



**NORTHWEST TERRITORIES  
LEGISLATIVE ASSEMBLY**

**3rd Session**

**Day 45**

**12<sup>th</sup> Assembly**

**HANSARD**

**THURSDAY, MARCH 25, 1993**

Pages 1177 - 1206

Page numbers reflect printed Hansard

**The Honourable Michael A. Ballantyne, Speaker**

**MEMBERS PRESENT**

Hon. Titus Allooloo, Mr. Antoine, Mr. Arngna'naaq, Mr. James Arvaluk, Hon. Michael Ballantyne, Hon. Nellie Cournoyea, Mr. Dent, Mr. Gargan, Hon. Stephen Kakfwi, Mr. Koe, Mr. Lewis, Mrs. Marie-Jewell, Hon. Rebecca Mike, Hon. Don Morin, Hon. Richard Nerysoo, Mr. Ningark, Mr. Patterson, Hon. John Pollard, Mr. Pudlat, Mr. Pudluk, Hon. John Todd, Mr. Whitford, Mr. Zoe

**ITEM 1: PRAYER**

---Prayer

**SPEAKER (Hon. Michael Ballantyne):**

Mr. Clerk, it does not appear we have a quorum. Can you do a roll call please?

**CLERK OF THE HOUSE (Mr. Hamilton):**

Mr. Pudluk, Mr. Arvaluk, Mr. Pudlat, Mr. Koe, Mr. Lewis, Ms. Mike, Mr. Pollard, Ms. Cournoyea, Mr. Nerysoo, Mrs. Marie-Jewell, Mr. Dent, Mr. Morin, Mr. Arngna'naaq.

**MR. SPEAKER:**

Thank you, Mr. Clerk. It appears we have a quorum. The chair recognizes a quorum. Orders of the day. Item 2, Ministers' statements. Madam Premier.

**ITEM 2: MINISTERS' STATEMENTS**

Minister's Statement 71-12(3): Minister's Absence From House

**HON. NELLIE COURNOYEA:**

Mr. Speaker, the Honourable Stephen Kakfwi will be absent from the House today. He is attending a community justice conference in Inuvik. Thank you.

**MR. SPEAKER:**

Item 2, Ministers' statements. Item 3, Members' statements. Mr. Dent.

**ITEM 3: MEMBERS' STATEMENTS**

Member's Statement On Complicated Language In GNWT Legislation

**MR. DENT:**

Thank you, Mr. Speaker. My honourable colleague from Yellowknife Centre has commented on several occasions about the need to ensure that government communications are worded plainly and in a fashion which can be easily understood by all of our constituents. I, too, feel that this is important, particularly with respect to the wording of legislation and regulations used by a broad segment of the public.

Recently, I have been reviewing the Territorial Labour Standards Act and I find that it is a terrible example of badly worded legislation. For example, Mr. Speaker, here is the way the act defines Victoria Day. I quote, "The day fixed by the Governor General for observance of the birthday of the reigning sovereign and includes any days substituted for any such holiday pursuant to section 23 or 25." If we turn to section 23, "Any other holiday may be substituted for a general holiday in any of the following circumstances: a) where one, a class of employees of an employer is represented by a trade union; and two, the parties to a collective agreement entered into with regard to the terms or conditions of employment of the employees notify the labour standards office or in writing but a specified day has been designated in the collective agreement as a holiday with pay in lieu of a general holiday under this part. The designated day shall, for those employees mentioned in the collective agreement, be a general holiday for the purposes of the act b) where one, no employees of an employer are represented."

Mr. Speaker, I will stop quoting at this point, but this section of the act rambles on for almost a full page. It is tough to get a day off, Mr. Speaker. Seriously, though, I think this demonstrates a problem with our labour standards laws. It is not enough to enact legislation and put it into the hands of employers and employees. This Assembly must ensure that these important statutes are clear and understandable. I have many other concerns about the Territorial Labour Standards Act which I will be raising with the Minister during the remainder of this session. However, I hope at the very least, Mr. Speaker, he recognizes the need to update and clarify the language and terminology of this statute. Thank you, Mr. Speaker.

**MR. SPEAKER:**

Thank you, Mr. Dent. Item 3, Members' statements. Item 4, returns to oral questions. Ms. Mike.

**ITEM 4: RETURNS TO ORAL QUESTIONS**

Return To Question 528-12(3): GNWT Involvement In Phase I Of National AIDS Strategy

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. I have a return to oral question asked by Mr. Lewis on March 18, 1993, regarding the GNWT involvement in phase I of the national AIDS strategy.

Mr. Speaker, on March 18, 1993, the Member from Yellowknife Centre asked me whether the Government of the Northwest Territories was involved in phase I of the national AIDS strategy. Mr. Speaker, the Department of Health staff participated actively in phase I of the strategy with respect to the development of the Canada blue print on HIV/AIDS and the joint national committee on aboriginal AIDS education and prevention.

The Department of Health was consulted quite extensively during the development of the national strategy, phase I, through a contractor hired by the federal government for the purpose, through the federal/provincial/territorial advisory committee on AIDS, and through the other federal bodies

Page 1178

dealing with AIDS, such as the health promotion directorate, the laboratory centre for disease control, and the federal centre for AIDS. During phase I of the national AIDS strategy, four NWT community groups accessed funds from the federal community development and support fund.

The department has also been involved in discussion leading to phase II of the strategy. Thank you, Mr. Speaker.

I have two other returns, if I may, Mr. Speaker. Thank you.

Further Return To Question 532-12(3): Press Release Announcing National AIDS Strategy

I have a return to oral question, asked by Mr. Lewis on March 18, 1993, regarding the press release announcing the national AIDS strategy.

Mr. Speaker, on March 18, 1993, the Member for Yellowknife Centre asked me whether any research on AIDS is done in the Northwest Territories. As a result of the Northwest Territories' size and limited facilities, most of the research conducted on AIDS is applied research. Research, monitoring and

surveillance can sometimes be very similar, some of the things we are learning about AIDS in the Northwest Territories that might be called "research" are:

1. The way HIV affects Inuit or Dene people. Each known case of infection is monitored very carefully to see if there are any differences in the way aboriginal people of the NWT get sick compared to southern Canadians infected with HIV;
2. The way the epidemic is spreading. The Department of Health has been looking at how the virus is spreading here compared to southern Canada and the rest of the world;
3. Why people are putting themselves at risk. What precautions do NWT residents take (or do not take) that places them at risk of getting infected; and

Thank you, Mr. Speaker.

Return To Question 548-12(3): Status Of Recommendations On Abortion Review

I have a return to oral question asked by Mrs. Marie-Jewell on March 19, 1993, regarding the status of recommendations on the abortion review.

Mr. Speaker, on March 19, 1993, the Member for Thebacha asked me what the department's progress was on the abortion review committee's recommendations.

Mr. Speaker, the Stanton Yellowknife Hospital is proceeding with implementation of the recommendations and will be providing an update to the department following its board meeting in April, 1993.

With respect to the other NWT hospitals, abortions have been provided to women from the Inuvik region at the Inuvik Regional Hospital since mid-January, 1993. Abortion services are expected to be available at the Baffin Regional Hospital by mid-May, 1993. Health professionals in the Baffin region will be provided with instruction on abortion counselling at a nursing conference to be held in Iqaluit in May, 1993. Community health representatives in the Baffin region will have a workshop on abortion counselling next week.

Mr. Speaker, the H H Williams Memorial Hospital and the Department of Health have agreed that while abortions will not be performed at the hospital, clients will be referred to the public health unit in Hay River

for counselling and information on the availability of services in Yellowknife. Thank you, Mr. Speaker.

**MR. SPEAKER:**

Item 4, returns to oral questions. Mr. Allooloo.

Further Return To Question 526-12(3): NWT Athletes' Participation In Aboriginal Summer Games

**HON. TITUS ALLOOLOO:**

Thank you, Mr. Speaker. I have a return to oral question asked by Mr. Zoe on March 18, 1993 regarding the North American aboriginal summer games.

Mr. Speaker, I can confirm that the department will consider financial support to groups or teams that submit their proposals to participate in this summer's North American indigenous games.

As I indicated in my earlier reply on this matter, the department does not have a program for these games, nor have there been any specific plans made.

Mr. Speaker, the department will, however, review requests on a case by case basis and will assist with travel costs to the games, similar to our approach in 1990.

Since there is no specific program in place to allow for participation in the indigenous games, I will need to review and approve requests. To allow communities time to submit requests, I am prepared to receive requests up to May 18, 1993. I will make the decision on funding to be provided at that time and groups will have two months to prepare teams for the competition. Consideration will be given based on the official size of teams allowed by the North American indigenous games technical criteria. Thank you, Mr. Speaker.

**MR. SPEAKER:**

Item 4, returns to oral questions. Item 5, oral questions. Mr. Koe.

**ITEM 5: ORAL QUESTIONS**

Question 585-12(3): Status Of Chief Commissioner's Report On WCB

**MR. KOE:**

Mahsi, Mr. Speaker. I have a question for the Minister responsible for the Workers' Compensation Board. Mr. Speaker, in mid-January a review was completed by Mr. Garnet Garvin on the Workers' Compensation Board, and the report was tabled in this House. I would like to ask the Minister the status of the final report of the chief commissioner. What is the

Page 1179

Workers' Compensation Board doing with the recommendations made by the chief commissioner?

**MR. SPEAKER:**

Mr. Todd.

Return To Question 585-12(3): Status Of Chief Commissioner's Report On WCB

**HON. JOHN TODD:**

In the report made by the chief commissioner, there are recommendations that require legislative changes. On Tuesday, I will be tabling a legislative action paper. There are also a number of recommendations in the report that do not require legislative change, that can be done now based upon board direction. It is my understanding that that is happening with the new board. They are going to be taking the recommendations that can be done, outside of legislation, and enact some of them. Mr. Speaker, on Tuesday, as long as I do not have any problems with translation, I hope to table a Workers' Compensation Board legislative action paper. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Pudlat.

Question 586-12(3): Funding Arrangements For Divisional Boards

**MR. PUDLAT:**

(Translation) Thank you, Mr. Speaker. I have a question for the Minister of Education. I think everyone is aware that the divisional board's budget will now be put out quarterly instead of monthly. I am asking the Minister of Education with regard to funding for divisional board, will this be more appropriate and will they receive more interest? Can the Minister indicate what the outcome of this process will be? Thank you, Mr. Speaker.

**MR. SPEAKER:**

Mr. Nerysoo.

Return To Question 586-12(3): Funding Arrangements For Divisional Boards

**HON. RICHARD NERYSOO:**

Mr. Speaker, the present method of payments with regard to financing the school boards is on a monthly basis. I have spoken to the representatives of the school boards and have indicated to them that I will deal with the question of the needs of financing, but it is certainly not our intention to move away from the monthly payment schedule. We will increase the amount based on the need to accommodate their ability to delivery programs.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Ningark.

Question 587-12(3): Reinstatement Of Quarterly Funding For Divisional Boards

**MR. NINGARK:**

Thank you, Mr. Speaker. To continue with the questioning of my colleague from Lake Harbour, I would like to direct my question to the Minister for Education. Initially the school boards or community education councils were funded on a quarterly basis. They were paid every three months. This allows the community education council, or the divisional board, to get into the financial management. By that I mean, they were able to make a term deposit and earn interest and use that money to fund other programs not financed by the system. I wonder if the Minister has received requests from each of the divisional boards or community education councils requesting the initial funding be reinstated on a quarterly basis? Thank you.

**MR. SPEAKER:**

Mr. Nerysoo.

Return To Question 587-12(3): Reinstatement Of Quarterly Funding For Divisional Boards

**HON. RICHARD NERYSOO:**

Thank you, Mr. Speaker. Requests have been made by various school boards that we pay or provide financial resources on a quarterly basis. However, as

a result of our response to the Auditor General, who recommended and was approved in this House that we fund our boards based on a monthly schedule, we have responded positively. When I spoke to the boards' representatives, I indicated to them I would pay financial resources based on their need and if up-front money was required, then we would do that, but we would still pay over a 12-month schedule. The larger amounts would be given early on in the year.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Dent.

Question 588-12(3): Revisions To Labour Standards Legislation

**MR. DENT:**

Thank you, Mr. Speaker. My question is for the Minister of Safety and Public Services. Mr. Speaker, I believe this Minister in particular is someone who believes in speaking plainly and saying what he means clearly, that is why it is so ironic that he should be responsible for labour standards legislation which is framed in language which is complicated and difficult to interpret. Mr. Speaker, would the Minister confirm that this statute has never been subjected to a comprehensive revision, even though it has existed in its present form since 1967?

**MR. SPEAKER:**

Mr. Todd.

Return To Question 588-12(3): Revisions To Labour Standards Legislation

**HON. JOHN TODD:**

Me no understandee. No, Mr. Speaker, it is my understanding, in the spring of 1980, there was a labour standards law review panel and they reported to the Minister at the time with a number of recommendations. I agree with the honourable Member that there is a need for some kind of comprehensive review of these laws because, as he said earlier, they were created in the 1960s. We are not in the 1960s, and I will be attempting, in the coming weeks, to put together a paper for Cabinet's consideration that this review take place.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Arvaluk.

Question 589-12(3): Assessment Of Changes To Board Funding Arrangements

**MR. ARVALUK:**

Thank you, Mr. Speaker. I would like to ask the Minister of Education along the lines of what my colleague, Mr. Ningark, was asking. It may be more of a clarification. When the Minister is handing out large amounts at the beginning of the fiscal year, will that larger amount reflect what

Page 1180

the divisional board has been able to generate from interest rates when they were on the quarterly contribution schedule?

**MR. SPEAKER:**

Mr. Nerysoo.

Return To Question 589-12(3): Assessment Of Changes To Board Funding Arrangements

**HON. RICHARD NERYSOO:**

Mr. Speaker, in responding to the question, I would like to indicate from the assessments which have been done, I doubt very much if we would be able to meet those reductions which have occurred. However, the honourable Member should be aware that we are presently reviewing our school financing and are considering certain proposals which could see an increase in the overall budget for schools, and that may be the basis on which we respond to the concerns that the school boards have.

**MR. SPEAKER:**

Mr. Arvaluk.

Supplementary To Question 589-12(3): Assessment Of Changes To Board Funding Arrangements

**MR. ARVALUK:**

Mr. Speaker, if the amount will not be near or reflected from the interest income by the divisional boards, will the Minister then be able to identify separate budgets for cultural programs and productions of materials that some divisional boards have been able to create?

**MR. SPEAKER:**

Mr. Nerysoo.

Further Return To Question 589-12(3): Assessment Of Changes To Board Funding Arrangements

**HON. RICHARD NERYSOO:**

Thank you, Mr. Speaker. I believe, presently, we are as a department, along with the support of my Cabinet colleagues, ensuring we deal with the matter of providing necessary financial assistance in the area of culture or the aboriginal curriculum side. My view is that once we have approved the curriculum, we will have the responsibility to respond with the financial resources. However, it requires approval from my Cabinet colleagues.

**MR. SPEAKER:**

Supplementary, Mr. Arvaluk.

Supplementary To Question 589-12(3): Assessment Of Changes To Board Funding Arrangements

**MR. ARVALUK:**

Thank you, Mr. Speaker. This is my last supplementary. Can the Minister tell the House when a report on the research in this area will be ready?

**MR. SPEAKER:**

Mr. Nerysoo.

Further Return To Question 589-12(3): Assessment Of Changes To Board Funding Arrangements

**HON. RICHARD NERYSOO:**

Thank you. I can indicate to the honourable Member that the review has been completed. I have reviewed it and will forward it to my Cabinet colleagues for consideration, however while I may be positive in terms of my support, it still must be dealt with in the context of the financial situation which we find ourselves in right now.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Arngna'naaq.

Question 590-12(3): Appointments To Keewatin Regional Health Board

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Speaker. I have a question for the Minister of Health. I stated in a Member's statement last week, Mr. Speaker, that there had not been an

active member on the Keewatin regional health board since December, 1991. I also know there are presently two other communities in the region which are not represented on the Keewatin regional health board at this time. I would like to know when the Minister will be appointing members to the regional health board from those communities.

**MR. SPEAKER:**

Minister Mike.

Return To Question 590-12(3): Appointments To Keewatin Regional Health Board

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. The vacancy for the representative position from Arviat is currently in the process of being filled. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Supplementary, Mr. Arngna'naaq.

Supplementary To Question 590-12(3): Appointments To Keewatin Regional Health Board

**MR. ARNGNA'NAAQ:**

Mr. Speaker, a further question. I would like to know the process used by the Minister for appointments on the regional health boards?

**MR. SPEAKER:**

Ms. Mike.

Further Return To Question 590-12(3): Appointments To Keewatin Regional Health Board

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. The process of selecting at the community level involves hamlet councils, the Department of Health, my office and is then dealt with at the Cabinet level. This is called for in the Territorial Hospital Insurance Services Act. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Mrs. Marie-Jewell.

Question 591-12(3): Status Of Alternate Housing Program

**MRS. MARIE-JEWELL:**

Thank you, Mr. Speaker. I have a question for the Minister of Housing. Mr. Speaker, I recently received a copy of a letter from the chief of the Fort Smith native band, addressed to the Minister of Housing with regard to the concern expressed of the alternate housing program not being delivered to the band this year. Can the Minister indicate whether that particular program, since he has had many different programs developed over the past year, is the old alternate housing program still in existence? Thank you.

**MR. SPEAKER:**

Mr. Morin.

Page 1181

Return To Question 591-12(3): Status Of Alternate Housing Program

**HON. DON MORIN:**

Thank you, Mr. Speaker. The alternate housing program is part of the access program and is allocated to communities. All the allocations are made from the needs survey. Fort Smith has 101 people in core need, and has been allocated 12 units which are all under the access program. Thank you.

**MR. SPEAKER:**

Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 591-12(3): Status Of Alternate Housing Program

**MRS. MARIE-JEWELL:**

Thank you, Mr. Speaker. You indicated the alternate housing program is part and parcel of the access program and in the past these alternate housing programs were specifically considered for Fort Smith band members or Metis members. Can the Minister indicate to me out of those 12 units which are being allocated to Fort Smith, will the Housing Corporation consider a few of those units be designated for the Fort Smith native band or the Metis local? Thank you.

**MR. SPEAKER:**

Mr. Morin.

Further Return To Question 591-12(3): Status Of Alternate Housing Program

**HON. DON MORIN:**

Thank you, Mr. Speaker. All 12 units are designated for Fort Smith. There is an allocation committee, which is comprised of band members, Metis members and the town, to allocate the units. That is the process. Thank you.

**MR. SPEAKER:**

Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 591-12(3): Status Of Alternate Housing Program

**MRS. MARIE-JEWELL:**

Mr. Speaker, in the past, it has been the global allocation committee which determines whether they should be public units, HAP units or whatever type of units the Housing Corporation delivered. I know in the past year, the Minister's officials eliminated that process for the global allocation committee. Is the Minister indicating now that this global allocation is to be reinstated to determine the type of units that the community should have and who they should be designated to? Thank you.

**MR. SPEAKER:**

Mr. Morin.

Further Return To Question 591-12(3): Status Of Alternate Housing Program

**HON. DON MORIN:**

Thank you, Mr. Speaker. The allocation of units is based on clients who are in need. The people in Fort Smith are able to afford to run their own units, so the access program will address that need. In the past, if you wanted to trade some of those houses off for public units, you would have had to find someone else willing to make the trade because we had to keep the mix the same, public units, access units and alternate units, in order to build with the dollars we had. If the community has a request to change some of the access units to alternate units, I would be happy to consider that. Thank you.

**MR. SPEAKER:**

Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 591-12(3): Status Of Alternate Housing Program

**MRS. MARIE-JEWELL:**

Thank you, Mr. Speaker. I am grateful that the Minister will consider the request for change, but just a minute ago he said that this is to determine, by the global allocation committee, what type of units should be delivered in the community. Are the units to be built, whether they be alternate housing programs under the access program, determined by the global allocation committee or by the Minister's office? Thank you.

**MR. SPEAKER:**

Mr. Morin.

Further Return To Question 591-12(3): Status Of Alternate Housing Program

**HON. DON MORIN:**

Thank you, Mr. Speaker. Neither. It is determined by the needs survey that the community did. The needs survey is very specific on the type of units that the community needs and the allocation is made to try to address that need. It is not the global committee that says "If we have 10 units, then we want to build five public and five alternate." It has to fit in the overall picture. We need the right percentages of units in order to maximize the number of units we can deliver in a given year. That mix has got to be the same and then we try to allocate them to meet the needs that are determined by the needs survey. The needs survey indicates it, the Housing Corporation allocates it, but if a community has a concern, for example, in this case you have ten access units, I would consider that. Maybe there is another community that wants some access units and is willing to give up some alternate units. I would consider that. Thank you.

**MR. SPEAKER:**

Order, please. I would like to recognize in the gallery, the mayor of Fort Simpson, Ray Michaud...

---Applause

...and the deputy mayor of Fort Simpson, Mr. Tom Wilson.

---Applause

Item 5, oral questions. Mr. Arvaluk.

Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives



**MR. ARVALUK:**

Thank you, Mr. Speaker. My question is to the Minister of Health and Social Services. I received a short letter from the Minister, but the letter did not answer the question I asked. I wonder if the question was understood. It was on the fuel alternative for the wood subsidy program. I stated in my letter very clearly that since the wood subsidy program is in place with the government already, why are other fuel subsidies, such as kerosene or natural gas that are used for camping or if you have a shack on the beach, not considered? The letter I received did not answer that. I would like to know why these are not included?

Page 1182

**MR. SPEAKER:**

Minister Mike.

Return To Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. If I recollect correctly, Mr. Speaker, Mr. Arvaluk's question was in the form that the primary use of heating oil was for the elders. My response was, when he asked why these are not included in the subsidy program, I would not recommend it as the Minister of Health or Social Services for safety reasons. The letter I provided him was merely asking for names because I would like to know who these elders are who use the fuels he mentioned as a primary source of fuel. Thank you, Mr. Speaker.

**MR. SPEAKER:**

Supplementary, Mr. Arvaluk.

Supplementary To Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives

**MR. ARVALUK:**

Mr. Speaker, I could tell the Minister right now that April, May, June, July, August and September, in those six months out of the year, the grandparents are the backbone for making spring and summer camps enjoyable and rewarding for grandchildren. These are the primary uses during those six months. I do not know what other fuel you can use in that time frame when you are out at camp. The Minister is not

able to identify these very simple facts. Every one of us who comes from the eastern Arctic knows these things. According to the letter she has written me, will she try to find out?

**MR. SPEAKER:**

Minister Mike.

Further Return To Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. When I refer to "primary source of fuel", that is year-round use. Social assistance recipients purchase fuel with their social assistance money. I am from the east too, Mr. Arvaluk, and I know. Thank you.

**MR. SPEAKER:**

Supplementary, Mr. Arvaluk.

Supplementary To Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives

**MR. ARVALUK:**

Mr. Speaker, I am not going to attempt to correct the Minister's knowledge regarding this one. However, I would like to point out that buying of naphtha gas or kerosene for portable heating or cooking is part of the whole Social Services recipients allowance. They are not identified separately. If a Social Services recipient is allotted \$400, the fuel is already included, contrary to what they are allotted in the western Arctic, where wood is separate from that amount. It is part of the whole page in the eastern Arctic. This is why I cannot qualify this as an alternative to the wood subsidy program under that program. It is not separate. It is not like that. Can the Minister tell me whether that is separate or part of the whole Social Services recipients allowance?

**MR. SPEAKER:**

Ms. Mike.

Further Return To Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. The wood and fuel subsidy program is a separate program on its own to assist

the elders, as well as the social assistance recipients, to subsidize their fuel all year. It is not for camping or going out on the land. Thank you.

**MR. SPEAKER:**

Supplementary, Mr. Arvaluk.

Supplementary To Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives

**MR. ARVALUK:**

Mr. Speaker, I cannot see that my friends in the western Arctic would only use wood when they are not in camps. They are not allowed to use it when they are in camp. What I am saying is that life-styles in the east or the west, half of the time, if you are a normal person, you will spend it out on the land. It is not like working people who take two weeks off a year and go camping. It is not like that. They actually live out in the camp for half of the year. It is not pleasure camping. They see it as part of their life-style. Perhaps the Minister can indicate by saying "yes" or "no" that the fuel subsidy in the east is part of the food allowance, part of the actual Social Services allowances, whereas it is different in the west where they get a fuel subsidy on top of the food allowance. Is this statement true?

**MR. SPEAKER:**

Ms. Mike.

Further Return To Question 592-12(3): Previous Question Re Fuel Subsidy Alternatives

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. As I have indicated earlier, the families who go out on the land, and who are recipients of social assistance, get assistance to purchase the fuel which they require. The other subsidy program is for home owners. The elders or anyone who is on social assistance receives the subsidy. Thank you.

**MR. SPEAKER:**

I would like to remind Members when they ask a question that the lead in to the question should be very short and used to set up the question. I have allowed a certain amount of latitude for more complex questions. I would ask Members to remember this. Item 5, oral questions. Mr. Whitford.

Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**MR. WHITFORD:**

Thank you, Mr. Speaker. I have a question for the Minister of Renewable Resources. The caribou are on the move again, they are moving north this time. They are passing through Back Bay and on to the Ingraham Trail on their journey north. I would like to ask him whether or not the hunting ban on the Ingraham Trail is still in effect?

**MR. SPEAKER:**

Mr. Alloo.oo.

Page 1183

Return To Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**HON. TITUS ALLOOLOO:**

Thank you, Mr. Speaker. Caribou are always on the move.

---Laughter

Mr. Speaker, the restriction with regard to caribou hunting on the Ingraham Trail is still in effect. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Supplementary, Mr. Whitford.

Supplementary To Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**MR. WHITFORD:**

Thank you, Mr. Speaker. I should know better than to phrase my questions in such a way that the Minister can respond as he did. I meant they were journeying south at one point and they are turned around and are journeying back. The concern which many people have, Mr. Speaker, is that the ban may not have been in effect and that hunting will again take place. How long is this ban in place for?

**MR. SPEAKER:**

Mr. Alloo.oo.

Further Return To Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**HON. TITUS ALLOOLOO:**

Thank you, Mr. Speaker. The hunting restriction on the side of the road on Ingraham Trail starts in November and ends at the end of April. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Supplementary, Mr. Whitford.

Supplementary To Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**MR. WHITFORD:**

Thank you, Mr. Speaker. Is the department considering a year-round hunting ban or shooting restriction on the Ingraham Trail?

**MR. SPEAKER:**

Mr. Allooloo.

Further Return To Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**HON. TITUS ALLOOLOO:**

Thank you, Mr. Speaker. We have had some discussion on this issue. My department is aware that there might be some safety concern on the Ingraham Trail. At the present, time we have no plans to further restrict the hunting on the Ingraham Trail. If the Members of this House want to see further restrictions on the Ingraham Trail in terms of big game hunting, we can explore that option. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Supplementary, Mr. Whitford.

Supplementary To Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**MR. WHITFORD:**

Thank you, Mr. Speaker. It is not very clear in many people's minds what this hunting ban or restriction is. As for the dates, Mr. Speaker, it may be confusing to the general public, whether it is a fall ban or includes the spring. I have not heard anything on the radio. Would the department step up its information program to avoid any kind of confusion which this hunting ban may pose?

**MR. SPEAKER:**

Mr. Allooloo.

Further Return To Question 593-12(3): Ban On Caribou Hunting On Ingraham Trail

**HON. TITUS ALLOOLOO:**

Thank you, Mr. Speaker. Yes, I will ask my department to place advertisements on the radio and newspapers to inform the public of these dates with regard to the restriction of hunting on the Ingraham Trail. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Patterson.

Question 594-12(3): Social Assistance Fuel Subsidy Alternatives

**MR. PATTERSON:**

Thank you, Mr. Speaker. I have a follow-up on Mr. Arvaluk's question to the Minister of Social Services. Mr. Speaker, I understood the Minister in her last response to say that social assistance recipients who were going on the land are provided with monies to purchase naphtha and other supplies. Is the Minister saying there is an entitlement for monies for naphtha for eligible social assistance recipients going out on the land?

**MR. SPEAKER:**

Ms. Mike.

Return To Question 594-12(3): Social Assistance Fuel Subsidy Alternatives

**HON. REBECCA MIKE:**

Thank you, Mr. Speaker. I did not say "naphtha." I said "kerosene." I have relatives who have taken up on this social assistance program and they used it for purchasing kerosene. Thank you.

**MR. SPEAKER:**

Supplementary, Mr. Patterson.

Supplementary To Question 594-12(3): Social Assistance Fuel Subsidy Alternatives

**MR. PATTERSON:**

Mr. Speaker, do I understand that. In addition to the allowance for food, clothing, shelter and

transportation for handicapped people, there is an entitlement to kerosene for people going on the land? Thank you.

**MR. SPEAKER:**

Ms. Mike.

Further Return To Question 594-12(3): Social Assistance Fuel Subsidy Alternatives

**HON. REBECCA MIKE:**

(Translation) Thank you, Mr. Speaker. The social assistance recipients are eligible to receive assistance for kerosene. This is part of their social assistance. Thank you.

Page 1184

**MR. SPEAKER:**

Supplementary, Mr. Patterson.

Supplementary To Question 594-12(3): Social Assistance Fuel Subsidy Alternatives

**MR. PATTERSON:**

Mr. Speaker, is the Minister saying that there is a formula or an allotment for kerosene for people going out on the land under the social assistance regulations? Thank you.

**MR. SPEAKER:**

Ms. Mike.

Further Return To Question 594-12(3): Social Assistance Fuel Subsidy Alternatives

**HON. REBECCA MIKE:**

Mr. Speaker, for recipients, when they receive social assistance, there is no certain allotment to purchase kerosene fuel. If they want to purchase kerosene fuel, they can do so. I cannot dictate. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Gargan.

Question 595-12(3): Ramifications Of Lifting Interprovincial Trade Barriers

**MR. GARGAN:**

Thank you, Mr. Speaker. I have been listening to the radio this morning, and I would like to direct my question to the Minister of Finance with regard to lifting the provincial trade barriers. I want to get some clarification on what exactly this means. It is with regard to the egg, chicken and fish quotas. Are we looking at getting rid of all these marketing boards in order for those trades to go freely across each province?

**MR. SPEAKER:**

Mr. Pollard.

Return To Question 595-12(3): Ramifications Of Lifting Interprovincial Trade Barriers

**HON. JOHN POLLARD:**

Mr. Speaker, with regard to the agricultural products, that is being dealt with by the agricultural Ministers. It was agreed by the Ministers of trade that they would allow that process to continue with those Ministers with a reporting mechanism back to the Ministers of trade. That is one of the things that is possible, depending on how provinces feel about the operation of those boards. I expect, some time in the next six months, there will be a report made back to the Ministers of trade. Thank you, Mr. Speaker.

**MR. SPEAKER:**

Supplementary, Mr. Gargan.

Supplementary To Question 595-12(3): Ramifications Of Lifting Interprovincial Trade Barriers

**MR. GARGAN:**

Thank you, Mr. Speaker. In response to what the Minister said about the agricultural Ministers getting together to discuss the continuation of those boards, are we, as a territory, not included in those boards? Are we going to be on equal footing with them with regard to quota allocations?

**MR. SPEAKER:**

Mr. Pollard.

Further Return To Question 595-12(3): Ramifications Of Lifting Interprovincial Trade

**HON. JOHN POLLARD:**

Mr. Speaker, CEMA has offered us a quota. It may very well be that we may accept that offer and become part of the CEMA family, as it were. Being at the table, we would have our say. I would point out to the House, though, Mr. Speaker, that it would take some 33 signatories across Canada to ratify the agreement that CEMA has put forward to us. We are looking at the quota that they have proposed to us and looking at the time frame that they have allowed for the wind down of any surplus that we have in the Northwest Territories. We are looking at that right now. I have said that I expect it to be concluded some time in the next 90 days, Mr. Speaker. Thank you.

**MR. SPEAKER:**

Supplementary, Mr. Gargan.

Supplementary To Question 595-12(3): Ramifications Of Lifting Interprovincial Trade

**MR. GARGAN:**

Who, from this government, is representing us in those discussions right now? Since we are part of lifting the trade barriers, it does not give us any kind of equal partnership arrangements with the marketing boards. I do not know why we should be involved if, down the line, we are not equal partners in the operation of those boards. It does have an effect on the territories with regard to northern preference. I would like to know what it really means as the end result of those discussions.

**MR. SPEAKER:**

Mr. Pollard.

Further Return To Question 595-12(3): Ramifications Of Lifting Interprovincial Trade

**HON. JOHN POLLARD:**

Mr. Speaker, the trade Ministers, and I guess I am the trade and agricultural Minister for the Northwest Territories at the present time, are dealing with the barriers within Canada for free trade amongst the provinces and the territories. That is as a result of the first Ministers' conference where that was recommended to be dealt with by the trade Ministers across the country. I understand the Member's question, and that is, if we are not a player in CEMA at the present time, will we be at the table to decide eventually what happens? I do not think any meaningful decisions are going to be made in that

regard, certainly not in the next 90 days. In that time, I hope to sort out our problems with CEMA and see that, if we accept their offer, we are sitting at the table. If we cannot accept their offer, we will rethink our situation. Certainly, we would still participate at the trade Ministers' conference. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Arngna'naaq.

Question 596-12(3): Status Of Review Of The Wildlife Act

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Speaker. I have a question for the Minister of Renewable Resources. About a year ago, the Minister of Renewable Resources stated in this House that the department was doing a comprehensive review of the Wildlife Act. What progress has been made with regard to this review? Thank you, Mr. Speaker.

Page 1185

**MR. SPEAKER:**

Mr. Alloofoo.

Return To Question 596-12(3): Status Of Review Of The Wildlife Act

**HON. TITUS ALLOOFOO:**

Thank you, Mr. Speaker. Our intention was to do a comprehensive review of the Wildlife Act of the Northwest Territories. Because of the land claims that came on stream within the last couple of years, especially with the Gwich'in, TFN and Sahtu coming along, we thought the best thing to do would be to amend the legislation to take into account the agreements that were put in place for Inuvialuit, Gwich'in and also the TFN agreement, and maybe Sahtu. At the present time, we are trying to make an assessment on how to best approach a need to change our legislation. Right now, Mr. Speaker, I have an amendment with respect to the Inuvialuit area. Once Nunavut is a reality, the government will have to change the legislation for the Nunavut area. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Ningark.

Question 597-12(3): Economic Development Officer For Pelly Bay

**MR. NINGARK:**

Thank you, Mr. Speaker. My question will be directed to the Minister of Economic Development and Tourism. Mr. Speaker, economic development is an essential requirement in communities across the territories. I know the honourable Minister is aware the communities in the Kitikmeot region are not in the best economic position as compared to other communities in other regions. This is not due to the lack of community initiatives. There are communities in my region which are innovative and want to get into the economic development program. This may have been due to a lack of support from the government from the system. I know the honourable Minister is endeavouring to change that. We appreciate his initiative. When is the government going to put an economic development position in Pelly Bay? I know the Minister attempted to do that last year. Thank you.

**MR. SPEAKER:**

Minister Pollard.

**HON. JOHN POLLARD:**

Mr. Speaker, I will take the question as notice. Thank you.

**MR. SPEAKER:**

The question has been taken as notice. Item 5, oral questions. Mrs. Marie-Jewell. Mr. Whitford.

Question 598-12(3): Number of Year-round Fishermen

**MR. WHITFORD:**

Thank you, Mr. Speaker. I would like to direct a question to the Minister of Economic Development and Tourism. Last week, Mr. Speaker, a group of fishermen from Hay River were here to talk to some of the Members. The situation presented by the fishermen was fairly bleak. They were not at all happy with the situation in which they were faced. Yet, today when I was reading a newspaper, they had a fairly successful year, at least by the Freshwater Fish Marketing Corporation's standpoint. They say the fishermen of the lake had an average season. Winter fisheries and summer fisheries, are these the same fishing people, Mr. Speaker, both those who

fish in the summer and those who fish in the winter, or is there a difference?

**MR. SPEAKER:**

Mr. Pollard.

Return To Question 598-12(3): Number of Year-round Fishermen

**HON. JOHN POLLARD:**

Mr. Speaker, for the most part the fishermen who fish in the winter fish in the summer, although there are some fishermen who only fish in the summer and there are some fishermen who only fish in the winter. For the most part, they are the same people. Thank you, Mr. Speaker.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Gargan.

Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**MR. GARGAN:**

Thank you, Mr. Speaker. I would like to direct my question to the Minister of Transportation. I understand the department has been using new spray equipment to construct the Fort Providence ice crossing for the past two or three years. The new equipment is supposed to allow the road to be built more quickly than the old drill and flood method. I am told that this new spray equipment cost the department in the neighbourhood of \$200,000 but that the kinks are still being worked out. Mr. Speaker, I am strongly in favour of the new technology, but I wonder when the department will master this new equipment. Can the Minister advise the House as to the success of the department so far in constructing the Fort Providence ice crossing more quickly and efficiently with the new spray equipment?

**MR. SPEAKER:**

Mr. Todd.

Return To Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**HON. JOHN TODD:**

Thank you, Mr. Speaker. As the honourable Member said, this is state of the art technology. This is the

first year that we have put this into place. It is a little early at this time to evaluate the savings or the time we have saved in doing the ice crossing. I would think, perhaps, with next year's opportunity, we have learned some of the mistakes we have made this year and that by next year we should be in a better position. I am optimistic, while it was a \$200,000 investment, we will be able to achieve the objective, and that is to get the ice road in place as quickly as possible so everyone can take advantage of it. However, it is a little early at this time to evaluate whether that expenditure is the right one and whether, in fact, it has achieved the end it is supposed to achieve.

**MR. SPEAKER:**

Item 5, oral questions. Supplementary, Mr. Gargan.

Supplementary To Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**MR. GARGAN:**

I would like to ask the Minister, Mr. Speaker, if the department has plans to use this new spray equipment in other areas such as the Liard, Camsell, Arctic Red River and Fort McPherson.

**MR. SPEAKER:**

Mr. Todd.

Page 1186

Further Return To Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**HON. JOHN TODD:**

Thank you, Mr. Speaker. I actually do not know. I would think, and I can check with the departmental officials, if it is successful in the Fort Providence area and it achieves the end it was supposed to achieve and that is to move more quickly to get the ice conditions appropriate for the movement of traffic, then I would hope that we could do similar projects at other crossings. At this time, it would be a little premature to make a commitment on that.

**MR. SPEAKER:**

Item 5, oral questions. Supplementary, Mr. Gargan.

Supplementary To Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**MR. GARGAN:**

Thank you, Mr. Speaker. When this spray equipment is used in Fort Providence it is trucked in from Hay River. The equipment at \$200,000 each is a substantial investment to be transporting every year. I would like to ask the Minister whether he has considered storing that equipment in Fort Providence.

**MR. SPEAKER:**

Mr. Todd.

Further Return To Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**HON. JOHN TODD:**

I do not know why it is trucked from Hay River to Fort Providence, but we will certainly give due consideration to the possibility of having it stored in the area where it is used.

**MR. SPEAKER:**

Item 5, oral questions. Supplementary, Mr. Gargan.

Supplementary To Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**MR. GARGAN:**

Thank you. My last supplementary. During the times when this equipment is used, we have people from Hay River going to Providence every day to supervise the equipment. Does the Minister plan on ensuring that we have people in Providence trained to eventually take over that type of task?

**MR. SPEAKER:**

Mr. Todd.

Further Return To Question 599-12(3): Successful Construction Of Fort Providence Ice Crossing

**HON. JOHN TODD:**

Let me say from the outset, Mr. Speaker, I am not that familiar with this operation. However, I will say that it would be appropriate, with this new technology, to have people in Fort Providence prepared to be trained and employed in the use of this equipment. We would take that action. I will talk to the department, and if it is not happening, I will take steps to ensure that it does. Thank you.

**MR. SPEAKER:**

Item 5, oral questions. Mr. Gargan. I think you have used up all your supplementaries, Mr. Gargan. Our computer says you did. Mr. Patterson.

Question 600-12(3): Negotiations To Access Federal Transportation Funding Initiative

**MR. PATTERSON:**

Thank you, Mr. Speaker. This question is to the Minister of Transportation. Mr. Speaker, with great fanfare, earlier this year, the Minister of Finance for Canada announced a \$500 million transportation infrastructure initiative on the part of the federal government in cooperation with the provincial jurisdictions. I understand that a portion of that money was intended for the Northwest Territories. I also understand that the Government of Yukon has made announcements regarding their entitlement to a \$10 million chunk of the \$500 million. Mr. Speaker, my question to the Minister of Transportation is, how are we coming along in getting our share of this \$500 million? Thank you.

**MR. SPEAKER:**

Mr. Todd.

Return To Question 600-12(3): Negotiations To Access Federal Transportation Funding Initiative

**HON. JOHN TODD:**

Thank you, Mr. Speaker. We did, in fact, present to the federal Minister of Transportation a wish list of projects we thought could come under the \$500 million Mazankowski initiative. The Yukon made an announcement indicating they had \$10 million, I am not sure if that is fact, we would have to check with them. At the present time, discussions are under way between deputies within the Department of Transportation and within the Department of Finance to reach an accommodation with the menu we have presented to the federal government. At this time, we have not had a definitive response to what we have requested, however, I am optimistic that there will be dollars allocated to the Northwest Territories.

Whether they will be allocated to our needs, as my department has presented them, I am not sure. I am hoping an announcement will be made jointly between the federal and territorial government within the next two weeks. Thank you.

**MR. SPEAKER:**

Supplementary, Mr. Patterson.

Supplementary To Question 600-12(3): Negotiations To Access Federal Transportation Funding Initiative

**MR. PATTERSON:**

Mr. Speaker, I wonder if the honourable Minister would care to speculate, and perhaps his officials have gleaned some hints, as to what kind of money we might be talking about for our share of this \$500 million new initiative in the Northwest Territories?

**MR. SPEAKER:**

Mr. Todd.

Further Return To Question 600-12(3): Negotiations To Access Federal Transportation Funding Initiative

**HON. JOHN TODD:**

As I indicated earlier, the initial menu that we sent in was somewhere around \$29 million. It did detail some of the areas we felt, territorially and federally, we could collectively finance. Some of the airports that are incomplete and some of the marine infrastructure required across the Arctic, in particular the east, were included. Subsequently, we have prioritized \$10 million worth of projects that we think the federal government will look favourably upon and while I do not have a response at this time, I am cautiously optimistic that we

Page 1187

will be in a position soon to make a joint announcement that these funds will be available to the Northwest Territories. Thank you.

**MR. SPEAKER:**

You are still within the time, Mr. Patterson, your last supplementary.

Supplementary To Question 600-12(3): Negotiations To Access Federal Transportation Funding Initiative

**MR. PATTERSON:**

Thank you, Mr. Speaker. This news is encouraging. Is there a predetermined formula for the share or contribution to be expected from the Northwest Territories as a condition of receiving this money, or can we get it and use it without necessarily matching it? Thank you.



**MR. SPEAKER:**

Mr. Todd.

Further Return To Question 600-12(3): Negotiations To Access Federal Transportation Funding Initiative

**HON. JOHN TODD:**

It is my understanding that this was a federal political initiative. There are few strings attached to how it should be expended. As I said, we have put forward a priority list of approximately \$10 million worth of initiatives. They go from the spectrum of finishing off some of our airstrip projects to marine infrastructure, as well as some hydrographic work perhaps in the Izok Lake and Coppermine area. I could not say definitively what kind of response we are going to get from the federal government. I do know there are discussions under way, not just with respect to our application, between senior federal officials, the Departments of Transportation and Finance and Mr. Siddon's office in trying to reach some decision as to what level of financing we will get and what kind of projects they feel would be appropriate.

**MR. SPEAKER:**

Time allotted for oral question period has expired. Item 6, written questions. Mrs. Marie-Jewell.

**ITEM 6: WRITTEN QUESTIONS**

Question 33-12(3): Hiring Of Male Staff At The Territorial Women's Correctional Centre In Fort Smith

**MRS. MARIE-JEWELL:**

Thank you, Mr. Speaker. I have a written question for the Minister of Personnel.

Will the Minister please table the following information in the House:

- a) the number of male staff hired as correctional officers, administrative staff or managers at the Territorial Women's Correctional Centre in Fort Smith;
- b) the number of applications received from males for employment at the Territorial Women's Correctional facility;
- c) the number of female employees working as correctional officers, administrative staff or managers at the South Mackenzie Correctional Centre; and,

d) the number of female employees working as correctional officers, administrative staff or managers at the Yellowknife Correctional Centre. Thank you.

**MR. SPEAKER:**

Item 6, written questions. Mr. Patterson.

Question 34-12(3): Timing Of Rental Increases Under The Long-Term Staff Housing Strategy

**MR. PATTERSON:**

Thank you, Mr. Speaker. This is a written question to the Minister of Personnel.

Would the Minister responsible for the Department of Personnel please provide the following information:

- a) as to whether it is the department's intention to pursue what appears to be a two-stage rent increase within a period of less than one year for employees who refuse to sign new leases as indicated in Tabled Document 66-12(3) and Tabled Document 112-12(3) in contravention of section 47(1) of the Residential Tenancies Act; and,
- b) if it is not the department's intention to contravene the Residential Tenancies Act, please provide this House with a clear and understandable explanation of how the department will handle the issue of utilities charges for those tenants who do not agree to sign new leases. Thank you.

**MR. SPEAKER:**

Item 6, written questions. Item 7, returns to written questions. Item 8, replies to opening address. Item 9, petitions. Item 10, reports of standing and special committees. Item 11, reports of committees on the review of bills. Item 12, tabling of documents. Item 13, notices of motion. Item 14, notices of motion for first reading of bills. Item 15, motions. Item 16, first reading of bills. Item 17, second reading of bills. Item 18, consideration in committee of the whole of bills and other matters: Tabled Document 2-12(3), The Justice House - Report of the Special Advisor on Gender Equality; Tabled Document 19-12(3), 1992 Master Plan for Corrections Service Division; Tabled Document 91-12(3), Northwest Territories AIDS Project - Review; Tabled Document 92-12(3), HIV and AIDS in the NWT in 1993; Bill 5, An Act to Amend the Social Assistance Act; Bill 17, Appropriation Act, No. 2, 1993-94; Bill 18, An Act to Amend the Public Printing Act; Bill 19, An Act to Amend the Student Financial Assistance Act; Bill 21,

an Act to Amend the Reciprocal Enforcement of Judgments Act; Bill 22, an Act to Amend the Mining Safety Act; Bill 23, Supplementary Appropriation Act, No. 4, 1992-93; Committee Report 10-12(3), Report on Tabled Document 21-12(3): Payroll Tax Act; Committee Report 11-12(3), Report on the Review of the 1993-94 Main Estimates; Committee Report 15-12(3), TD 33-12(2): Government Accountability: A Legislative Action Paper on Access to Government; Committee Report 17-12(3), Report on Television Guidelines; Committee Report 18-12(3), Public Review of TD 5-12(3), Report of the Auditor General of Canada on a Comprehensive Audit of the Department of Health, with Mr. Ningark in the chair.

ITEM 18: CONSIDERATION IN COMMITTEE OF THE WHOLE OF BILLS AND OTHER MATTERS

**CHAIRMAN (Mr. Ningark):**

This committee will now come to order. What is the wish of the committee? Mrs. Marie-Jewell.

Page 1188

**MRS. MARIE-JEWELL:**

Mr. Chairman, I would like to suggest that we attempt to address the Department of Finance and hopefully complete that department. If we can successfully complete that we will then deal with the Standing Committee on Public Accounts report on the Comprehensive Audit on the Department of Health. If that is completed we will consider Tabled Document 91-12(3), Northwest Territories AIDS Project - Review, Tabled Document 92-12(3), HIV and AIDS in the NWT in 1993, and if those are completed we can get into the main estimates of the Department of Health. Thank you.

**CHAIRMAN (Mr. Ningark):**

Thank you. Do we have the concurrence of the committee to deal with those items? Agreed?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

**CHAIRMAN (Mr. Ningark):**

Thank you. I understand there will be a full Caucus meeting. We will take a 15 minute recess.

---SHORT RECESS

Bill 17: Appropriation Act, No. 2, 1993-94

Department Of Finance

**CHAIRMAN (Mr. Ningark):**

This meeting will come to order. The only business item which is left in the Department of Finance main estimates is tax administration, page 04-12. What is the wish of the committee? Are we prepared to deal with this item? Mr. Antoine.

**MR. ANTOINE:**

Thank you, Mr. Chairman. I would like to move a motion on the activity of tax administration on page 04-12, Mr. Chairman.

Tax Administration

**CHAIRMAN (Mr. Ningark):**

Thank you. Perhaps I will call the total amount before Mr. Antoine proceeds with his motion. Tax administration, total O and M, \$833,000. Mr. Antoine.

Committee Motion 123-12(3): To Reduce Funds From The Activity, Tax Administration

**MR. ANTOINE:**

Thank you, Mr. Chairman. I will proceed with a motion on the tax administration. Mr. Chairman, I move that the activity tax administration on page 04-12 under the Department of Finance be reduced in the amount of \$322,000. Thank you.

**CHAIRMAN (Mr. Ningark):**

Thank you, Mr. Antoine. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. Do we have a quorum? Mr. Clerk, please ring the bell. Thank you. There was a call to vote on a motion. The motion has been translated and distributed to Members. Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Tax administration's total O and M has been reduced from \$833,000 to \$511,000. Agreed?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

**CHAIRMAN (Mr. Ningark):**

Thank you. Program summary, page 04-7, operations and maintenance, total O and M, \$21.616 million, as amended. Agreed?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

**CHAIRMAN (Mr. Ningark):**

Thank you. Does the committee agree that this concludes the Department of Finance. Agreed?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

**CHAIRMAN (Mr. Ningark):**

Thank you. According to our initial plans we will be dealing with Committee Report 18-12(3), Public Review of TD 5-12(3), Report of the Auditor General of Canada on a Comprehensive Audit of the Department of Health. Mr. Zoe.

Committee Report 18-12(3), Public Review Of TD 5-12(3), Report Of The Auditor General Of Canada On A Comprehensive Audit Of The Department Of Health

**MR. ZOE:**

Mahsi, Mr. Chairman. With your permission, Mr. Chairman, I would like to make a suggestion about the way we could proceed with our committee of the whole review of the standing committee's report on the Auditor General's comprehensive audit. If honourable Members agree, I would suggest, perhaps, we could deal with it chapter by chapter. When we get to a chapter, one of the Members of the Standing Committee on Public Accounts could make

brief opening comments. We can stop and let other Members make general remarks about the chapter. We can then move on to make motions regarding the recommendations in that particular chapter. I think that would be the fastest way of getting through this report, Mr. Chairman, and would certainly be better than reading through it page by page. The one exception to that might be when we deal with the chapter on the department's management response. In that case, perhaps I will move the motion and then we can get into the discussion of the committee's findings. Would that be agreeable, Mr. Chairman?

**CHAIRMAN (Mr. Ningark):**

Thank you. Do we have the concurrence of the committee that we follow the order requested by the chairman of the Standing Committee on Public Accounts? Agreed?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

Page 1189

**CHAIRMAN (Mr. Ningark):** Thank you. Proceed, Mr. Zoe.

**MR. ZOE:**

Mahsi, Mr. Chairman. In that case, I would like to start off by saying how pleased I am to be able to present this report. I believe that the process of accountability is a very important one for all governments, and particularly so when it comes to a consensus form of government.

With the tight financial times facing all of us, I believe it is imperative that we take every possible action to ensure that government departments are providing value for money. By that, I mean that government departments must be able to demonstrate that they are operating economically, efficiently and effectively. Those are the three Es. They form the base for what is called a "value for money audit."

In addition, it is important to ensure that departments' financial records are verifiable and that they are operating according to the laws, regulations and policies which have been established by this Assembly and by Cabinet. All of these factors, financial records, compliance with authorities and

value for money, can be evaluated in what is known as a comprehensive audit.

During the 11th Legislative Assembly, the Standing Committee on Finance, which was chaired by the honourable Member for Hay River, identified a need for a comprehensive audit of the Department of Health. In fact, it was Mr. Pollard who pointed out that his committee was uncertain about whether or not the people of the Northwest Territories were receiving value for money from the Department of Health.

He stated that a comprehensive audit should be conducted to determine whether the Department of Health was running as well as it should be. I think now, we have an answer to that question. The Auditor General's report demonstrates that the concerns raised by Mr. Pollard's committee during the 11th Assembly were valid. A great number of shortcomings were identified with the manner in which the department is operating.

I mentioned these on March 24, when the Standing Committee on Public Accounts' report was presented under reports of standing and special committees. There are deficiencies in the management of information. The Department has definite shortcomings in terms of the way it has managed human resources. Serious problems exist in its relationship and level of communication with health boards and other stakeholders. At the base of all these problems is the fact that the department lacks direction and is in dire need of better planning.

The full report has now been printed in Hansard upon the consent of this House. We will spend more time today reviewing the specific findings in the report and considering the recommendations which the standing committee has brought forward.

I should, first, make a few quick comments about the preparation of the Auditor General's report and the review process that was used by the Standing Committee on Public Accounts. The office of the Auditor General of Canada performed a comprehensive audit of the Department of Health in late 1991 and early 1992. The procedures they used and the scope they identified are all described in the Auditor General's report, so I do not think there is a need to go into it again at this time. However, I would like to take a moment to acknowledge, for the record, a few of the people from the Auditor General's office, who worked on the comprehensive audit. Mr. Roger Simpson, who is the principal for the Edmonton regional office, Cheryl Moneta and Michael Martin.

As well, the standing committee would like to acknowledge the support and interest that was personally provided by the deputy Auditor General of Canada, Mr. Raymond Dubois. We found these federal audit officials to be very helpful, Mr. Chairman. I know that I speak for all Members of the standing committee when I say that we appreciate their professional support.

Mr. Chairman, the Auditor General signed off the comprehensive audit in October of 1992, and transmitted it to the Speaker of the Legislative Assembly at that time. The report was formally tabled on November 17 and was referred to our Standing Committee on Public Accounts, for public review.

The committee held two sets of public hearings in Yellowknife as well as public hearings in Rankin Inlet and Inuvik. We are most grateful to the people of those communities for hosting Members during the hearing.

In general terms, we were very happy with the response we received during public hearings. I believe we were able to hear from the vast majority of health stakeholders, and hearings were quite well attended by members of the community. I believe this demonstrated the importance of having our standing committees conduct public review activities outside Yellowknife where a much broader perspective can be gained. Again, speaking generally, the input we received from organizations and individuals in the public supported the Auditor General's findings and recommendations. There were a couple of areas where it did not, and the standing committee has pointed those out in this report. However, for the most part, the standing committee was very happy with the entire audit and the review exercise.

Members of the committee believe that the resulting reports should be regarded as important documents to guide priority setting and planning with respect to departmental administration and management. Members of the committee also anticipate that this work is going to be taken seriously by the Department of Health and by the Minister.

That leads me into my discussions of the first substantive chapter dealing with the department's management response.

Should I proceed with that now, Mr. Chairman, or would it be appropriate to stop and allow other honourable Members to make general opening remarks?

**CHAIRMAN (Mr. Ningark):**

Thank you, Mr. Zoe. Do we have any general comments on this from the committee?

**SOME HON. MEMBERS:**

Agreed.

**CHAIRMAN (Mr. Ningark):**

Agreed that Mr. Zoe will proceed. Proceed please, Mr. Zoe.

Page 1190

Management Response

**MR. ZOE:**

Thank you, Mr. Chairman. I will make a couple of opening comments on the chapter of the public account's report which deals with the department's response to the audit and public review. Then, perhaps, I will move on to make a motion so we have something definite to talk about.

Just as an opening comment, I want to note that certain people in the Department of Health were very helpful to the committee in terms of providing follow-up documentation that we requested during the public hearings. This was appreciated, but it is also one of the expectations that Members have.

At the same time, the standing committee was very concerned about the fact that the written response which the Department of Health provided to each of the Auditor General's recommendations were, in our view, inadequate. The Standing Committee was also very concerned about the way in which some information was presented during the public hearings and in many ways with the whole tone of the approach which was taken by certain officials. We feel that it is important that these concerns be treated in a serious manner by this House.

Therefore, Mr. Chairman, I move the first recommendation.

Committee Motion 124-12(3): To Adopt Recommendation 1

I move that the Legislative Assembly express dissatisfaction with the management response made by the Department of Health to the Auditor General's report and with the presentation of: information on

organizational structure; and, information on human resource management, provided during the public review of the report.

**CHAIRMAN (Mr. Ningark):**

Thank you, Mr. Zoe. The motion is in order. To the motion. Mr. Zoe.

**MR. ZOE:**

Mr. Chairman, it is regrettable that such a motion should have to be brought forward. I would have hoped that it might have been possible to count on departmental officials to conduct themselves in a different manner. However, this will not be the only time that this committee or another committee of this House will need to rely on departmental resources for information and cooperation.

I believe it is important to set some expectations about the sort of response that we anticipate. When the Standing Committee on Public Accounts gave the House its report in June of 1992, after reviewing the other matters report, we commented that "committee Members got the distinct feeling that witnesses did not take the public accounts committee seriously...the public accounts committee wishes to signal loudly and clearly that this situation will change. The committee intends to be taken seriously. It has adopted a new philosophy that is much more pro-active in holding managers accountable for their past actions and it intends to bring about the kind of changes that are needed."

During the public review of the Auditor General's report, committee Members became concerned about the apparent attitude of the Department of Health. Here are the main concerns: the department's management response to the Auditor General's recommendations basically tell us nothing. For more than half the recommendation they simply wrote down "agreed." That does not allow the committee, the Cabinet or anyone else to evaluate what the department plans to do, when they plan to do it and who should be held responsible for making sure it gets done.

Other management responses are confusing and again stop short of making a full commitment to take action. The department said they did not have enough time to make their management response. The committee disagrees, they were given six weeks, Mr. Chairman. That is consistent with expectations for audits of this type. The department said they had

an additional set of management responses. We waited, Mr. Chairman, until they completed these and there still was not much information added.

The standing committee knows that there are very capable people within the department and expected that there is no reason why full and detailed, helpful management responses could not have been supplied. Either the audit report was not given enough priority, or the department realized this approach would make it more difficult to hold them accountable. In either case, the response was unsatisfactory. This problem was made worse, Mr. Chairman, by the fact that the deputy minister of the department chose to question the validity of the approach used by the Auditor General. At one point, he even made comments about the objectivity and relevance of the office which had to be clarified.

Again, this left the committee confused. Members were asking themselves if the department had these problems with the audit, then why did they write "agreed" as a management response and leave it at that? Members were asking themselves if the department is questioning the way in which the audit is done, then does that mean they are going to question whether the recommendation should be implemented.

On page 17 of the report, Mr. Chairman, the committee has suggested that in the future if the department disagrees with audit findings or procedures, they should spell this out clearly with an implication for responding to the recommendations clearly identified.

During the criticism of the audit, the department raised a number of points that the standing committee simply could not accept. The deputy minister listed a number of acts which have implications for the Department of Health and stated that the auditors work should have considered them more carefully. This is not specifically referenced in the report but you can see it in the proceedings. Our observations and that of the people who came to our public hearings were that the department is alone in that concern. It is hard to understand how the Ophthalmic Medical Assistants Act or the Dental Auxiliaries Act has as much to do with the organizational structure and operation of the department as the statutes on which the Auditor General commented on, which were the Financial Administration Act and the Territorial Hospital Insurance Services Act.

Similarly the department made many comments about how the Auditor General should have considered the situation which exists in other jurisdictions. It was like they were saying you cannot expect the health system to be any better in the territories because problems exist in other provinces. Our

Page 1191

comments on this point can be found on page 12 of the report. We disagree. The people of the Northwest Territories have a right to expect a well run health system. If problems exist the Department of Health should be taking steps to correct them regardless of whether they are also taking place in other jurisdictions.

The standing committee had similar problems with the comments made by the deputy minister of Health that the Auditor General neglected to mention that the department's problems are due, in part, to this Legislative Assembly, and that his senior managers have told him that the NWT has one of the best systems in the world. Mr. Chairman, I will leave it to other Members to comment on those if they wish. The committee comments are on page 12 and 13 of the report. Just let me say that the standing committee had no trouble realizing that we have some of the best ideas about health delivery in the world, there is no mistaking that. However, we have a long way to go before the administrative and management systems, which turn those ideas into action, can be looked at as even satisfactory.

Mr. Chairman,...

**CHAIRMAN (Mr. Ningark):**

Mr. Zoe, your ten minutes are up. Do you wish another Member to continue? Mr. Zoe.

**MR. ZOE:**

Mr. Chairman, if I could seek unanimous consent to conclude. I tried to summarize my comments pertaining to this chapter, however, the chapter was very lengthy. I would ask my honourable colleagues for unanimous consent to conclude my comments on the management response.

**CHAIRMAN (Mr. Ningark):**

Thank you. Mr. Zoe needs consent, he does not need unanimous consent, but he needs consent from the committee to conclude this part of the report. Agreed?

**SOME HON. MEMBERS:**

Agreed.

--Agreed

**CHAIRMAN (Mr. Ningark):**

Please proceed, Mr. Zoe.

**MR. ZOE:**

Mr. Chairman, the second concern of the standing committee was the way the department presented some of its information, it was not entirely in the best interests of fair and open disclosure. I refer to the fact that one departmental official read a letter into the record from a previous audit of one of the health boards. He appeared to be trying to show the committee that the health boards are not in a good position to manage their finances and that this should be a consideration in how we look at the board accountability issue. The letter stated that there were many management problems. We asked for a copy of this letter. We found that it was written way back in 1988. We confronted the deputy minister when he reappeared before the standing committee on January 29. He said that he would provide us with a copy of all other audit reports to demonstrate that this letter was representative of continuing problems. We examined the information he provided and we are still concerned. Not only did the other audit report show that the boards have as many things wrong with them as the one that was initially chosen by his official, the committee was provided with a poorly chosen and perhaps even a misleading document. It is not an issue whether or not this document identified a particular board. The committee did that and the board representatives were very glad to know what the department had attempted to do. They were, by the way, furious that this outdated information had been used to make a general statement about the abilities of all health and hospital boards. The issue here is that the standing committee was provided with bad information. It is an issue that we propose to take seriously. We were provided with more bad information.

At one point the deputy minister indicated that a problem with boards is the fact that they have not been able to recruit qualified finance managers. He used the Inuvik regional health board as an example. He said that they had more than seven finance managers in a single year. We looked into that one, Mr. Chairman. It is not entirely accurate. Some of the

officers worked for the regional office at the government's own Department of Finance and were not board employees. Anyway, he was talking about a situation which occurred over three years ago. Since 1990 the Inuvik board has had a great deal of stability in their finance division. The board chairperson told us that herself.

When we confronted the deputy minister he stated that this had also been a problem with the Keewatin regional board. We looked into that one also, Mr. Chairman. That board has had no higher of a turnover in its finance area than many of the other regional offices, and probably less than within the department's own division as well. Presently they have a chartered accountant who has been there over a year.

Mr. Chairman, a similar thing happened when the standing committee was dealing with human resource management issues. During the public hearings, Members asked department officials if they had met a two year old definitive objective for which they were supposed to develop a strategy for attracting northerners into the health care professions. At first they said it would be met over several years. When they realized definitive objectives have to be met within a fiscal year, they said that it had been partially met. When they were asked if a strategy exists they said it did. When the committee asked for a copy of the strategy, we received a single page with a short list of isolated activities. It was dated to show that it had been prepared a full two weeks after the matter came up during the hearings. Mr. Chairman, it is included in appendix D so that Members can look at it if they wish. Mr. Chairman, this is not a strategy document. There are no time lines, there are no standards, and there are no evaluation plans. These things were all pointed out by the committee, yet, on January 29 the deputy minister still insisted that a strategy had been developed. How can you have a strategy if you have no documentation. These are some of the reasons the standing committee became concerned with the management response. It was clearly unacceptable.

During later public hearings, witnesses representing certain health boards, and even a Cabinet Minister, made comments. When you look through the proceedings, you will see Members describing the department's presentation with words such as defensive, unclear, misleading and irritating.

The standing committee believes this sort of response from any department requires a stern comment to be made. That is why

Page 1192

the committee is bringing this motion forward. It is a serious motion. It is one that expresses dissatisfaction from the highest level with the way the department handled these aspects of its responsibility. It is a motion that should be interpreted by the Minister that some action should be taken to ensure that her department understands a better way of approaching its responsibility before committees of this House.

In order for the committee's process of this House to work well, it is important that all departments be aware that the process should be taken seriously. To make that message perfectly clear, I would urge Members of this House to support this motion. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ningark):**

Mr. Zoe, did you move a motion yet? Was it a motion? All right. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? We do not have a quorum here. Please ring the bell, bring them in and bring the business forward. Thank you.

**CHAIRMAN (Mr. Gargan):**

The chairman recognizes a quorum. The motion is that the Legislative Assembly express dissatisfaction with the management response made by the Department of Health to the Auditor General's report and with the presentation of: information on the organizational structure, and information on human resource management, provided during the public review of the report. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Gargan):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

On with the report. Mr. Ningark.

Organizational Structure

**MR. NINGARK:**

Thank you, Mr. Chairman. My section covers the comments on organizational structure. The second chapter of the Auditor General's report deals with this. Some of the findings included, are very serious. There is a particular issue with respect to the relationship that exists between the Department of Health and health and hospital boards. The Standing Committee on Agencies, Boards and Commissions commented on this at some length. I should say that the committee review found almost exactly the same things as our colleagues on the Standing Committee on Agencies, Boards and Commissions. Relations are strained and members of the health system have not been pulling together. What seems to be the root of it is a concern that there is far too much central control. There is much confusion about the roles of health and hospital boards as compared to the role that is played by the department.

There also appears to be some positive things taking place. The standing committee was pleased to see this. The committee was especially supportive of the initiative to develop a master memorandum of understanding. It is felt that this MOU will establish a different framework for how decisions and responsibilities within the health system are carried out. This is fully ensured by motions that have already been passed during the Third Session.

Specifically, I will draw Members' attention to the motion through which this Assembly accepted the principle that boards should be the primary administrative agent and the department should take a more supportive, rather than a directive, role. It should be noted also that there were some witnesses who commented that their working relationship with the Department of Health has greatly improved over the past few months. It is possible that this has to do with direction from Ministers. It is also possible that it has to do with the attention that is being paid to the issue by standing committees, the Auditor General and the Legislative Assembly.



Regardless of the cost, the Standing Committee on Public Accounts is of the opinion that these are positive developments. A little later, we will have some specific motions that may help the process further. There are a couple of additional recommendations in terms of organizational structure that Members wanted the House to consider, even though we did not make specific recommendations.

First, the standing committee received an excellent presentation from the honourable Member for Nahendeh. One of Mr. Antoine's recommendations was that the department should consider decentralizing Mackenzie regional health services, perhaps as the first step forward toward the development of boards or other representative bodies in the Deh Cho and North Slave regions. The committee thinks the suggestion has a great deal of merit and encourages the Department of Health to study it in detail.

The second point is, during the public hearings, the standing committee heard another very clear and thoughtful presentation from a private citizen about shortcomings in the health insurance services regulations. Apparently, these policies penalize people who receive home care treatment. On page 29 of the committee report, the standing committee encourages the department to put a high priority on the re-evaluation and revision of the health insurance services policy and procedure in this respect. Perhaps, there will be an opportunity to discuss these findings further. At this point, I would like to stop so other honourable Members can make any general comments about this section of the committee report. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Gargan):**

Are there any general comments? Continue, Mr. Ningark.

**MR. NINGARK:**

Thank you, Mr. Chairman. I have a motion. Recommendation two, amend policy for budget control.

Committee Motion 125-12(3): To Adopt Recommendation 2

I move that the committee of the whole recommends that the budget control and financial reporting requirement policies within the Department of Health should be reviewed to ensure that they reflect the

improved financial management capabilities of health and hospital boards;

Page 1193

And further that, where necessary, revision to policy directives should be developed in consultation with health and hospital boards and readied for full implementation by September 30, 1993.

**CHAIRMAN (Mr. Gargan):**

Thank you, Mr. Ningark. Your motion is in order. To the motion. Mr. Ningark.

**MR. NINGARK:**

Question, please.

**CHAIRMAN (Mr. Gargan):**

Question has been called. All those in favour? All those opposed? The motion is carried.

---Carried

Mr. Ningark.

**MR. NINGARK:**

Thank you, Mr. Chairman. The standing committee reviewed the policy framework which deals with health and hospital boards. Finally, we became a little concerned because certain policies have been developed and then suspended. We were also told that the other policies have been reviewed and revised in October, 1992. At this time, though, the committee believes it is important that all departmental policies which relate to budgetary control and financial reporting be reviewed. The review should focus on whether they need to be revised to better reflect the motions about board autonomy which have been passed during this current session. It is possible that the review of these policies can be tied in with the MOU process. That is up to the department and the boards.

The standing committee wants to see this completed by September so that these new policy arrangements are in effect during the last two quarters of the current fiscal year. I believe this recommendation, which assists the transfer of the responsibility, has already started with respect to the health and hospital boards. It is consistent with the Auditor General's finding and it is necessary for the continued improvement of a

working relationship within our health system. I urge honourable Members to support this motion.

**CHAIRMAN (Mr. Gargan):**

Thank you, Mr. Ningark, for your comments, but we already passed the motion. It was not necessary for you to speak to the motion again. Mr. Ningark.

**MR. NINGARK:**

I would like to make a motion, Mr. Chairman.

**MR. GARGAN:**

Go ahead, Mr. Ningark.

Committee Motion 126-12(3): To Adopt Recommendation 3

**MR. NINGARK:**

Thank you, Mr. Chairman. I move that the committee of the whole recommends that the Department of Health transfer responsibilities and resources for the financial and budgetary monitoring from its hospitals and health facilities division to its finance and administration division;

And further, Mr. Chairman, that the hospitals and health facilities division be given a mandate to deliver technical and professional consulting services to health and hospital boards through extensive on-site support.

**CHAIRMAN (Mr. Gargan):**

Thank you, Mr. Ningark. Your motion is in order. To your motion. Mr. Ningark.

**MR. NINGARK:**

Mr. Chairman, the Auditor General's report included a recommendation that the standing committee evaluate, in detail, over the course of this public review. The Auditor General recommended that the department should consolidate all areas where financial management is carried out. This would lead to additional efficiencies in terms of financial management and of greater specialization. The Standing Committee on Public Accounts spent a great deal of time examining this recommendation and asked many of the witnesses for their views of this during public hearings.

At this point, the standing committee would not support the consolidation of health insurance services within the financial and administration division. Our reasons are included on page 26, however there is a great deal of merit in incorporating a financial monitoring function presently carried out within the hospitals and health facilities division within the financial and administration division. This would allow better coordination of budget management and control, and may lead to fewer supps. It would also allow a more streamlined hospital division to get out into the regions more often to work as consultants rather than inspectors. This is something that many witnesses said was needed.

In many ways a great deal of problems which have been reported about health and hospital boards seemed to centre around the hospitals and health facilities division. Boards feel as though the officials in the division demand too much information, and are too interested in line by line budget control. For that reason, the relationship may have suffered in terms of professional and technical consulting which the departmental officials could provide.

The Standing Committee on Public Accounts is of the opinion that the services provided within the Department of Health could be greatly improved by consolidating these two functions. The department should not wait to do this. Even if the functional review of the department is started this can be taken right away, rather than waiting for the final results of the functional review. I would ask all honourable Members, including the Minister, to support this motion. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Gargan):**

Thank you, Mr. Ningark. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Gargan):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Koe.

Planning For The Future

**MR. KOE:**

Thank you, Mr. Chairman. The Standing Committee on Public Accounts played close attention to the third chapter of the Auditor General's report which deals with

Page 1194

the absence of a plan to direct initiatives and expenditures within the Department of Health.

Over and over during the public hearings, the standing committee heard evidence that the lack of planning has implications on all the stakeholders. It is having an implication, for instance, on leasing arrangements for ambulances and on other capital planning decisions. It is having an impact on human resource allocations. It is having an impact on the budgeting process and it is something which has been affecting the relationship between the department and the regional health and hospital boards.

In many ways, and the Auditor General was clear, the fact that there is no plan for the Department of Health can be seen to be at the root of most of the problems that have been identified. The Auditor General describes the department as being in a "planning to plan posture." The Standing Committee on Public Accounts found that to be a very accurate description of what we observed. The Auditor General's report gives examples which show that over and over the department has initiated processes for planning, only to have them stall and never achieve completion. For example, a work load assessment study for nurses was begun and never finished due to staff shortages. A functional review of the department was supposed to take place and was never finished due to due to consolidation. Work to improve the receipt of cost data on health insurance services was undertaken and has been set aside due to the decentralization initiative. The Department of Health has been spinning its wheels because there is not an adequate process for planning. The standing committee is of the opinion that this area has to be addressed. We have a number of recommendations that we will be discussing in a few minutes. However, I should note that the committee cannot, at present, support the remarks which the Auditor General made with respect to the status of private medical clinics in the Northwest Territories. This is something which is dealt with on page 40 of the committee report and I would invite honourable Members to comment on this if they wish to.

Committee Motion 127-12(3): To Adopt Recommendation 4

Mr. Chairman, I have a motion. I move that this committee recommends that the Department of Health should complete a functional review quickly and ensure that it considers all headquarters functions.

**CHAIRMAN (Mr. Gargan):**

The motion is in order. To the motion. Mr. Koe.

**MR. KOE:**

Thank you, Mr. Chairman. Apparently, this is something which the department started to do but then stopped when the plan to consolidate Health and Social Services was developed. The standing committee is of the opinion that it is wrong to put everything on hold until after the departmental consolidation is completed. The committee learned through public hearings that the department needs to take a good hard look at the mandates and performance of each of its divisions and plan how these should be developed over the years to come. A functional review is badly needed and should be completed even though there may be some costs. This is the reason for the motion and I hope Members will support it. Thank you.

**CHAIRMAN (Mr. Ningark):**

Thank you. The motion is in order. There is no quorum. Mr. Clerk, please ring the bell.

Thank you. The chair recognizes a quorum. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

**CHAIRMAN (Mr. Ningark):**

Mr. Koe, please proceed.

Committee Motion 128-12(3): To Adopt Recommendation 5

**MR. KOE:**

Mahsi, Mr. Chairman. I have another motion. Recommendation number five, I move that this committee recommends that the Department of Health prepare, and when necessary, a regularly updated document which formally defines the rational, purpose and substance of "The NWT Way" for health delivery;

And further, that the Department of Health develop a process through which stakeholder organizations and others can provide input into the ongoing formulation of this approach.

**CHAIRMAN (Mr. Ningark):**

The motion is in order. To the motion. Mr. Koe.

**MR. KOE:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Koe.

Committee Motion 129-12(3): To Adopt Recommendation 6

**MR. KOE:**

Mr. Chairman, I have another motion, recommendation number six. Mr. Chairman, I move that this committee recommends that the Department of Health prepare, in consultation with health and hospital boards, aboriginal organizations and other health stakeholder groups, a plan for the ongoing administration and delivery of health services in the Northwest Territories;

And further, that a draft version of the plan should be brought forward no later than December 31, 1993.

**CHAIRMAN (Mr. Ningark):**

The motion is in order. To the motion. Mr. Koe.

**MR. KOE:**

Mr. Chairman, the reason for the motion is self-evident. The Auditor General's report points out that

there is a definite need for an overall plan for health services in the Northwest Territories. The standing committee agrees and is recommending this as a much needed approach to addressing the confusion which currently exists. Mahsi.

**CHAIRMAN (Mr. Ningark):**

Thank you. To the motion.

Page 1195

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Koe.

Committee Motion 130-12(3): To Adopt Recommendation 7

**MR. KOE:**

I have another motion regarding recommendation number seven. Mr. Chairman, I move that this committee recommends that the Department of Health accord a high priority to the development of work load assessment instruments and procedures applicable to nurses in the Northwest Territories;

And further, the Department of Health, in consultation with the NWT Registered Nurses' Association and other stakeholders, should carry out work load assessment studies which enable better planning for the allocation of nursing resources.

**CHAIRMAN (Mr. Ningark):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Gargan.

Managing People

**MR. GARGAN:**

Thank you, Mr. Chairman. I will be reading the portion of the report which deals with human resource management. This is one of the areas in which the committee's concerns were the greatest. In particular, Members were absolutely dismayed at the poor job the department has done with respect to the hiring of aboriginal people and promoting health careers for aboriginal people. The department simply cannot continue to stand back and wait for the education system to turn out doctors or nurses who are Dene, Inuit or Metis. They cannot continue to sit back and wait.

This is a point which was made by my honourable colleague for Nahendeh when he appeared before the standing committee. His presentation had a significant impact on the way Members look at this issue. The department should be targeting people in the communities and helping them realize career goals in the health profession and in health administration. That is something which Mr. Whitford stressed repeatedly along with other Members. This has to be planned within a reasonable workable strategy. Presently, headquarters has only about 11 per cent aboriginal representation. That is unacceptable. The health and hospital boards are doing a little better, about 40 per cent on the average but it is not good enough. Later I will be making a number of motions in this area. It is something which the Department of Health is going to have to address.

The committee was also concerned about certain personnel management procedures and especially about the need to ensure adequate cross-cultural awareness. We will be making motions in that area as well.

There were a couple of areas in which the committee was not prepared to support the Auditor General's recommendations. First, the Auditor General's recommendation that the department should develop performance standards for doctors. The standing committee is of the opinion that this should not be attempted until a college of physicians and surgeons is established for the Northwest Territories.

Secondly, the Auditor General recommended that the recruitment function of the department's human resource management division should be eliminated.

The standing committee heard strong presentations from some of the regional boards, and especially from the Kitikmeot regional health board, that this would not be a good idea. Accordingly, the standing committee is not recommending any change in this area. Mr. Speaker, if there are no general comments, I would like to make a motion.

**CHAIRMAN (Mr. Ningark):**

Thank you, are there any general comments? Mr. Gargan, proceed with the motion, please.

Committee Motion 131-12(3): To Adopt Recommendation 8

**MR. GARGAN:**

Thank you. Motion eight is that the Department of Health develop an appropriate strategy for attracting and supporting aboriginal people who want to enter the health profession;

And further, that the Minister of Health table a complete strategy document in the Legislative Assembly by the fall session of 1993. I so move, Mr. Chairman.

**CHAIRMAN (Mr. Ningark):**

Thank you. The motion is in order. To the motion. Mr. Gargan.

**MR. GARGAN:**

Mr. Chairman, the motion is straightforward. In fact, it was something that the department was supposed to do a long time ago, according to the definitive objectives. However, it has not been completed appropriately. To reiterate Mr. Zoe's earlier comments, the documents in appendix D are not suitable as a strategy document. This motion requires the department to come up with a strategic document that meets the needs of the health system. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ningark):**

To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Gargan.

**MR. GARGAN:**

Thank you, Mr. Chairman. I have another recommendation.

**CHAIRMAN (Mr. Ningark):**

Proceed, please.

Page 1196

Committee Motion 132-12(3): To Adopt Recommendation 9

**MR. GARGAN:**

Mr. Chairman, I move that the Department of Health develop a strategy for attracting and supporting aboriginal people who want to enter the field of health administration;

And further, that the Minister of Health table a complete strategy document in the Legislative Assembly by the fall session of 1993.

**CHAIRMAN (Mr. Ningark):**

Thank you. The motion is in order. To the motion. Mr. Gargan.

**MR. GARGAN:**

Thank you, Mr. Chairman. Too often, when people are talking about career developments in the health area, they forget that there are many possible jobs in the accounting and public administration areas. There is no reason why aboriginal people cannot fill those. The report points out, and I think this is an absolutely disgraceful commentary on the department's effort, that of all the senior officials appearing before the committee to represent the Department of Health's boards, not one was an aboriginal person. There have to be new in-roads into health administration careers for aboriginal people. That is why the Standing Committee on Public Accounts believes that this motion is called for. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ningark):**

To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Gargan.

Committee Motion 133-12(3): To Adopt Recommendation 10

**MR. GARGAN:**

Thank you. I will move on to motion ten. It is on page 48 of the committee report. Mr. Chairman, I move that the committee of the whole recommend that the Department of Health prepare a comprehensive affirmative action plan;

And further, that the department assess health or regional boards of management to prepare a comprehensive affirmative action plan, where requested.

**CHAIRMAN (Mr. Ningark):**

The motion is in order. To the motion. Mr. Gargan.

**MR. GARGAN:**

It is one thing to recommend that the department should develop new strategies for attracting aboriginal people to think about careers in the health field. We also have to find ways to hire them when they come forward. It is surprising and frustrating that the Department of Health has not updated its affirmative action plan since 1989. That is what the Auditor General found. The department is again suffering from a lack of planning. This is something that must be addressed right away. As well, affirmative action planning by the health and hospital boards must be addressed. This should not be imposed by the department, however. Board plans should be developed as a partnership, perhaps at one of the regular meetings of boards and departmental staff. I would urge honourable Members to support the motion.

**CHAIRMAN (Mr. Ningark):**

Thank you. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Gargan.

Committee Motion 134-12(3): To Adopt Recommendation 11

**MR. GARGAN:**

Thank you, Mr. Chairman. This is recommendation 11. Mr. Chairman, I move that the Department of Health, in consultation with the Department of Education, Culture and Employment Programs, review sources, eligibility criteria and amounts of financial assistance available to students wishing to pursue studies in health professions or health administration;

And further, that the departments survey current students enrolled in health-related disciplines to determine the adequacy of available financial assistance, and include survey results in the report.

**CHAIRMAN (Mr. Ningark):**

Thank you. The motion is in order. To the motion. Mr. Gargan.

**MR. GARGAN:**

Mr. Chairman, the Auditor General's report raises some questions about the adequacy of health bursary programs for students wishing to pursue careers in health discipline. The standing committee is of the opinion that these concerns should be extended to all forms of student financial assistance. The committee report contains a summary of information received by the committee about student assistance. This is found on page 49 and in several appendices. I think it is clear that the whole area of student support for young people studying in the health disciplines needs to be reviewed. This motion recommends that such a review should take place. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ningark):**

To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Ningark):**

Question has been called. I cannot call a vote right now because there are only 11 Members sitting in their chairs.

All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Gargan.

Committee Motion 135-12(3): To Adopt Recommendation 12

**MR. GARGAN:**

Yes, Mr. Chairman. I have another motion. This is with regard to health cross-cultural awareness, an

Page 1197

important topic. Mr. Chairman, I move that the committee of the whole recommends that the Department of Health establish a plan which provides an effective cross-cultural orientation and training program for newly hired staff;

And further, that for all departmental personnel, individual training plans within the performance review and planning process should include a requirement for cross-cultural awareness training at least every fifth year;

And further, that senior managers within the Department of Health provide a model for other employees by each participating in a program of cross-cultural awareness prior to December 31, 1993.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Your motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Are you ready for the question? I do not have a quorum. Ring the bell, please, Mr. Clerk.

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Gargan.

Committee Motion 136-12(3): To Adopt Recommendation 13

**MR. GARGAN:**

Thank you, Mr. Chairman. Mr. Chairman, recommendation 13, I move that the Department of Health implement a system of exit interviews for all departing staff, no later than October 1, 1993;

And further, that the department encourage and support health and hospital boards to implement similar procedures.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Gargan.

Committee Motion 137-12(3): To Adopt Recommendation 14

**MR. GARGAN:**

Mr. Chairman, recommendation 14. I move that all supervisors within the department complete in-service training in the use of the GNWT performance review and planning systems for staff appraisal no later than April 1, 1994.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion. Mr. Gargan.

**MR. GARGAN:**

Mr. Chairman, I must speak to this motion. The motion is based on the Auditor General's findings that the department has not been doing a good job of completing performance evaluations. I think it should be noted that the Department of Health is probably not the only department to be in this situation. However, the standing committee is of the opinion that given the difficult work undertaken by health professionals, it is very important for the department to take the performance appraisal process seriously. We are recommending that all supervisors should be given a year to complete in-service training in the use of the government's performance review system, and I would hope that the department might be able to set some new and improved standards for completing staff performance evaluations. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Pudluk):**

Thank you. To the motion. Are you ready for the question?

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Koe.

Information Management

**MR. KOE:**

Thank you, Mr. Chairman. I will be dealing with the committee's findings on chapter five of the Auditor General's report. This chapter deals with information management by the department and highlights a number of serious problems.

I would like to start by making a motion.

Committee Motion 138-12(3): To Adopt Recommendation 15

I move that this committee recommends that the Department of Health, in consultation with the Northwest Territories Science Institute prepare a



comprehensive report on the north of 60 research program;

And further, that this report should include an analysis of whether funding criteria identified in June, 1989, have been met;

And further, that this report should clearly indicate the respective responsibilities of the Department of Health, the Science Institute and HRDP;

And further, that this report should be brought to the Legislative Assembly by the fall session in 1993.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

Page 1198

**MR. ARNGNA'NAAQ:**

I would like to make a motion as recommendation 16.

**CHAIRMAN (Mr. Pudluk):**

Proceed.

Committee Motion 139-12(3): To Adopt Recommendation 16

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Chairman. I move that this committee recommends that the Department of Health prepare a document which:

1. summarizes health research studies carried out within the department since 1988; and,
2. proposes policy parameters for the design, approval, ethical standards, consultation, local involvement and report distribution of future health research studies within the department.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

Committee Motion 140-12(3): To Adopt Recommendation 17

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Chairman. I have another motion. I move that this committee recommends that the Department of Health implement measures to improve the flexibility and usefulness of the HIS system; review and modify procedures for completion of HIS system claim forms and code compatibility; and develop a single reporting format for HIS and CHMIS by April 1, 1994.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

Committee Motion 141-12(3): To Adopt Recommendation 18

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Chairman. I have recommendation 18. I would like to move that this committee recommends that the Department of Health improve registration tracking procedures to ensure that as

people leave the Northwest Territories, their eligibility for territorial health insurance ceases.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Your motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. Mr. Gargan.

**MR. GARGAN:**

I have just one comment with regard to this motion, Mr. Chairman. I would like to express that there are people whose health insurance ceases when they move from the Northwest Territories, but there are also people who move and still have an address here where their mail goes. So, it is as if they are still residing here when, in fact, they are not. I think there should be a double check to ensure that people who are actually being billed for medical services are actually residents of the north and not residents who are residing in the south.

**CHAIRMAN (Mr. Pudluk):**

Thank you. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Ms. Mike.

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. If the committee does not mind going back to recommendation 17, I would like to get clarification so there is no speculation. Recommendation 17 is not clear. It says, "The Department of Health implement measures to improve the flexibility and usefulness of the HIS system." What do they mean by "flexibility?"

**CHAIRMAN (Mr. Pudluk):**

A point of order, Mr. Zoe.

Point Of Order

**MR. ZOE:**

Point of order, Mr. Chairman. My point of order is that the Minister had an opportunity to respond to the motion that was put forward by the committee Member pertaining to recommendation 17, which has been dealt with already.

**CHAIRMAN (Mr. Pudluk):**

Mr. Zoe, your point of order is correct. The motion was passed already, so no one can speak to the motion now. However, if the Minister wants clarification, you could give clarification. Ms. Mike.

**HON. REBECCA MIKE:**

Mr. Chairman, I am not opposing the motion, I am just asking for clarification so the department can understand what the intention of the motion is and what "flexibility" means. It is not clear to me.

**CHAIRMAN (Mr. Pudluk):**

Mr. Arngna'naaq.

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Chairman. With regard to this particular motion, you will note that on page 61 of the committee report, this is an area of the review that became quite complex with many acronyms and much data about computer systems. The feedback from the deputy minister of Government Services and Public Works and the NWT Medical Association supported the Auditor General's findings. The section which refers to the HIS system and the CHMIS system,

Page 1199

indicates both systems have definite flaws. It is difficult to extract information and there are limits on how the data reports can be designed. Generally, the Auditor General found that managers in the Department of Health are not using the information from these systems as well as they should be. This is probably because the systems are not adequate.

The Standing Committee on Public Accounts was also concerned that procedures for entering claim data are incompatible and there may be a high error

rate. As well, it was pointed out by the Auditor General that the two systems are unable to communicate with each other. Accordingly, it is impossible for health managers to obtain a single statistical report. This is a big drawback when it comes to planning activities.

This particular motion which was recommendation 17, will address these concerns. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Does that assist you, Ms. Mike?

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. Perhaps some other time I will seek clarification of that motion. Thank you.

**CHAIRMAN (Mr. Pudluk):**

The recommendation has been adopted. Mr. Arngna'naaq.

**MR. ARNGNA'NAAQ:**

Mr. Chairman, I have two motions with regard to reciprocal billings.

Committee Motion 142-12(3): To Adopt Recommendation 19

I move that this committee recommends that all territorial/provincial agreements relating to reciprocal medical billings should be reviewed and updated during the next renewal period for each one;

And further, that the department should ensure that copies of all agreements are on file by June 30, 1993.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

Committee Motion 143-12(3): To Adopt Recommendation 20

**MR. ARNGNA'NAAQ:**

I move that this committee recommends that the Department of Health review procedures for the recovery of all reciprocal billings and implement specific action to recover any outstanding payment which is owing to the GNWT.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

**MR. ARNGNA'NAAQ:**

Thank you. I have another motion.

Committee Motion 144-12(3): To Adopt Recommendation 21

I move that this committee recommends that the Department of Health develop, within the Otto Schaeffer Health Resource Centre, a repository of all current policy and procedures established by health and hospital boards, to facilitate sharing of information between boards and within the department.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

Committee Motion 145-12(3): To Adopt  
Recommendation 22

**MR. ARNGNA'NAAQ:**

Thank you. I move that this committee recommends that the Department of Health develop a process through which senior managers become familiar with activities and mandates of other divisions or with board administration, including, where appropriate, the temporary rotation of officials.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Chairman. I will be happy to address the next section, because as the chairperson of the Standing Committee on Legislation I have had an opportunity to observe the department's health policy and legislation division in action. As noted in the committee report, this may be one area where the Auditor General's report did not give due credit to the Department of Health. As one reads the Auditor General's report, it seems as though it is saying that the health policy and legislation division is unproductive and not an efficient or effective part of the department.

With great respect to the office of the Auditor General, the standing committee disagrees. It became clear that the audit

Page 1200

report did not capture all of the policy development work that has been carried out by this division. Also, the Auditor General overlooked the fact that this is the division which responds to the critical needs with which the department struggles. Members of the standing committee felt that there is too much crisis

management within the department right now, but it is not accurate to hold the health policy and legislation division accountable for that fact. I must say that the standing committee did agree with the Auditor General that this division could and should be doing much more.

Committee Motion 146-12(3): To Adopt  
Recommendation 23

With that, Mr. Chairman, I move that the committee recommends that the Department of Health develop a new mandate for the policy and legislation division, emphasizing:

1. Responsibility for tactical and strategic planning; and
2. Ongoing legislative and policy review.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Arngna'naaq.

Committee Motion 147-12(3): To Adopt  
Recommendation 24

**MR. ARNGNA'NAAQ:**

Thank you, Mr. Chairman. With regard to the board accounting system, the HBIS, recommendation number 24, I move that the committee of the whole recommends that the Department of Health work with the health and hospital boards to develop a plan by January 1, 1994, for the standardization of board accounting systems;

And further, that the department and boards complete implementation and training for new system components by April 1, 1994, and complete a comprehensive evaluation of system performance by April 1, 1995.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Pudlat.

Committee Motion 148-12(3): To Adopt Recommendation 25

**MR. PUDLAT:**

(Translation) Thank you, Mr. Chairman. I have a motion on recommendation 25. I move that this committee recommends that the Department of Health ensure that post-occupancy inspections are carried out for all capital construction projects using standard criteria.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Pudlat.

Committee Motion 149-12(3): To Adopt Recommendation 26

**MR. PUDLAT:**

(Translation) Thank you, Mr. Chairman. I have another motion on recommendation 26 regarding capital assets.

Mr. Chairman, I move that this committee recommends that the Department of Health accord a high priority to final development and implementation of the capital asset tracking system.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Zoe.

Committee Motion 150-12(3): To Adopt Recommendation 27

**MR. ZOE:**

Mr. Chairman, I have two motions pertaining to the management reporting and accountability. Mr. Chairman, I move that this committee recommends that all senior consultants, heads of sections and directors of divisions within the Department of Health should complete in-service training in the use of MFRS by April 1, 1994.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Zoe.

Committee Motion 151-12(3): To Adopt Recommendation 28

**MR. ZOE:**

Thank you, Mr. Chairman. I have a motion with regard to recommendation 28 pertaining to management reporting and accountability. I move that this committee

recommends that the Department of Health prepare a comprehensive report on which definitive objectives have been met since 1988, and include a plan for meeting any unfulfilled objectives.

**CHAIRMAN (Mr. Pudluk):**

Thank you. The motion is in order. To the motion.

**AN HON. MEMBER:**

Question.

**CHAIRMAN (Mr. Pudluk):**

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Mr. Zoe.

**MR. ZOE:**

Mahsi, Mr. Chairman.

**CHAIRMAN (Mr. Pudluk):**

Ms. Mike.

**HON. REBECCA MIKE:**

Mr. Chairman, recommendation 28, the word "unfulfilled"...

**CHAIRMAN (Mr. Pudluk):**

I believe Mr. Zoe has the floor. Mr. Zoe.

**MR. ZOE:**

Mahsi, Mr. Chairman. That concludes the final report of the Standing Committee on Public Accounts pertaining to the public review of Tabled Document 5-12(3), report of the Auditor General of Canada on a comprehensive audit of the Department of Health. Thank you.

**CHAIRMAN (Mr. Pudluk):**

Ms. Mike.

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. On recommendation 28 the wording, "and include a plan for meeting any unfulfilled objectives," I think it would be fair to have included unfulfilled objectives that were seen by the

standing committee and not just leave it hanging. Thank you.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Does the committee agree that Committee Report 18-12(3), Public Review of TD 5-12(3), Report of the Auditor General of Canada on a Comprehensive Audit of the Department of Health is concluded. Agreed?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

---Applause

**CHAIRMAN (Mr. Pudluk):**

Thank you. What is the wish of the committee? Previous agreement was to deal with Tabled Document 91-12(3), Northwest Territories AIDS Project - Review, and Tabled Document 92-12(3), HIV and AIDS in the NWT in 1993. Mr. Koe.

**MR. KOE:**

Mr. Chairman, this committee would like to deal with Tabled Document 91-12(3), Northwest Territories AIDS Project - Review and Tabled Document 92-12(3), HIV and AIDS in the NWT in 1993. Thank you.

**CHAIRMAN (Mr. Pudluk):**

Is the committee agreed?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

Tabled Document 91-12(3): Northwest Territories AIDS Project - Review And Tabled Document 92-12(3): HIV and AIDS in the NWT in 1993

**CHAIRMAN (Mr. Pudluk):**

Thank you. Ms. Mike, do you wish to invite witnesses at this time? Ms. Mike, do you have opening remarks at this time?

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. Yes, I do.

**CHAIRMAN (Mr. Pudluk):**

Proceed.

**HON. REBECCA MIKE:**

Qujannamiik, Mr. Chairman. Since AIDS has been recognized as a serious threat, the number of infections seem to be increasing slowly in the NWT. There was some hope that NWT residents would accept the information about the disease and how to protect themselves but, over the past year, the number of reported cases has almost doubled and now totals 24. Of these, six are known to have died from AIDS and another six have left the NWT. Those persons who were infected early in the epidemic were infected outside of the NWT. More recently, infections are increasingly being acquired in the NWT.

A major effort has been made to ensure that all NWT residents were made aware of the risk of infection and how to protect themselves. In spite of knowing about the risk, there is evidence that many people are not taking action. We must convince everyone, no matter where they live, that they risk infection with HIV if they engage in unprotected sex. I have asked Dr. Ian Gilchrist, chief medical health officer for the NWT, to tell you what is known about the current situation and what we can do about it. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Ningark):**

Thank you, Madam Minister. Does the committee agree that the Minister can bring in the witness?

**SOME HON. MEMBERS:**

Agreed.

---Agreed

**CHAIRMAN (Mr. Ningark):**

Proceed, Madam Minister. Sergeant-at-Arms, please escort the witness to the witness table.

Page 1202

I have been informed that the witness is not available at this time. We will take a short break and come back when the witness is ready. Thank you.

---SHORT RECESS

**CHAIRMAN (Mr. Arngna'naaq):**

I would like to call the committee back to order. I would ask the Minister if her witnesses are now available to come in.

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. I am now ready to bring in the witnesses.

**CHAIRMAN (Mr. Arngna'naaq):**

All right. We will ask the Sergeant-at-Arms to assist the witnesses to the witness table.

Thank you. Madam Minister, would you please introduce your witnesses, for the record.

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. I have with me Dr. Gilchrist and the assistant deputy minister, Elaine Berthelet. Thank you.

**CHAIRMAN (Mr. Arngna'naaq):**

Thank you, Madam Minister. Does the Minister have any further comments at this point?

**HON. REBECCA MIKE:**

No, I do not. If there are any comments or questions, Dr. Gilchrist will be able to respond to the questions you may have.

**CHAIRMAN (Mr. Arngna'naaq):**

Thank you, Madam Minister. Do any of the Members have any general comments to make? Mr. Lewis.

General Comments

**MR. LEWIS:**

Thanks, Mr. Chairman. The two documents which were tabled in the Assembly and moved into committee of the whole, so we could have public discussion, even though it may be a short one, came about as a result of an initiative of the Department of Health to brief all Members in our Caucus on the nature of the problem as the Department of Health perceived it. Members took that to mean that when the officials requested they have a meeting with each Member, that this is something that they really want to pay particular attention to. It was for that reason we attended that meeting and took the concerns of the department very seriously, and felt even though we have a very busy schedule, it is fairly clear that we

have crowded our agenda to such an extent that this topic, which is of great concern to the department, is probably not going to get the kind of exposure we would like to give it.

The reason I believe we should at least spend some time on it, is that it is one of the issues surrounded in mystery for many people. Right throughout the ages you have had these killer diseases, plagues and things which have frightened people. The reason for that, of course, is very often the public is either misled or they have not taken the trouble to inform themselves about the nature of the problem so it is like a boogie man, a frightening thing that just sits there and is a menace. Everyone wants to find an easy, simple solution.

One of the things that bothers me a little bit, Mr. Chairman, and maybe my thinking is just old fashioned and maybe I am a little out of date, but what I hear from many people is that we could solve this, we could go a long way to solving it if somehow we could publicize the threat that surrounds us. If there are 15, 16 or 200 people, if we knew who all those people were then we would lick it because we would know what to avoid. It would no longer be a boogie man or a mystery, we could identify it by the names of the people who are a threat to us as a society. That is the way people used to think a couple hundred years ago, where if you saw someone who was a treat you would put a mark on their forehead or something which would identify that person as being a threat. It may be that if we were to take that approach you may get the kinds of reactions that, for the long-term health and security of our communities, it would not really solve it.

That is a concern I have, it is a boogie man and people want to find a simple solution. However, I do not think the simple solution is the one that is going to work. The way, from my point of view, this could be resolved is if we find a way of stripping the ignorance. If you can say that this is the nature of it, as we learn more we will find better ways of informing people so it is no longer a mystery or frightening thing. If we just take advantage of what we know and what we learn, we can solve it. The three solutions given to us were clearly laid out. We know exactly what the treat is. If we do these three things we eliminate that fear and that danger, and we should be able to have a fairly healthy population.

I may have just stated a very over-simplified approach in dealing with this issue, but that is the feeling I have. People want to find some quick solution, a pill you can

just take and you are safe, or a list of names of people to keep away from. I think if we would allow the medical people to repeat for us what they believe are the obvious things we have to do, we will protect ourselves from this plague of the twentieth century.

I know we come up against problems from time to time, but eventually we come up with a solution. It may be what we have now is just an interim solution, but it seems to me, from what I have heard, that this is one that if people are prepared to change their behaviour, could work. That is the trick, how do you change people's behaviours? My question would be how do you get people to change their behaviour?

**CHAIRMAN (Mr. Arngna'naaq):**

Thank you, Mr. Lewis. Would you like to respond, Madam Minister?

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. I will let Dr. Gilchrist respond.

**CHAIRMAN (Mr. Arngna'naaq):**

Dr. Gilchrist.

**DR. GILCHRIST:**

Thank you, Mr. Chairman. We were fortunate enough to have a chance to meet with Caucus a few days ago. I appreciated that because I think the solution which Mr. Lewis is referring to is a solution which is going to come from multiple sources. One of the problems and challenges which I think we all face with regard to the control of AIDS is that health problems, often if not usually, are seen as having a solution in the care and treatment of the sick. However, AIDS is a perfect example of where that is not the case. The only real answer to AIDS lies in prevention. Prevention is not at all the special expert area of health people. It is an area which anyone can get into and it has been really gratifying to me, to

Page 1203

note the preventive lead with regard to AIDS which has come from trustees of regional health boards, patient and dedicated CHRs, community groups, friendship centres, the media and from Members of this Legislative Assembly. Health professionals have taken part in that but they alone are not going to solve this problem. The problem, as Mr. Lewis has



suggested, is one of actually changing the very way we are, and of changing the things which we do.

The things which we have been learning about the virus have also been leading us to look at other things which we do not know, especially about our reproductive systems and our sexuality. This area of intimacy has very appropriately been protected by our modesty and our privacy. Our reproductive systems are a source of joy to us because they give us our children whom we love. It gives us comfort and bodily pleasure and it is an area about which we do not speak easily. We do not know much about the behaviours related to it which can put us at risk and how they differ from group to group, person to person, community to community and culture to culture.

In a sense, we are having to learn two things at once. We are having to learn about a mysterious predator, a virus which has come unexpectedly among us, and we are having to learn about how we behave and how the two interact to put us at risk. What is happening here is not very different from what is happening in the rest of Canada except one thing above all that is different. If I could I would like to outline what we know, in point form, about it.

The most important point, I think, is the difference between us and the south in the sense that most of our cases are being spread between men and women the same way they are in most parts of the world, but in a different way from what occurs in the large cities of the United States and Canada.

The solutions which Mr. Lewis refers to, I do not think there are any easy ones. It is one of those situations where a fragmented approach is not going to work. Individuals, nurses, doctors, health regions and communities hide from this issue. The solution will come much more slowly and much more painfully than if all were to work together on this. Neither the virus nor our sexuality recognizes any boundaries. We need to continue to have accurate and rapid information and reporting. We need to study the situation carefully and to share the information we receive. We need to continue to learn what we do not understand about the virus and about ourselves. We need to look to community leaders and the public and not just count on health professionals in order to find a way to deal with this.

I took note of Mr. Lewis' remarks a few days ago, including his reminder from Bishop Sperry that we need to remember, when we look at serious matters such as this, the good news, and there is some. It

looks as if the numbers of cases of other sexually transmitted diseases, the ones you get in exactly the same way you get HIV or AIDS have fell down last year. The numbers were down for the first time in a long time. Just maybe the message about the risk that we all face from AIDS is getting through. Certainly, there have been many impressive messages, carried by the department and regional health boards and others, that we have learned from others and have shared with others.

Mr. Chairman, Members of this Assembly have been particularly important in helping to deliver the message. Many have worked long and hard and many have real extensive knowledge of the elements of the problem. I want to thank them for helping me, as your chief medical health officer, in my mandate to try to deal with this issue. I want to assure you that support and help with this burden will be always welcomed and I will endeavour to inform the Minister on each step of the way as to what we know and what we can or cannot, or may or may not be able to do in a technical sense. Thank you, Mr. Chairman.

**CHAIRMAN (Mr. Arngna'naaq):**

Thank you, Dr. Gilchrist. Are there any other questions or comments? Mr. Lewis.

**MR. LEWIS:**

Mr. Chairman, to refer briefly to the announcement made by the federal Minister of Health, they outlined five or six areas which would be funded over a four or five year period. In this list of items I saw things such as training programs, support groups and research. I do not have that particular press release in front of me today but there were five or six areas mentioned. It seems, in the rest of Canada, that there are more things going on in terms of supporting AIDS carriers and different support groups. I believe that much of this money will, in fact, go to non-government organizations. It is not just a funding relationship between the federal government and the provinces but a system whereby it can do the most good by going directly to various research projects, and so on. My question is, what kind of support is given, right now, to AIDS patients? What exists? I know we do not have

Page 1204

the kind of network which exists in southern Canada. I would like to have some idea of what goes on in terms of support to AIDS patients.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Madam Minister.

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. I will ask Ms. Berthelet respond to that question.

**CHAIRMAN (Mr. Pudluk):**

Ms. Berthelet.

**MS. BERTHELET:**

Thank you, Mr. Chairman. I will respond to the first part. One of the funds which the Northwest Territories has accessed in the past is called the community development fund. In the new announcement by the federal Minister there will be \$9.8 million for community development in support to non-government organizations. Territorial community groups will be able to access that money. We have made a request of the federal government to have health boards qualify for funding from this development fund. In the past they have not been eligible. That is one area where we will stand to benefit from.

In phase I of the national strategy we had some local projects which received funding. Perhaps, through the Minister, Dr. Gilchrist may wish to talk a little bit about drugs and the treatment.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Dr. Gilchrist.

**DR. GILCHRIST:**

Thank you, Mr. Chairman. Specifically with regard to the services which are available to patients, I guess in many ways the services are the same as they are to any patient with any illness. When you have HIV infection you may end up with any kind of other infection and you would receive treatment as you would for that infection whether or not you had HIV.

In addition to those two licensed drugs, there are a large number of experimental drugs which are being tried out across Canada in what is called the Canadian clinician trials network. NWT patients, seen by their physicians or nurses and referred for consultation, also will be able to be considered for those additional drugs if the two which are currently

licensed do not seem to be of benefit to them. Thank you.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Are there any further comments? Mr. Dent.

**MR. DENT:**

Thank you, Mr. Chairman. I would like to thank Dr. Gilchrist for his presentation on a snapshot of where we are at right now. I recognize that, as he says, there are no easy solutions and that people are looking to leaders and not just the health professionals. I think the politicians in this room and the public in the north are expecting the Department of Health to provide leadership. I had been hoping to hear a little more about what was planned in terms of departmental initiatives over the next little while. While incidents of STDs may have declined over the past year, I do not think our birthrate did and that would tend to indicate, especially with the number of young mothers we have, that there is a great deal of unprotected sex happening, which means we still have a real problem.

I think what we are hoping to hear from the department is that there is going to be an education program which is designed to focus on young people in particular, because given their problem or the way it appears that they are going to be at more risk, it is this age group which we have to target. They are the ones who are most likely to ignore the practice of safe sex. I was hoping to hear something about a program that would have funding and resources, and that was designed to increase AIDS awareness among youth in this target group.

I was hoping to hear that the department had come up with some idea as to perhaps not what might be the final solution, but where we are we headed in the next couple of years. How we are going to try to address the very real problem of getting people to change the way in which they act is the only way in which we are going to save lives.

**CHAIRMAN (Mr. Pudluk):**

Thank you. Madam Minister, do you have any comments?

**HON. REBECCA MIKE:**

Thank you, Mr. Chairman. I will let Elaine Berthelet respond to that.

**CHAIRMAN (Mr. Pudluk):**

Proceed.

**MS. BERTHELET:**

Thank you, Mr. Chairman. The department has been doing a great deal of planning for the coming year, renewing our efforts on how we will address the problem of HIV and AIDS. We have five or six components to the plan we have in mind. We have started some of the work. I can quickly highlight a few of the items.

We are looking at a strategy, renewing the strategy. The current approach we use in our prevention program is a combination of information that was researched and collected through a cross-Canada initiative with the federal government in 1990 that we participated in. Two documents came out of that. One was a blueprint on AIDS for Canada, and the other was a blueprint on HIV and AIDS in aboriginal people.

We now would like to go through an NWT process where we will involve boards, community groups, aboriginal groups, Status of Women and quite a number of people. We have a plan in mind for that.

Secondly, we are hoping to provide some response or assistance to local community groups that would like to do a little project or an awareness day or, perhaps, have someone who has AIDS come to visit in their community.

As well, we are reviewing the educational materials: posters, videos, TV ads, et cetera. Some of what we have produced in the past we can rerun, some of it needs to be updated, other things need to be developed. We are seeking input on that from various groups of people and looking very much at the use of TV and videos. Workshops are certainly something on the agenda and, as the Member has indicated, are very well received. We have some workshops which are already planned. In fact, next week in Inuvik we have a workshop that will be for a mixture of people in terms of health professionals, CHRs and some elders from the community. As well, we will be placing emphasis on ensuring that our health professionals are kept up-to-date in terms of the trends regarding AIDS, and in counselling skills. We will also be working with the Department of Education and the school system. We have an AIDS hotline that we

have been running for some time, and we are currently evaluating it and looking at ways to, perhaps, make it more responsive and effective.

**CHAIRMAN (Mr. Pudluk):**

Thank you. I will recognize the clock, it is 6:00 pm. I will rise and report progress. I would like to thank the Minister, Ms. Berthelet and Dr. Gilchrist. We will see you again tomorrow.

**MR. SPEAKER:**

I will call the Assembly back to order. Item 19, report of committee of the whole, Mr. Chairman.

ITEM 19: REPORT OF COMMITTEE OF THE WHOLE

**CHAIRMAN (Mr. Pudluk):**

Mr. Speaker, your committee has been considering Bill 17, Committee Report 18-12(3), Tabled Document 92-12(3) and Tabled Document 92-12(3), and would like to report progress with 29 motions being adopted, and that Committee Report 18-12(3) is concluded. Mr. Speaker, I move that the report of committee of the whole be concurred with. Thank you.

**MR. SPEAKER:**

Seconded by Mr. Dent. Motion is in order. All those in favour? All those opposed? Motion is carried.

---Carried

Item 20, third reading of bills. Item 21, Mr. Clerk, orders of the day.

ITEM 21: ORDERS OF THE DAY

**CLERK OF THE HOUSE (Mr. Hamilton):**

Mr. Speaker, there will be a short meeting of the Nunavut Caucus immediately after adjournment this evening. There will be a meeting at 9:00 am tomorrow morning of the Ordinary Members' Caucus. Orders of the day for Friday, March 26, 1993.

1. Prayer
2. Ministers' Statements
3. Members' Statements
4. Returns to Oral Questions

5. Oral Questions - Bill 20, Loan Authorization Act, 1993-94
6. Written Questions - Bill 21, An Act to Amend the Reciprocal Enforcement of Judgments Act
7. Returns to Written Questions - Bill 22, An Act to Amend the Mining Safety Act
8. Replies to Opening Address
9. Petitions - Bill 23, Supplementary Appropriation Act, No. 4, 1992-93
10. Reports of Standing and Special Committees - Bill 24, Write-off of Debts Act, 1993
11. Reports of Committees on the Review of Bills - Committee Report 10-12(3), Report on Tabled Document 21-12(3): Payroll Tax Act
12. Tabling of Documents - Committee Report 11-12(3), Report on the Review of the 1993-94 Main Estimates
13. Notices of Motion - Committee Report 15-12(3), TD 33-12(2): Government Accountability: A Legislative Action Paper on Access to Government
14. Notices of Motions for First Reading of Bills - Committee Report 17-12(3), Report on Television Guidelines
15. Motions
16. First Reading of Bills
17. Second Reading of Bills
  - Bill 8, Payroll Tax Act
18. Consideration in Committee of the Whole of Bills and Other Matters
  - Tabled Document 2-12(3), The Justice House - Report of the Special Advisor on Gender Equality
  - Tabled Document 19-12(3), 1992 Master Plan for Corrections Service Division
19. Report of Committee of the Whole
20. Third Reading of Bills
21. Orders of the Day

**MR. SPEAKER:**

Thank you, Mr. Clerk. This House stands adjourned until 10:00 am, Friday, March 26, 1993.

---ADJOURNMENT

Page 1206

- Tabled Document 91-12(3), Northwest Territories AIDS Project - Review
- Tabled Document 92-12(3), HIV and AIDS in the NWT in 1993
- Bill 5, An Act to Amend the Social Assistance Act
- Bill 17, Appropriation Act, No. 2, 1993-94
- Bill 18, An Act to Amend the Public Printing Act
- Bill 19, An Act to Amend the Student Financial Assistance Act