergency water issues. Thank you.

**Chairman:** Thank you, Minister Hickes. We are on Community and Government Services. Not Previously Authorized. Total Department. \$9,740,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Going to page 7. Economic Development and Transportation. Capital. Not Previously Authorized. Total Department is \$766,000. Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) In the information provided here it mentions the arrangement between Iqaluit International Airport P3 and it mentions that there’s a rebate system or there’s an agreement in place regarding fuel and shipping prices. It was an accounting error, but my question is not about the accounting error. With regard to these rebates, is this the first time that there has been a rebate to the GN under this agreement or have there been previous rebates? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. It’s an annual adjustment of the contract that depends on the pricing. If our pricing was lower than what they negotiated, there would be a rebate; if it was higher, then it would be paid out. I don’t know offhand if there has been previously a rebate provided. We’re still fairly new into the project. I could check into that information, but I know the airport just opened a little over a year ago or two years ago, so I don’t know if there was a rebate the first year. I apologize. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) It also mentions here the old Iqaluit air terminal building. I believe, in terms of capital planning, it says here, “It could be a productive asset for the GN.” It’s my understanding that a lot of that building sits dormant or unused. In my opinion it could be used as a case study in bad capital planning where you build a new facility and then you have no plans for the old one. This is something that should have been planned out from the very beginning when previous governments were planning the monstrosity Iqaluit airport. It’s just a comment that it seems to be a very inefficient way of dealing with capital projects to have a potentially productive asset sitting idle there. (interpretation) It’s just a comment. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Main, for your comment. Again, we are on



Economic Development and Transportation. Capital. Not Previously Authorized. Total Department. \$766,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Go back to page 2. Government of Nunavut. Supplementary Appropriation (Capital) No. 3, 2019-2020. Schedule 1. Capital. Capital Appropriation. \$10,363,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. I now ask you to go to Bill 31 in your legislative binder, please.

It's Bill 31, *Supplementary Appropriation (Capital) Act, No. 3, 2019-2020*. Clause 1. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 2. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 3. Agreed?

**Some Members:** Agreed.

**Chairman:** Go to Schedule on page 2. Schedule. Supplementary Amounts Appropriated for the Fiscal Year Ending March 31, 2020. Vote 2: Capital. Total Supplementary Appropriation. \$10,363,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Clause 4. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 5. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 6. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 7. Agreed?

**Some Members:** Agreed.

**Chairman:** Do members agree to Bill 31 as a whole?

**Some Members:** Agreed.

**Chairman:** Thank you. Do members agree, pursuant to Rule 62(2), that Bill 31 can be placed on the orders of the day for third reading?

**Some Members:** Agreed.

**Chairman:** Thank you. I will now ask Minister Hickes if he has any brief closing comments. Minister Hickes.

**Hon. George Hickes:** Thank you. I just want to thank the members for the diligence on this. Portions of it were accounting in recognition that we do realize the error there and like I said in my opening comments, we will make sure it doesn't happen again.

I did locate the information on the rebate from last year; it was around \$285,000, for the members.

I want to thank again the staff for doing all the work behind the scenes to help me prepare for these. Thank you, Mr. Chairman.

**Chairman:** Thank you, Minister Hickes. We will now proceed on to Bill 32 and I will begin by asking Minister Hickes if he has opening comments and, if so, to please go ahead. Minister Hickes.

**Bill 32 – Supplementary  
Appropriation (Operations &  
Maintenance) Act, No. 2, 2019-  
2020 – Consideration in  
Committee**

**Hon. George Hickes:** Thank you, Mr. Chairman and members. I appear before you today to present Bill 32, *Supplementary Appropriation (O&M) Act, No. 2, 2019-2020*.

Through this bill the government is seeking to increase its overall O&M appropriation for 2019-2020 by \$544,000. We are requesting this amount so that the Department of Community and Government Services can fully support the participation of Team Nunavut at the upcoming 2020 Arctic Winter Games in Whitehorse.

Our government actively supports sports and recreation activities across Nunavut, and has supported participation in past Arctic Winter Games.

Mr. Chairman and members, when budgeting for the 2020 Games, the department set aside \$1,671,000 within its 2019-2020 appropriations. However, as our officials began preparing for this year's Games, they have increased their cost estimates to \$2.2 million. This is higher than the initial budget largely because quotes from airlines came in 44 percent higher than expected.

Specifically the department has projected airline costs of about \$723,000

based on costs from previous years. The new quotes came in at \$1,276,000. Airlines indicate these higher costs relate to fuel prices, additional mileage to Whitehorse, increase in participant numbers, and an additional plane to transport sled dogs to compete in mushing events.

As noted, our government is hoping to send more individuals to the Games themselves. Community and Government Services are targeting about 300 participants this year, including athletes, coaches, managers, youth ambassadors, and mission staff. In comparison, 246 individuals made up the 2018 Team Nunavut. Increased participation in these Games responds to the interest of a deeper and more vibrant sports and recreation scene across the territory and it's something we want to support.

Mr. Chairman and members, this concludes my opening comments and I would be pleased to take any questions about this bill. Thank you.

**Chairman:** Thank you, Minister Hickes. Are there any general comments? Ms. Towntongie.

**Ms. Towntongie:** Thank you, Mr. Chairman. Just a comment that if sled dogs are going to compete in the Arctic Winter Games, the Nunavut style of sled dog is very vastly different from the gangline. We have a fan hitch. We have a ladder type sled and they have a standing sled, and that the government will consider those. I wanted that on the record. Thank you, Mr. Chairman.

**Chairman:** Thank you for your comment. Mr. Quassa, do you have a

comment? Please go ahead.

**Mr. Quassa** (interpretation): Thank you, Mr. Chairman. Hearing about the cost of the airlines being 44 percent higher than expected, I would want the details. Maybe there wasn't enough monitoring before the price hike. I wonder if they closely monitor the airlines they're planning to use to see if the cost will be the same. They're just anticipating how much it will cost. Although I'm seeing some heads shaking, I'm just saying that it should be monitored more closely. Thank you, Mr. Chairman.

**Chairman:** Okay. Thank you, Mr. Quassa, for your comment. We are on page 4. Supplementary Appropriation (Operations and Maintenance) No. 2, 2019-2020. Community and Government Services. Operations and Maintenance. Not Previously Authorized. Total Department is \$544,000. Ms. Angnakak.

**Ms. Angnakak:** Thank you, Mr. Chairman. I'm just curious about the bullet where it says it wants to send about 300 participants. My first question is: how firm are they with these numbers? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. Pretty firm. There might be some variation of teams at the last minute maybe not being able to go or coaching staff and that type of thing, but the estimate of 300 is pretty firm. Thank you.

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

Ms. Angnakak.

**Ms. Angnakak:** Thank you. I'm wondering if the minister can tell us what percentage of contingency is built into this budget to accommodate these changes that may happen. Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. There are no contingencies. Once the estimates came in from the airlines from the firm numbers, it allowed the department to be able to set their budget for it. Thank you.

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

**Ms. Angnakak:** Thank you. Just for my understanding, let's say, as you gave an example, maybe a team withdraws and the costs aren't as high as you thought, what would happen to the surplus? It would just go back to government to be used for something else? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I don't know the intimate details of the departmental, what line, if there are other programs involved in that, whether this is just sports and recreation or if this is an individual line item for the specific Games. If it was for sports and recreation, then it could be used for other activities around the territory. If it's a specific line item to these Games, then it would have to go back. Thank you.

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

**Ms. Angnakak:** Thank you, Mr. Chairman. Seeing that some communities are way more expensive than others, and I'll use my favourite example of Grise Fiord, is this going to allow all communities to participate no matter what the cost? Sometimes the more costly communities don't always have the opportunity to participate in some sporting events. Will the Arctic Winter Games and the money that's going towards it from the Nunavut government allow all communities to participate? Thank you, Mr. Chairman. That's my last question.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. It's the territorial teams that are being put forward, so there are opportunities for athletes from all communities to participate. Depending upon the makeup of the teams, who qualifies to go to the Arctic Winter Games and things like that, there might be some variables, but if somebody qualifies to go, they will be going. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) Did the department approach any private entities in terms of sponsorships to try to share the costs with the private sector? (interpretation) Thank you, Mr. Chairman.

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

Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman. Not that I'm aware of. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I'm surprised. I mean, it's a big hit, the \$2 million. That's four public housing units. We support sports and recreation and so do many private businesses. I'm thinking of major retailers or major airlines. (interpretation) That should be given consideration in the coming years. Would CGS consider it? Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I know, depending upon the sport, there are sometimes local businesses or local groups that do support individual teams where they're training and attending qualifying events and things like that are assisted with. When it comes down to the Arctic Winter Games, I'm sure the minister is paying attention to the comments and if there are opportunities to help lower these costs down the road, I'm sure he would explore them. Thank you.

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

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) The airline quote is mostly... . Over half of this \$2 million is for flights. What specific airlines are going to be involved

in terms of transporting the team?  
(interpretation) Thank you, Mr.  
Chairman.

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

**Hon. George Hickes:** Thank you, Mr.  
Chairman. The information that I have  
just talks to support charter air travel. I  
don't have the actual winner of the... .  
There are some scheduled flights as well  
too, obviously, to bring the students to  
here and then the charters after. I don't  
have the name of the airline that is doing  
the actual flying. Thank you, Mr.  
Chairman. There would be a mix  
between chartered and scheduled.

**Chairman:** Thank you, Minister Hickes.  
Mr. Main, please continue.

**Mr. Main** (interpretation): Thank you,  
Mr. Chairman. (interpretation ends) It  
mentions an additional plane to transport  
sled dogs. Specifically with transporting  
sled dogs in this additional plane, what is  
the extra cost on that component?  
(interpretation) Thank you, Mr.  
Chairman.

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

**Hon. George Hickes:** Thank you, Mr.  
Chairman. A little over \$200,000. Thank  
you.

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

**Mr. Main** (interpretation): Thank you,  
Mr. Chairman. (interpretation ends) In  
terms of the contingent, the \$200,000, is  
that for a number... ? It sounds like a  
silly question, but how many dogs? Is

that one dog team? Is it for two dog  
teams? Is it a dog team from every  
region? (interpretation) Thank you, Mr.  
Chairman.

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

**Hon. George Hickes:** Thank you, Mr.  
Chairman. Right now two dog teams,  
participants and coaches. Thank you.

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

**Mr. Main** (interpretation): Thank you,  
Mr. Chairman. (interpretation ends) It's  
\$100,000 per dog team, so that's pretty  
steep. I'll just leave that as a comment.

On the team numbers it says here that  
it's going up from the last Games, from  
246 individuals to about 300.  
Specifically out of those 300, how many  
of those travellers would be Government  
of Nunavut civil servants?  
(interpretation) Thank you, Mr.  
Chairman.

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

**Hon. George Hickes:** Thank you, Mr.  
Chairman. I can't speak to the makeup  
of volunteer coaches, managers, cultural  
participants, or mission staff, but there  
are three staff that are scheduled to  
travel. Thank you.

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

**Mr. Main** (interpretation): Thank you,  
Mr. Chairman. (interpretation ends) I  
wonder whether the department will be  
making any cuts to other areas in order  
to fund this. Basically, will the

department be looking to make up this difference in other areas by cutting? It could be discretionary duty travel by staff. Where is the department proposing to pull this half a million dollars from? (interpretation) Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. This is not funded from within; we're asking for new money. Thank you.

**Chairman:** Thank you, Mr. Main. Sorry. Thank you, Minister Hickes.

>> *Laughter*

Mr. Main, please continue.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. We support the young people, but I'm concerned about possible cost increases for the air transportation services.

This is my last question. There are approximately 300 participants in this event. When we look at the NWT or Yukon, how many participants are they sending to the Games? Are they in that 300 range or are we sending the largest contingent? That's going to be my last question. Thank you, Mr. Chairman.

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

**Hon. George Hickes:** Thank you, Mr. Chairman. I don't know what the team makeup is of the NWT or Yukon at this time. I'm sure it's something that the members can follow as the Games

progress to see a comparison. I do know that with the Games being in Whitehorse, obviously the Yukon government would be spending the least amount on travel. The NWT is the next door neighbour and we have a little bit farther to go. As far as numbers of athletes and participants in the other jurisdictions, I don't have that information. Thanks.

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

**Ms. Towtongie:** Thank you, Mr. Chairman. Just to put into perspective, I have been with the Canadian Dog Racing Association for about 30 years. Looking at the costs, it seems huge, but I want the regular members to know that the lead dog, if you're going to be competing, is \$6,000, the wheel dog is \$3,000, and if you're going to get a competitive type of sled, standing sled, it's going to be approximately \$3,000, including the fact that these types of dogs, they are now putting computer chips into the dogs so we don't switch them. Looking at that cost of airline, \$200,000, in perspective to me, would be realistic. Thank you, Mr. Chairman.

**Chairman:** Thank you for your comment, Ms. Towtongie. Ms. Kamingoak, no? Sorry. I thought you had your hand up for a question. Okay. We are on Supplementary Appropriation (Operation and Maintenance) No. 2, 2019-2020. Community and Government Services. Operations and Maintenance. Not Previously Authorized. Total Department. \$544,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Go back to page 2. Government of Nunavut. Supplementary Appropriation (Operations and Maintenance) No. 2, 2019-2020. Schedule 1. Operations and Maintenance. Operations and Maintenance Appropriation. \$544,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Go to Bill 32 in your legislative binder. Bill 32, *Supplementary Appropriation (Operations and Maintenance) Act, No. 2, 2019-2020*. Clause 1. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 2. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 3. Agreed?

**Some Members:** Agreed.

**Chairman:** Go to the Schedule on page 2. Schedule. Supplementary Amounts Appropriated for the Fiscal Year Ending March 31, 2020. Vote 1: Operations and Maintenance. Total Supplementary Appropriation. \$544,000. Agreed?

**Some Members:** Agreed.

**Chairman:** Thank you. Clause 4. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 5. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 6. Agreed?

**Some Members:** Agreed.

**Chairman:** Clause 7. Agreed?

**Some Members:** Agreed.

**Chairman:** Do the members agree to Bill 32 as a whole? Mr. Main.

**Mr. Main** (interpretation): Thank you, Mr. Chairman. (interpretation ends) I would just like to voice my concern that apparently the government did not, to the best of our knowledge, approach any other parties in terms of sharing the cost of the Arctic Winter Games. I would strongly recommend that for future years and future expenditures of this type that private organizations are approached in terms of cost sharing because I do not believe that the government has sufficient funds to pay for everything by ourselves without partners all the time. (interpretation) I would like that to be considered for future events. Thank you, Mr. Chairman.

**Chairman:** Thank you for your comment, Mr. Main. Again, do members to Bill 32 as a whole?

**Some Members:** Agreed.

**Chairman:** Thank you. Do members agree, pursuant to Rule 62(2), that Bill 32 can be placed on the orders of the day for third reading?

**Some Members:** Agreed.

**Chairman:** Thank you. Now I will ask Minister Hickes if he has any closing comments. Minister Hickes.

**Hon. George Hickes:** Thank you, Mr. Chairman and members. Just very

briefly I want to thank everyone in the room for their support of this. These sports activities for some of these kids and athletes are once-in-a-lifetime opportunities and can be a real game-changer in promoting activity, physical fitness, and just the team camaraderie and just the pride of competing for Nunavut. Thank you, Mr. Chairman.

**Chairman:** Thank you, Mr. Hickes. On behalf of the committee, I thank you and your staff for being here to answer the questions that were posed to these particular items or bills. Now I will ask the Sergeant-at-Arms if you could please escort the witnesses out. Mr. Akoak.

**Mr. Akoak:** Thank you, Mr. Chairman. I move a motion to report progress. Thank you, Mr. Chairman.

**Chairman:** Thank you. There is a motion on the floor to report progress. The motion is not debatable. All those in favour. Nobody? All those in favour. Thank you. Opposed. Motion carried. I will now rise to report progress to the Speaker.

**Speaker:** Item 20. Report of the Committee of the Whole. Mr. Rumbolt.

### **Item 20: Report of the Committee of the Whole**

**Mr. Rumbolt:** Thank you, Mr. Speaker. Your committee had a productive day today.

>>*Laughter*

Your committee has been considering Bills 30, 31, and 32 and would like to report that Bills 30, 31, and 32 are immediately ready for third reading. Mr.

Speaker, I move that the Report of the Committee of the Whole be agreed to. Thank you, Mr. Speaker.

>>*Applause*

**Speaker** (interpretation): Thank you. There is a motion on the floor. Is there a seconder? Member Qamaniq. The motion is in order. All those in favour. All those opposed. The motion is carried.

Third Reading of Bills. (interpretation ends) Minister of Finance, Minister Hickes.

### **Item 21: Third Reading of Bills**

#### **Bill 30 – Appropriation (Capital) Act, 2020-2021 – Third Reading**

**Hon. George Hickes:** Thank you, Mr. Speaker. It's with great pleasure that I move, seconded by the Hon. Member for Arviat South, that Bill 30, *Appropriation (Capital) Act, 2020-2021*, be read for the third time. Thank you, Mr. Speaker.

**Speaker** (interpretation): The motion is in order. (interpretation ends) To the motion. (interpretation) All those in favour. All those opposed. The motion is carried. Bill 30 (interpretation ends) is ready for assent.

(interpretation) Continuing on. Minister Akeeagok.

**Hon. David Akeeagok** (interpretation): Thank you, Mr. Speaker. I seek unanimous consent to go back to Item 13 in the *Orders of the Day*. Thank you, Mr. Speaker.



**Speaker** (interpretation): Minister Akeegok is seeking unanimous consent to go back to Item 13 in the *Orders of the Day*. Are there any nays? Minister Akeegok.

**Revert to Item 13: Tabling of Documents**

**Tabled Document 214 – 5(2):  
Tunngavia: Nunavut Socio-economic Monitoring Report 2018**

**Hon. David Akeegok** (interpretation): Thank you, Mr. Speaker. I also thank my colleagues. Today (interpretation ends) I am tabling the *Tunngavia: Nunavut Socio-economic Monitoring Report* for 2018. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. For the record, the first document tabled was by the Minister of Economic Development and Transportation.

Continuing on. Minister of Community and Government Services, Minister Kusugak.

**Tabled Document 215 – 5(2): Office of the Fire Marshal 2017 Annual Report**

**Tabled Document 216 – 5(2): 2016-2017 Petroleum Products Division Annual Report**

**Hon. Lorne Kusugak** (interpretation): Thank you, Mr. Speaker. I also thank my colleagues for giving us consent to go back to this item.

(interpretation ends) Mr. Speaker, I am tabling the 2017 *Annual Report of the Office of the Fire Marshal* and also the other document, I would like to table the

2016-17 *Annual Report of the Petroleum Products Division*. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Tabling of Documents. Minister responsible for the Qulliq Energy Corporation, Minister Ehaloak.

**Tabled Document 217 – 5(2): 2018-2019 Annual Report for the Qulliq Energy Corporation**

**Hon. Jeannie Ehaloak** (interpretation): Thank you, Mr. Speaker. (interpretation ends) I am tabling the 2018-19 *Annual Report for the Qulliq Energy Corporation*. (interpretation) Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Tabling of Documents. Minister of Health, Minister Hickes.

**Tabled Document 218 – 5(2): Chief Medical Officer of Health's 2018-2019 Tobacco Control Act and Smoke-free Places Act Annual Report**

**Tabled Document 219 – 5(2): 2018-2019 Annual Report on the Operation of the Medical Care Plan**

**Hon. George Hickes**: Thank you, Mr. Speaker. I would like to table two documents today.

Mr. Speaker, I am tabling the *Chief Medical Officer of Health's 2018-19 Tobacco Control and Smoke-free Places Act Annual Report*. Thank you, Mr. Speaker.

I would also like to table the 2018-19

*Annual Report on the Operation of the Medical Care Plan.* Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you. Tabling of Documents. Premier of Nunavut, Premier Savikataaq.

**Tabled Document 220 – 5(2): 2012-2013 Nunavut Implementation Panel Annual Report**

**Tabled Document 221 – 5(2): 2014-2015 Annual Report on the State of Inuit Culture and Society**

**Hon. Joe Savikataaq:** Thank you, Mr. Speaker. I have two documents to table. The first one is the 2012-13 *Nunavut Implementation Panel Annual Report*, and the other one is the 2014-15 *Annual Report on the State of Inuit Culture and Society*. Thank you, Mr. Speaker.

**Speaker** (interpretation): Thank you very much. Tabling of Documents. There are no more. Continuing on. *Orders of the Day*. Mr. Clerk.

**Item 22: Orders of the Day**

**Clerk** (Mr. Quirke): Thank you, Mr. Speaker. *Orders of the Day* for November 6:

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

8. Returns to Written Questions
9. Replies to Opening Address
10. Petitions
11. Responses to Petitions
12. Reports of Standing and Special Committees on Bills and Other Matters
13. Tabling of Documents
14. Notices of Motions
15. Notices of Motions for First Reading of Bills
16. Motions
17. First Reading of Bills
18. Second Reading of Bills
19. Consideration in Committee of the Whole of Bills and Other Matters
  - Bill 8
  - Bill 26
  - Bill 29
  - Bill 33
  - Bill 34
20. Report of the Committee of the Whole
21. Third Reading of Bills
  - Bill 31
  - Bill 32
22. Orders of the Day

Thank you.

>> *Applause*

**Speaker** (interpretation): Thank you.  
The Legislative Assembly of Nunavut  
stands adjourned until Wednesday,  
November 6, at 1:30 p.m.

Sergeant-at-Arms.

>>*House adjourned at 17:50*

