



# Yukon Legislative Assembly

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34<sup>th</sup> Legislature

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## HANSARD

Wednesday, May 31, 2017 — 1:00 p.m.

Speaker: The Honourable Nils Clarke

# YUKON LEGISLATIVE ASSEMBLY

## 2017 Spring Sitting

**SPEAKER — Hon. Nils Clarke, MLA, Riverdale North**  
**DEPUTY SPEAKER and CHAIR OF COMMITTEE OF THE WHOLE — Don Hutton, MLA, Mayo-Tatchun**  
**DEPUTY CHAIR OF COMMITTEE OF THE WHOLE — Ted Adel, MLA, Copperbelt North**

### CABINET MINISTERS

NAME	CONSTITUENCY	PORTFOLIO
<b>Hon. Sandy Silver</b>	Klondike	Premier Minister of the Executive Council Office; Finance
<b>Hon. Ranj Pillai</b>	Porter Creek South	Deputy Premier Minister of Energy, Mines and Resources; Economic Development; Minister responsible for the Yukon Development Corporation and the Yukon Energy Corporation
<b>Hon. Tracy-Anne McPhee</b>	Riverdale South	Government House Leader Minister of Education; Justice
<b>Hon. John Streicker</b>	Mount Lorne-Southern Lakes	Minister of Community Services; Minister responsible for the French Language Services Directorate; Yukon Liquor Corporation and the Yukon Lottery Commission
<b>Hon. Pauline Frost</b>	Vuntut Gwitchin	Minister of Health and Social Services; Environment; Minister responsible for the Yukon Housing Corporation
<b>Hon. Richard Mostyn</b>	Whitehorse West	Minister of Highways and Public Works; the Public Service Commission
<b>Hon. Jeanie Dendys</b>	Mountainview	Minister of Tourism and Culture; Minister responsible for the Workers' Compensation Health and Safety Board; Women's Directorate

### GOVERNMENT PRIVATE MEMBERS

#### Yukon Liberal Party

<b>Ted Adel</b>	Copperbelt North
<b>Paolo Gallina</b>	Porter Creek Centre
<b>Don Hutton</b>	Mayo-Tatchun

### OFFICIAL OPPOSITION

#### Yukon Party

<b>Stacey Hassard</b>	Leader of the Official Opposition Pelly-Nisutlin	<b>Scott Kent</b>	Official Opposition House Leader Copperbelt South
<b>Brad Cathers</b>	Lake Laberge	<b>Patti McLeod</b>	Watson Lake
<b>Wade Istchenko</b>	Kluane	<b>Geraldine Van Bibber</b>	Porter Creek North

### THIRD PARTY

#### New Democratic Party

<b>Liz Hanson</b>	Leader of the Third Party Whitehorse Centre
<b>Kate White</b>	Third Party House Leader Takhini-Kopper King

### LEGISLATIVE STAFF

Clerk of the Assembly	Floyd McCormick
Deputy Clerk	Linda Kolody
Clerk of Committees	Allison Lloyd
Sergeant-at-Arms	Doris McLean
Deputy Sergeant-at-Arms	Karina Watson
Hansard Administrator	Deana Lemke

**Yukon Legislative Assembly  
Whitehorse, Yukon  
Wednesday, May 31, 2017 — 1:00 p.m.**

**Speaker:** I will now call the House to order. We will proceed at this time with prayers.

*Prayers*

**Withdrawal of motions**

**Speaker:** The Chair wishes to inform the House of a change which has made to the Order Paper. Motion No. 24, standing in the name of the Leader of the Third Party, has been removed from the Order Paper as the action requested in the motion has now been taken.

**DAILY ROUTINE**

**Speaker:** We will proceed at this time with the Order Paper.

Tributes.

**TRIBUTES**

**In recognition of Air North's 40<sup>th</sup> anniversary**

**Hon. Ms. Dendys:** Mr. Speaker, I rise today on behalf of the Liberal government to pay tribute to Air North, as this company celebrates its 40<sup>th</sup> anniversary this year.

Air North was originally established in 1977 by Joe Sparling and Tom Wood to offer charter flights for the mining industry and flight training services. By the early 1980s, their fleet had grown from a single Cessna to a variety of aircraft. When the company bought Douglas DC-3 and DC-4 aircrafts, they began offering scheduled flights within Yukon and into Alaska.

As we know, over the years, the company continued to grow. Air North's fleet has expanded and, in 2002, the Vuntut Gwitchin First Nation invested in Air North, making it possible for the company to purchase two Boeing 737 jets a few years later. The *Vuntut Gwitchin First Nation Final Agreement* made it possible for the First Nation to acquire 49 percent of the company. This provides meaningful employment for many of its citizens, as well as a vital transportation line to and from Old Crow.

A lot has changed in the aviation industry over the last 40 years, Mr. Speaker, and Air North has stood the test of time. It has adapted to stay competitive and has looked to new opportunities to grow its business. It is now one of Yukon's largest private sector employers, with over 250 full-time and part-time employees in Yukon. I was told, when I went on my tour of Air North, that they employ another 250 people in Vancouver, Calgary, Edmonton and Ottawa. That is really outstanding.

Air North is also this government's largest private sector tourism partner, and we are very proud of this partnership and it is one that we want to continue to foster. Whether it is in marketing, trade and consumer show initiatives, or promotion and familiarization tours, this partnership between the

government, Air North and industry has contributed significantly to the growth of Yukon's tourism.

We are very fortunate to have a locally owned and operated airline and one that consistently provides services to Yukoners and visitors.

In a 2016 global airline passenger survey, Air North was named one of the world's most loved airlines and ranked second, surpassing international airlines. This is a real testament of the dedication to giving customers exceptional service, which we have all enjoyed over these many years. Air North is truly Yukon's airline.

The company is a partner in our community supporting a vast range of community groups and causes over the years through their Yukon Spirit in Action program. In 2015, Air North set a new company record for donations supporting social and community concerns. Some of the groups supported included: the Adäka Cultural Festival and Society, Big Brothers Big Sisters of Yukon, the Whitehorse Oldtimer Hockey League, Kaushee's Place and the United Way — just to name a few of the many dozens of organizations that they have sponsored over the years.

Air North employees are ambassadors for our territory and support the tourism industry by making Yukon more accessible to the masses. We know that air access is critical to continued growth in Yukon's tourism industry. Now with flights between Whitehorse and Vancouver, Edmonton, Calgary, Kelowna, Yellowknife and Ottawa, Air North is known for going the extra mile and continues to be a source of pride for many Yukoners.

With the recent route expansion between Whitehorse, Yellowknife and Ottawa, Yukon is in a strong position to attract even more visitors.

Not only does the route make Yukon more accessible to tourists travelling from the south, the Ottawa flight also has the potential to attract more groups looking to host meetings, conferences and conventions in the north. More tourists on Air North flights mean more visitors to Yukon and more revenue for Yukon businesses.

It is also exciting to see that Air North has expanded their operation fleet this spring. Now two ATR 42 turboprop aircraft have replaced the HS 748s on the northern route to Dawson, Old Crow and Inuvik. I had a chance to fly on those flights just recently and they were really outstanding — very fast and very efficient. These planes are more efficient, flying faster and higher than their predecessors, as well as using 30-percent less fuel, which is fantastic.

As well, the additional summer flights mean daily service on this route and, on most days, a twice-daily service to Dawson. These two new planes help to modernize Air North's fleet and they will serve the company well into the future.

On behalf of the Government of Yukon, I congratulate Air North for their 40 years of success. We are very proud of the contribution this company makes to Yukon's economy and to the social fabric of our territory. With your vision, outstanding reputation and professional staff, I have no doubt that you will be celebrating many more anniversaries into the future.

I would like to just take an opportunity to recognize our visitors today. We have Ben Ryan, Ron Daub, Sharon Miller, Bruce Demchuk, Sarah Marsh and Rick Nielsen. From our staff, we have Pierre Germain and Murray Arsenault. Thank you so much for coming.

*Applause*

**Ms. Van Bibber:** I rise today on behalf of the Yukon Party Official Opposition to give my sincere congratulations to Air North, Yukon's airline, on achieving the incredible milestone of serving Yukoners for 40 years. Air North was founded in 1977 and, over the years, it has grown in fleet, service and staff. Currently, Air North offers flight service to 10 Canadian cities and operates seasonal charters to other destinations.

I am proud to stand in tribute to this Yukon airline for a number of reasons. One special day for me was during the Vancouver 2010 Olympics. Air North chartered a flight for Yukoners to spend a day in Vancouver. The flight was full. Joe and Deb and the crew took care of us from beginning to end, ensuring we had Canada Line passes from the airport to a bagged lunch to a special ceremony to showcase Yukon to an evening at the Yukon Day main stage, back to the airport and home at 2:00 a.m. — outstanding.

Owner and pilot, Joe Sparling, along with the Vuntut Gwitchin Development Corporation, invested and expanded the airline to become a competitive northern force in the airline industry. Over the years, as other airlines caved to economic pressures and tight margins, Air North stood its ground and continued to offer wonderful in-flight meals, free checked baggage and over-the-top service. Their service and integrity to their guests do not go unnoticed. Air North continues to be recognized internationally as one of the top airlines in the world with articles in travel magazines and websites with titles such as "Why Air North is the best airline you've never heard of" and reviews that continue to impress residents and travellers alike — Air North never ceases to amaze.

From offering Yukon residents dividends to apply as credit to flights, offering period sales, such as 40-percent off to honour their 40<sup>th</sup> anniversary, which happened in February, or providing deals on air passes to students, summer and winter travellers, Air North continues to treat Yukoners and visitors as family.

I was standing in line at the Vancouver airport in February on a flight home when that 40-percent sale day happened. It crashed their computers. Did that faze Air North? Not one bit. After a bit of a wait in line where we were constantly informed of what was happening, out came warm cookies, handed out by ground crew staff and cancan girls. Undaunted, decisions were made and the staff got busy hand-writing boarding passes and bags were tagged. The airport security was notified of the dilemma and all moved smoothly along. At the boarding area was entertainment by those cancan girls and cake.

Air North flight crews and customer service staff are amazing. They're helpful, informative, approachable and

professional. Everyone will go over and above to help you with problems that may arise. Many kudos to Air North for their care of people's life situations and unforeseen circumstances that happen when travelling. They care.

I would like to thank each and every employee, especially Joe and Deb Ryan, for decades of service and dedication to Yukoners and to the north. We are so proud of you, Yukon's airline. Happy 40<sup>th</sup>.

*Applause*

**Ms. Hanson:** On behalf of the Yukon New Democratic Party, I'm happy to pay tribute to the 40<sup>th</sup> anniversary of Air North. As the Member for Porter Creek North mentioned, many people recall that massive response to the 40<sup>th</sup> anniversary seat sale in February of this year. People lined up in droves and swamped their phone and e-mail systems. It's not the first demonstration of Yukoners' fierce appreciation of Air North.

Mr. Speaker, there are a few of us in this House who can recall that the Air North of 2017 is not the same as the Air North of 1977. The one consistent and persistent feature and perhaps the clue to its success is Joe Sparling, president, CEO and to this day — and I think, on this day — 737 captain.

When I first started work in Yukon as a social worker back in 1978 — way back — Air North was really Joe Sparling and his partner, Tom Wood, flying mostly, as I recall, charter flights around Yukon. In the early days, it was not unusual to fly into Dawson or Old Crow in a plane where the seats in the front half of the plane were replaced by all manner of freight — and I mean "all manner".

The 40 years that Air North has served Yukon and its evolution as a major Yukon success story are really symbolic of the amazing things Yukoners can achieve when they recognize and act on the opportunities for partnerships.

When the Yukon NDP government of the day established the small-business investment tax credit, it offered Yukoners the opportunity to invest in this local business that would, over time, drive a hard, competitive bargain that has seen airfares to Yukon drop dramatically and seen the emergence of this regional airline as an airline widely recognized for its quality of service and its contribution to the community in so many ways, large and small, seen and unseen.

A key aspect to the success of Air North has been its partnership with the Vuntut Gwitchin Development Corporation. Since Old Crow is a community dependent on air access, it made sense for this partnership to evolve. Few would have anticipated that beyond the sound financial rationale for an Air North-Vuntut Gwitchin partnership, the symbolism of a successful, 100-percent Yukon-owned business that is gaining worldwide recognition speaks volumes about the opportunities to be gained by all Yukon when life is breathed into the right relationships that the Yukon final and self-government agreements envisioned.

We salute Air North and its dedicated staff, and we look forward to another 40 years of expansion and safe flying.

*Applause*

**Speaker:** Are there any further tributes?  
 Introductions of visitors.  
 Are there any returns or documents for tabling?

### TABLING RETURNS AND DOCUMENTS

**Mr. Istchenko:** I have for tabling today four letters and two e-mails that I sent on Wednesday, March 29, 2017 to the Minister of Highways and Public Works, the Minister of Community Services, and the Minister of Energy, Mines and Resources — the first one being a letter that I sent on behalf of the Destruction Bay Marina on January 17, the second being the response from the minister on February 3, and the third being the letter from the RCMP to me and forwarded to the minister on February 28. The next letter is from the Kluane Lake Athletic Association and it was sent on March 17, and then there are two e-mails — one from Fritz Mayr-Melnhof, a business person, and another one from an outfitter.

**Speaker:** Are there any further returns or documents for tabling?

Are there any reports of committees?  
 Are there any petitions?  
 Are there any bills to be introduced?  
 Are there any notices of motions?

### NOTICES OF MOTIONS

**Mr. Hassard:** Thank you, Mr. Speaker.

I rise to give notice of the following motion:

THAT this House urges the Government of Yukon to work with the Government of Canada to ensure the RCMP detachment in Faro is replaced, and to create a plan going forward for the renovation or replacement of one RCMP detachment every five years, as outlined in the 2012 *Territorial Police Service Agreement* between Canada and Yukon.

I also give notice of the following motion:

THAT this House urges the Government of Yukon to begin community consultation moving forward with the rehabilitation of the Nisutlin Bay bridge.

**Ms. McLeod:** I rise to give notice of the following motion:

THAT this House urges the Government of Yukon to:

- (1) recognize that Watson Lake is the gateway to the Yukon;
- (2) acknowledge that the Watson Lake Visitor Information Centre is at the end of its life cycle and is no longer meeting the needs of the tourism industry and needs to be replaced; and
- (3) continue discussions with the Town of Watson Lake, industry groups and residents to develop a timeline for the replacement of the Watson Lake Visitor Information Centre.

**Ms. Hanson:** I rise to give notice of the following motion:

THAT this House urges the Government of Yukon to make public the analysis of options presented by the Yukon Energy Corporation to keep electricity rate increases below the 14.7 percent initially proposed to the government in December 2016.

**Speaker:** Are there any further notices of motions?

Is there a statement by a minister?

This then brings us to Question Period.

### QUESTION PERIOD

#### Question re: School supplies funding

**Ms. Van Bibber:** Earlier this week, we highlighted that the Minister of Education has eliminated the popular program that provided \$100 per student to school councils across the territory, which allowed them to provide necessary school supplies. Not only did it assist families financially, but it gave them the comfort to know that at a very busy and stressful time of the year, this important task was taken care of. We have heard from a lot of parents who are surprised that the Liberals are eliminating the school supplies program. It certainly seemed there was no consultation with parents before the government made the decision.

Can the minister tell us this House if she consulted parents before she made the decision to eliminate the school supplies program?

**Hon. Ms. McPhee:** No, parents were not consulted with respect to this because the characterization, I think, is unfortunate that it was a program that was cut. It was actually one-time funding that was put in place in the spring and through the summer of 2016. There was no consultation about cutting the program because it was only initiated for one time. It was carried out through the school year of 2016 and into 2017 and, as a result of the one-time funding, that was all that was committed. It does not live in this 2017-18 budget.

**Ms. Van Bibber:** It seems odd that the minister did not consult with parents before making the decision. Now that the minister has removed the program, we are seeing at least a few schools coming together to pool money with parents to organize the purchasing of school supplies. This puts an increased burden also on teachers who are already working very hard to support our students. If they truly believe in evidence-based decision-making, a review would be the best path forward. Will the minister launch a review of the program to gauge its effectiveness before she removes it — yes or no?

**Hon. Ms. McPhee:** I thank the honourable member opposite for her question. There was no consultation with parents when this program was initiated in 2016, and it came as quite a surprise to some parents. It certainly came as quite a surprise to the school councils.

I actually happened to be a member of a school council at that time, and it was a big surprise to school councils that this funding was coming but also that the responsibility of spending that funding on behalf of students and providing school supplies for them was landing in the laps of the school councils. Many of them could not manage that and sent it back

to the department, which did manage to scramble and have those materials supplied for students.

It was announced as a \$100 per student for school supplies, as I've mentioned earlier in the answer to this question, during an election year — unfortunately without much planning, with no consultation at the time. As I guess I've said clearly before, there is not funding for this program in this year's budget because it was for one year only.

**Ms. Van Bibber:** The minister talks about consultation and is debating how the school supplies program worked. We know the program was popular and that many families felt it worked. If the minister thinks that it could have been improved, then, instead of removing it, she should have conducted a review to see how it could have been improved. Maybe the administration of it could have been done differently. Maybe the amount of the funding provided could have been adjusted.

Instead of removing the program, will the Minister of Education agree to consult with parents and gather the necessary evidence to see how the school supply program can be improved?

**Hon. Ms. McPhee:** It actually is a very good question. Perhaps it should have been asked last year when this whole program was implemented in the first place.

I have personally met with many school councils. We have delivered the message to school councils that, in the event that the school supply program needed to be available to their students — or not this particular program, but if school supplies needed to be available to their students, they would of course be supplied.

Before this program came about as a result of a one-year decision by the then-government of the Yukon Party, it was the case that school supplies were provided to students in schools on an individual basis. It is something that schools have always done. It is something that schools know — that if they need or require more funding for it, they should go to the department because it is not something that we would ever allow to happen — where a student was not prepared and did not have the proper supplies needed to achieve what they can in school and to allow each and every student the opportunity to do that.

#### **Question re: Election commitments**

**Mr. Kent:** During the election campaign, the Liberals made a number of commitments regarding the knowledge economy. One Liberal promise was to enhance connectivity and bandwidth for all Yukon communities. In fact, they were explicit in saying they would move on this immediately after the election. However, nearly seven months after the election, the Liberals still don't seem to have moved on this file or have a plan.

Last week, when we asked about this Liberal promise, the Minister of Highways and Public Works was dismissive, saying that they have five years to deal with their commitments and they hope to someday look at this promise. Well, the Liberals promised that they would move on this

immediately, and it seems like this was just another empty promise made by the Liberal government.

Since the Liberals have redefined “immediately”, will they please provide us with an updated timeline?

**Hon. Mr. Pillai:** When we talk about connectivity, we're talking about a series of things. We've talked about some of the work that has previously been done by the Official Opposition in the communities and what it looks like going forward to improve connectivity. We're talking about redundancy and a consistent set of infrastructures.

As we have said, we have spent a tremendous amount of time looking at what was originally done, revisiting plans when it comes to redundancy, taking a look at costing different models, looking at new technologies and how those new technologies will affect things — not broken promises. I got down to work on this right away, working with my colleague, looking at new technologies — applications in for funding — and then looking at the CRTC and their rulings, which just came through.

I think it would be foolish to move forward without understanding what is going to be mandated for connectivity. I think we're at it — no broken promises and getting work done.

**Mr. Kent:** Hopefully in the second response, we can get an idea of what the revised timeline is with respect to enhanced connectivity and bandwidth in our communities.

Last week, we also asked the Yukon Liberals about their commitment to establish a five-year funding plan for technology innovation projects. When asked about this commitment last week, the Minister of Highways and Public Works didn't answer the question, instead referring to the annual IT envelope spending. We are left to assume that the work hasn't been done and that this will end up being yet another broken Liberal promise.

Will the government honour this key election promise it made to Yukoners last fall, and when will they do so?

**Hon. Mr. Pillai:** I am happy to share with the member across the way that the Department of Economic Development, as per our platform, is currently working on that. It's a five-year funding envelope, taking a look at innovation, taking into consideration that we have been renewing funding agreements and trying to make things a bit more inclusive as we work together with these groups to come up with a true innovation ecosystem.

That work is underway. When the Department of Economic Development and the good people there have completed that, I will table that for the House, but that work is underway in the short term. Once again, no broken promises — a little bit of spin in the language, but actually getting the work done.

**Mr. Kent:** We had hoped for more than just spin from the minister opposite when he's talking about commitments that they made to Yukoners last fall.

Another Liberal promise for the knowledge economy was the establishment of — and I quote: “... a \$10 million economic infrastructure investment fund through the Yukon Development Corporation to advance economic

diversification and innovation.” However, we don’t see that commitment reflected in this current budget.

Do the Liberals intend to honour that commitment and, if so, when can we expect this fund to be established?

**Hon. Mr. Pillai:** As we have reported in the House already, governance structure being revised — first of all, we have an OIC that identifies just one very focused mandate for Yukon Development Corporation. Taking the advice from the good people of the Yukon Development Corporation, taking into consideration the financial challenges that the Yukon Development Corporation are in — we can expand on those, but probably not in a minute and a half — and also putting \$1.5 million forward so we can look at supporting innovation and, in the budget as you see, \$5 million and then \$5 million.

Once again, committing to doing it, getting the work done — not a broken promise.

### Question re: Home-warranty programs

**Ms. Hanson:** Buying a home is often the single-most important purchase in a person’s life. New home-warranty programs already exist in most parts of the country and offer protection to owners of new homes and those doing major renovations. As of 2018, Manitobans will have protections for up to seven years under the new home-warranty protection legislation.

Warranty programs provide some comfort to the customer by ensuring that defects that appear over a certain length of time — say to the foundation or roof — will be fixed at no extra cost without a lengthy court process.

Does this government support introducing measures to protect homeowners from deficiencies in new condos or homes?

**Hon. Ms. Frost:** I thank the member opposite for the question.

The Government of Yukon is most certainly looking at development, maintenance and maintenance upgrades and looking at opportunities to expand the current and existing programs that we have within Yukon Housing.

Clearly, we’ve had some shortfalls in terms of program delivery and we are looking at expanding and making sure that we address and make good informed decisions on perhaps some of the disrepairs that have been identified and upgrades on all of the houses. Opportunities for access to infrastructure funding and innovation funding are most certainly there within our budgets and within our portfolios.

**Ms. Hanson:** I appreciate the Minister responsible for Yukon Housing Corporation attempting to address this, but we’re talking about consumer protection. According to the Yukon Bureau of Statistics, the average single-family home in Whitehorse is now selling for \$420,000. Throughout Whitehorse, we see condos going up and an unprecedented number of homes being built in Whistle Bend subdivision and elsewhere. There’s a rush to build and with the rush, comes some concerns about shoddy work and the worry that problems could leave homeowners on the hook for repairs. The same goes for major home renovations. There is no

protection for the homeowner undertaking major renovations to upgrade their homes.

When a homeowner finds a major problem in their new home or with their renovations, does the government believe they should have options other than going to court?

**Hon. Mr. Streicker:** I thank the Leader of the Third Party for this question. We are, as a government, intending to work with homeowners to assist them in doing renovations. This is part of our significant platform around doing retrofits across the territory for residential, institutional and commercial buildings. When that happens, we will be working across various departments here.

To the specific point that she is asking about, I thank her for the question. I don’t have an answer at hand here and so I will take that question and I will try to come back with a response after consulting with the department.

I thank her for the question.

**Ms. Hanson:** I thank the minister for thanking me for this question. It’s not a new question; this has been on the minds of homeowners and people doing renovations for years. When someone buys a newly built home or embarks on a major renovation, they should have the right to accurate information about their builders. They need protection against costs that keep escalating. They need assurances through inspections that what they paid for is what they get. Owners of new homes need recourse to fix problems that the contractor should have dealt with — not lengthy court processes. Homebuyers need assurances that building contractors have the level of skill, certification and expertise and are able to offer consumers guarantees on their work.

Mr. Speaker, it is not only homeowners who are negatively affected when problems occur. Contractors and builders are tarnished by the bad work of a few. Contractor associations across Canada have welcomed homeowner protection.

Will the minister commit to homeowner protection legislation and a bill of rights for homebuyers?

**Speaker:** Order.

**Hon. Mr. Streicker:** I thank the Leader of the Third Party for the question.

What we will commit to is consulting with the departments to have a conversation about where the situation is at. At this point, I don’t have a response. I will say that we do care about our contractors and making sure that they are able to do good work and, where there is work that is not professional, we deal with that. I will also say that we care about our citizens and that they have safe and adequate homes.

We’ll work to get an answer for the member opposite and I thank her for her question.

### Question re: Land development

**Mr. Cathers:** In December 2013, the Yukon government and Carcross/Tagish First Nation signed an MOU outlining a number of projects the governments would work together on. Development of Conrad campground and titled recreation lots on Tagish and Bennett lakes were two

successful parts of the MOU. Another part of it was the creation of a high-end tourism lodge on Millhaven Bay on Bennett Lake. In January 2014, the private developer International Ecotourism Development Corporation submitted an expression of interest to the Yukon government to develop this resort. However, they now seem to be in a holding pattern on the project.

What updates can the Minister of Energy, Mines and Resources provide Yukoners with on this project and is consideration being given by the government to putting a deadline on this company's application?

**Hon. Mr. Pillai:** Thank you for the question.

Actually, I am booked with both the Deputy Minister of Economic Development and the Deputy Minister of Energy, Mines and Resources to meet on all subjects concerning Carcross/Tagish First Nation on Friday morning — so fantastic timing for your question.

We have been looking at a series of things. As a whole-government approach, we are looking at large capital projects, which are for interest. We are looking at tourism items there within the community. Certainly, without getting into the details on this particular one, it has not been something that has been tabled to me. In a past life, in another world, in another job, I certainly knew of the project. I don't know if there is still any interest within the First Nation and the development corporation to move it forward. Certainly what we have seen from them is a list of other priorities, whether it be renewable energy or work within their community and other items such as that.

On Friday, Mr. Speaker, when I am meeting with the chief and his representatives and our deputy ministers, we will see if there is still interest in that application, but certainly it is not something that has been tabled before me in this current role.

**Mr. Cathers:** I appreciate the minister's answer and I would appreciate if after that Friday meeting he could get back to this House with an update.

A feasibility study was also initiated with respect to improvements to the Carcross dock and marina, which was intended to be another important piece of infrastructure for the visitor industry in Carcross, building on the Carcross Commons, world-class mountain biking opportunities and the White Pass & Yukon Route train.

Could the minister provide us with information on when improvements to the Carcross dock and marina are expected to begin? If he doesn't have this information, could he commit to getting back with that?

**Hon. Mr. Pillai:** I think it's just out of respect to the Carcross/Tagish First Nation — these are the challenges to table, certainly, when we have an indication of how that project wants to be handled. Certainly there is a need for it — absolutely. Who is going to do the work has to be taken into consideration. If it is YACA and the agreement we would use in concert with them to execute the work, those discussions have to be in place.

Also, taking into consideration — land planning is on their mind and rural residential development, what is

happening in Tagish at this particular time, waterline and access — many, many, many issues that have piled up, not just over the last couple of years, but over many, many years.

I'm not saying that to be disrespectful to my friends across the way. There are lots of things to talk about. We need to prioritize them and then figure out how we get a solution going forward and then some of these capital projects.

We will get back to the Member for Lake Laberge on how that particular project is going to be handled.

**Mr. Cathers:** The minister mentioned residential land, which I also have a question for him on.

The memorandum of understanding also dealt with an extension of Tagish Avenue so that CTFN could develop some of their Bennett beach properties for potential residential opportunities. The Yukon government contributed 50 percent of the cost to the extension up to a maximum of \$400,000. Part of the contribution was about the potential for development of Crown land in the area.

Can the minister provide us with an update on what timelines are in place for development of this land and when Yukoners can expect that a land lottery for new lots might be held?

**Hon. Mr. Pillai:** Mr. Speaker, this is a sensitive one and I will answer it. Only because you have asked me the question will I dig into this. There was a real lack of consultation. Your previous government — you didn't consult. The understanding with Carcross/Tagish First Nation was that they would develop their lots, and they would put those lots out first and then in a phased approach.

I think it's really inappropriate to ask me about when we're going to rush to put these Yukon government lots out, which would undermine the whole fact that the initial idea was an economic development process for them to get lots out. That file was left in a very uncomfortable way — part of some challenging conversations and probably what we will be talking about tomorrow. Certainly, early into this job, the leadership of Carcross/Tagish came to us and said: "What's going on with this? Are you really moving forward on this?" It was something that seemed to be done maybe not with the clearest of conversations.

#### **Question re: Alcoholic beverages, Yukon-made**

**Mr. Hassard:** Mr. Speaker, a significant local industry that we're all very proud of is our local beer and spirit manufacturers. Not only do they produce the best beers and spirits in the world, but they also employ a number of Yukoners and make significant contributions to the Yukon Territory's economy.

During the election campaign, the Yukon Party committed to eliminate the government markup on locally produced products and to allow local manufacturers to undertake direct sales to bars, restaurants and consumers. Not only would this move have led to a reduction in the price of locally produced beer, but it also would have supported growth in an important local industry.

Can the government tell us if they will consider implementing the changes necessary to undertake direct sales



and to eliminate the government markup on locally produced beer and alcohol?

**Hon. Mr. Streicker:** Thanks to the member opposite for his question — especially for acknowledging the great quality of our local producers. I'm sure that all members of this House will agree on that.

We recognize the importance of our local manufacturers. I have had the opportunity to sit down with all of them, and we value their contribution as local businesses here in our economy and we're proud of their success.

We are working with them as we update the Yukon *Liquor Act*, and we have had several conversations. We are working at this point to have a review of our pricing structures. We're in conversation with them. I'm not making commitments at this point to the member opposite or here in the Legislature. That work is going on in consultation with them, with our licensees and ultimately with the public.

**Mr. Hassard:** I'm happy to hear that. As our local distilleries and beer producers grow here in the territory, they are also expanding into other markets. This is an area where the Government of Yukon can provide a lot of support to our local industry. This support could include marketing initiatives or support at trade shows.

Can the minister tell us if the government will consider launching a marketing campaign for Yukon-made products outside of the territory?

**Hon. Mr. Pillai:** Taking into consideration the fact that we're talking about marketing items outside of the territory, first of all, I think there are a series of programs that we could look at that already exist within Economic Development — the member opposite would know that from his time there — and that we could use and tailor. There have been programs before. I think Yukon breweries worked with federal funding through the Whitehorse Chamber of Commerce, I believe, and Economic Development to enhance their overall marketing strategy Outside, so some of that work was done under the previous government.

Part of the commitment that I made here was consultation in the summertime with the brewers, which has not been executed yet. When the Legislative Assembly finishes, having a discussion concerning where we go with this *Canadian Free Trade Agreement* — the members opposite had asked me that question right after the work — and so getting direction from them.

The commitment I will make is that part of that conversation, when meeting with these brewers, is to understand how we can help them — not just them, but any local manufacturer who wants to take their products and look at export. We're open to those conversations.

I will definitely take that under advisement and have the discussion with our brewers.

#### **Question re: Dawson City Airport**

**Ms. McLeod:** Regarding the issue of paving the Dawson City runway, the Liberals seem to have taken a different position regarding this matter depending on what day it is. In October last year, the Liberals said they would pave

the runway; in March this year, the Liberals told the community of Dawson that they didn't know if they would pave the runway; on May 15, the Liberals said that they hadn't decided if they would pave the runway; on May 16, the Liberals said: Well, we are kind of committed but we might not, depending on the study.

On May 19, the Liberals bought T-shirts saying that they were committed. Yesterday, the minister said that he won't commit to paving the runway. It's a new day, Mr. Speaker, so let's see what the position is that they take. Will the Liberals pave the Dawson City runway — yes or no?

**Hon. Mr. Mostyn:** I'm a bit befuddled by the member opposite's lack of understanding on this issue. I think this government has been very clear. We have been clear in Dawson; we have been clear in this Legislature. This government is committed to paving the Dawson City runway.

The question is how we get there. We are doing the research we need to get there. This is something — maybe this is where their lack of understanding arises. You have to do work, Mr. Speaker, to get there. We have a lot of legwork to do, a lot of research, and we are doing that research, making sure that, when we spend the public's money, it's going to achieve the goals we want it to achieve. This government is doing that hard work. When we get the answers we need, we'll tell this House how we're going to pave the Dawson City runway — how we're going to pave it. We are paving the runway, Mr. Speaker.

**Ms. McLeod:** That is great to hear; however, considering the Liberal's history of flip-flopping on this file on an almost daily basis, tomorrow they might change their minds again. Can the minister tell us in what year the runway will be paved?

**Hon. Mr. Mostyn:** Well, this is just extraordinary, actually. We heard a former Premier stand and make an announcement in Dawson that they were paving the runway. We thought, "Hey, look, they are paving the runway." We assumed that when you make an announcement like that you know what you are doing, but apparently not, because when we took office, we found that none of the legwork had been done. We didn't have the answers — no good answers — to actually proceed with a job that had been promised by a previous government. We are sitting here — "Holy smokes, this hasn't been done." So we started the hard work to get that work done. It's not easy work. You have to work interjurisdictionally with the federal jurisdiction, the City of Dawson and chambers of commerce to do this thing, and with airlines like Air North and others to make sure that we are all on the same page. That takes a lot talking.

We are doing that work and at the end of this, we will have a runway that serves the needs of the people of Dawson and actually serves the taxpayers of the territory.

**Ms. McLeod:** Thank you for that response. At the end of the day though, I still don't have an answer to the question: What year will the runway be paved?

**Hon. Mr. Silver:** It is almost déjà vu all over again. I remember being in this Legislative Assembly asking the Yukon Party what year would the recreation centre be built in

Dawson City. I think I asked during our first year in 2011. I asked in 2012, and they kept on telling me that Rome wouldn't be built in day. I asked in 2013. I asked in 2014 and in 2015 as well. We asked that question over and over again and we didn't get our recreation centre.

Like I said, we inherited this government and the progress of this government. When we got in here, one of the first things we wanted to commit to was paving the runway in Dawson. The problem is that no work was done beforehand. I would love to give an answer to the member opposite right now, but it seems to be another broken promise from the Yukon Party government that we have inherited.

**Speaker:** The time for Question Period has now elapsed.

We have two orders of business before we go to Orders of the Day.

### INTRODUCTION OF VISITORS

**Hon. Mr. Silver:** I want to ask the indulgence of the Members of the Legislative Assembly today to help me welcome a constituent of mine and also an employee of the Tr'ondëk Hwëch'in — I believe in the Justice department — Mr. George Filipovic.

*Applause*

### Speaker's ruling

**Speaker:** Prior to the Orders of the Day, the Chair will elaborate on the ruling provided yesterday during second reading of Bill No. 3, entitled *Budget Measures Implementation Act, 2017*.

During that debate, the Member for Lake Laberge said — and I quote: "... we believe that the red ink that we see in future budget years is a significant change from the fiscal year that is shown in the budget projections that we had expected — a \$17-million surplus — where we see \$216 million in red ink in the Premier's projections. We're not sure whether this is due to overstatement in the budget that may or may not be deliberate..."

The Government House Leader then rose on a point of order and said that the Member for Lake Laberge's use of the phrase "may or may not be deliberate" was not sufficient language to disguise the member's suggestion that the Premier was somehow deliberately misleading the House.

In response, the Member for Lake Laberge said that the Chair, in his ruling on May 29, 2017, had "... referenced a number of instances where it was, in fact, contextually acceptable to even say that the minister was deliberately misleading the House".

The Chair will make two points regarding this point of order. First, in ruling on yesterday's point of order, the Chair said his initial reaction was similar to the ruling provided on May 23, 2017, the gist of which was that members cannot do in the hypothetical that which they could not do in the positive.

After reviewing the Blues, the Chair would reiterate that point with regard to the point of order raised yesterday. To put

it in a different way, a member cannot do indirectly what a member cannot do directly.

The second point is to clarify any ambiguity that may remain from the ruling provided on May 29. While the word "mislead" and its variations may be used in certain contexts, it is not in order for a member to state or suggest, directly or indirectly, that another member has deliberately misled the House. Therefore, the comment made by the Member for Lake Laberge was not in order.

The Chair thanks all members for their attention to this ruling.

We will now proceed to Orders of the Day.

## ORDERS OF THE DAY

**Hon. Ms. McPhee:** Mr. Speaker, I move that the Speaker do now leave the Chair and that the House resolve into Committee of the Whole.

**Speaker:** It has been moved by the Government House Leader that the Speaker do now leave the Chair and that the House resolve into Committee of the Whole.

*Motion agreed to*

*Speaker leaves the Chair*

## COMMITTEE OF THE WHOLE

**Chair (Mr. Hutton):** Order, please. Committee of the Whole will now come to order.

The matter before the Committee is general debate on Vote 15, Department of Health and Social Services in Bill No. 201, entitled *First Appropriation Act, 2017-18*.

Do members wish to take a brief recess?

**All Hon. Members:** Agreed.

**Chair:** Committee of the Whole will recess for 15 minutes.

*Recess*

**Chair:** Committee of the Whole will now come to order.

### Bill No. 201: *First Appropriation Act, 2017-18* — continued

**Chair:** The matter before the Committee is general debate on Vote 15, Department of Health and Social Services, in Bill No. 201, entitled *First Appropriation Act, 2017-18*.

#### Department of Health and Social Services

**Hon. Ms. Frost:** I'm pleased to speak today to the Department of Health and Social Services capital and operation and maintenance estimates for 2017-18.

Before I begin, I would like to introduce the department staff who are here with me today: Brenda Lee Doyle is the Acting Deputy Minister of Health and Social Services, and Birgitte Hunter is the assistant deputy minister of Corporate Services for the department. They will be key in ensuring that we develop a budget that Yukoners can be proud of, and I would like to thank them for their hard work. I would also like

to take this opportunity to thank the department staff who have worked so hard in supporting me and preparing me and my colleagues in putting together and presenting this budget.

This budget is linked to our government's commitment to Yukoners, to our enduring priorities and to the mandate letter provided to me by our Premier. Our people-centred approach to wellness helps Yukoners thrive. This is the priority that aligns closest to the ultimate goal of Health and Social Services. That priority asks us to ensure that comprehensive and coordinated programs and services meet people's needs at all stages of their lives to support the well-being of Yukoners.

Thanks to all those individuals and organizations, our partners and our stakeholders, for sharing this goal of building healthier communities with us.

In this budget, we are investing responsibly in our health care systems to provide better hospital infrastructure, better supports for communities and supports for front-line service providers. We will continue to work with the Yukon Medical Association to further opportunities to develop collaborative care models in the Yukon. We are pleased to be permanently funding our recently introduced colorectal screening program and exploring other programs in the future.

This budget includes funding to expand and fully implement our electronic health innovation and support the new *Health Information Privacy and Management Act*. This innovative project continues to provide and improve patient safety, quality of care and appropriateness of care by providing more secure and timely access to patient information. In addition, we will be modernizing technologies for our social assistance and disability services programs across the Yukon. The new integrated financial and case management IT system will increase efficiencies, resulting in more time spent with clients and increased support for vulnerable Yukoners.

We will engage with Yukoners to guide our development of new regulations under the amended *Travel for Medical Treatment Act*. New regulations will save Yukon money by allowing us to collect outstanding debts from out-of-territory Canadians and we will also ensure the program continues to meet the needs of Yukoners.

Another way we will meet the needs of the people at all stages of their lives is by working with Yukoners to create solutions to promote aging in place and a full spectrum of care, both privately and publicly. We have reached an agreement with the federal government for an additional \$6.2 million for enhanced home care services for the next 10 years.

We will continue to collaborate with First Nation governments and communities to look at options for aging in place — enabling people to age in their homes and in their own communities. To relieve immediate needs for long-term care beds, we have permanently opened four beds at McDonald Lodge in Dawson City and 10 beds at the Thomson Centre here in Whitehorse. These additions, along with providing funding for the Yukon Hospital Corporation to open four additional observation beds, have provided some immediate relief to the bed pressure that the Whitehorse

General Hospital has experienced over the past several years. Of course much of the pressure will be alleviated by the opening next year of the 150-bed Whistle Bend continuing care facility.

Enduring priorities also direct us to increase investments to ensure healthy pregnancies and to improve newborn health. To achieve this, I am working with the Minister of Community Services to regulate and fund midwifery, which will provide Yukoners with a safe and affordable childbirth option. We believe that a healthy pregnancy is the foundation for a healthy birth. Investments at this critical time of development result in exponential gains in the health of newborns. We are working with Community Services, midwives, doctors and other medical professionals to develop a regulatory framework and we anticipate licensing the practice of midwifery by later next year.

We must invest in our children and ensure our actions as government are coordinated to maximize benefits to all children. One way we are doing this is by looking more specifically at indigenous children in care and looking at what we can do to better provide the necessary supports to encourage the best outcomes. We are working with First Nations, foster parents and our community partners to find more extended family and foster-care providers. Mr. Chair, we are also budgeting to begin planning for the replacement of the girls' group home in Whitehorse.

We have also recently begun working on the development of a fetal alcohol spectrum disorder plan that will help to provide better support for people with FASD and their families. Developing this plan is part of this government's vision of taking care of each other and giving a voice to everyone, especially our most vulnerable.

We are taking action on paternal and prenatal supports delivered in our communities, including supports for pregnant women at risk of using alcohol. We're looking at enhancing supports and interventions for individuals with FASD. Health and Social Services will work with First Nation communities and municipalities to develop options to better coordinate supports for individuals.

We have been provided with 100-percent recoverable federal funding to replace our vital statistics system and to move into an online platform.

We are also working with parents to apply for their child tax benefit at the time of registering a live birth. In many cases, this involves our department working closely with the Department of Education to ensure seamless transition and seamless services related to childcare, early childhood development and education.

We are working in consultation with the federal government to ensure funding for a national framework on early learning and childcare. The federal government recently announced its commitment of \$500 million for the fiscal year of 2017-18 for the provinces and territories, with funding to be acquired or accessed in the Yukon to help us build new early learning and childcare initiatives. As previously mentioned, we're working closely with the Department of

Education on a national framework for early learning and childcare.

Another priority that reflects our vision of Health and Social Services is this: our strategic investments build healthy, vibrant, sustainable communities. One of the ways we are doing this is by improving the provision of mental wellness services in our communities.

We will continue to support the implementation of the Yukon mental wellness strategy by working in collaboration with our partners to ensure that we are providing seamless mental health, trauma and substance abuse services. The first two years of this strategy focused on important priorities, child, youth and family initiatives, building capacity in communities, and increasing access to services throughout the territory.

To help to achieve this, we are hiring 11 new full-time positions to provide much needed support to people with addictions and improve mental wellness in the communities. They will be working closely with First Nations and other community partners to develop very specific, locally tailored options that will support priorities identified in each community.

In our first month in office, we negotiated a deal with the Government of Canada that was worth more than \$5 million for mental health services for families and youth in Yukon over the next 10 years.

In this budget, you will also find further support for people with addictions, for people in need of emergency or transitional housing and for people in need of assisted living. This comes in the form of ongoing support for the operating costs of the Sarah Steele facility here in Whitehorse and the operating costs for the St. Elias group home. We believe in supporting local solutions for local problems and in giving communities a meaningful role in shaping and realizing their futures.

We also believe in strengthening our laws to protect the rights of Yukoners. We are amending the *Vital Statistics Act*, removing the requirement for sex-reassignment surgery before a person can change the gender on their birth registration.

The financial summary — in this budget, we are requesting \$363,570,000 for operation and maintenance funding and \$93,278,000 in capital funding for a total appropriation of \$456,848,000.

Before I get into details, I would like to provide a few highlights. The largest expenditure in the department's O&M budget is \$131,566,000 for Health Services. In the requested capital budget, some increases in capital spending include: \$1,902,000 under Corporate Services to be used for replacing two aging software programs used for social assistance and case management in our Social Services division with one integrated system. There is \$500,000 under Family and Children's Services to begin planning for the replacement of a girls' group home in Whitehorse. This is a temporary home for girls in need of care. There is \$340,000 under Social Supports to be used for deferred spending from the Sarah Steele Building replacement project. There is \$300,000 under Health Services to be used to replace the roof at No. 4

Hospital Road, which houses Mental Health Services and Yukon Communicable Disease Control. There is \$68,518,000 under Continuing Care for the construction costs for 2017-18 for the new Whistle Bend continuing care facility. There is \$17,811,000 under Yukon Hospital Services for the completion of the MRI and Emergency department expansion project.

Our O&M and capital revenue and recoveries are estimated to total \$42,183,000, with \$32,839,000 coming from Canada. This represents just over nine percent of the department's 2017-18 budget.

On the capital side, the proposed budget will see Corporate Services receive an increase of \$3,179,000 in capital. The LISA Wingspan project, which is a software replacement project that I referenced earlier, will receive \$1,902,000 to replace two old systems with one integrated system.

The local income support application, referred to as LISA, is a program used to calculate social assistance benefits. Wingspan is the program area case management system. Both aging programs are being replaced by a new integrated system to better serve Yukoners. The new system will allow for all programs that administer income support services to be integrated and access necessary client information to support proper case management.

Another significant capital increase in this budget is e-health costs deferred from 2016-17 and totalling \$1 million. \$100,000, which is 100-percent recoverable, is being requested for the IT envelope for the Vital Statistics online portal. This will enable Insured Health to implement a new vital statistics system to enable e-services throughout the territory.

We also have a further \$137,000 requested for various network technologies and component upgrades, including servers, computers and monitors.

**Chair:** Five minutes.

**Hon. Ms. Frost:** Five minutes? Okay.

Under O&M, Corporate Services will receive an increase of \$1,288,000; \$751,000 is requested for the removal of one-time limited funding. Under capital, under Family and Children's Services, we are proposing to receive an increase of \$987,000 in capital, primarily for planning and the start of several facilities. \$7,000 would be used for recreation equipment and workshop tools at the Youth Achievement Centre, with \$30,000 being used for security and camera equipment at the Young Offenders Facility.

Under O&M, we also have a \$336,000 increase to be used for extended family agreements to keep children who need to be removed from their homes with extended family members. This amount is recoverable from Canada — \$1,192,000 from Indigenous and Northern Affairs Canada — to improve outcomes for indigenous children.

Under Adult Services, we have \$6,222,000. I will go on with the list — I'm just trying to highlight some of the key areas here now. We have \$1.5 million, which will assist in client caseloads in Whitehorse and in rural Yukon. We have

\$340,000 deferred costs from the Sarah Steele Building replacement.

Under Health and Social Services, we are requesting a decrease of \$7,165,000 in O&M. This decrease is largely as a result of a carry-over of THIF funding from the previous year, as well as one-time limited funding. We also have \$1,116,000 capital under Health Services; \$190,000 is for crib supports and skirting repairs at the Destruction Bay Health Centre.

We are also in the early stages of planning for the replacement of the Old Crow Health Centre, and we have devoted, at this point, \$1, but that is more or less a place mark to continue with the planning on the previous government's commitment.

We are requesting an increase — under Continuing Care — of \$5,565,000 for continued programming. We are operating additional beds at the Dawson City McDonald Lodge and the Thomson Centre that will cost some additional resources.

We have identified that the Whistle Bend care facility construction will continue as planned and will open later in 2018. The new facility will have seven houses, providing 120 long-term care beds, 12 secure mental health long-term beds and 12 community hospice beds, along with six beds for those requiring a high level of care.

With the Hospital Corporation and the costs for expanding the Whitehorse General Hospital — including the space for the MRI machine — there is approximately \$1.5 million. In addition, there is \$17,811,000 for final year of construction of the expanded EMR and emergency department projects.

There are a number of recoverables from Canada. We have recoverables under the THIF — Indigenous and Northern Affairs Canada — to improve indigenous children in care.

With that, Mr. Speaker, I would like to thank you and thank my staff again for being here.

**Ms. McLeod:** Welcome to the officials today — we appreciate your help with this debate.

The northern premiers signed a deal with the federal government on behalf of their governments and citizens in January. The outcome of this Canada health transfer agreement with the federal government provides Yukon with \$42 million plus. In addition to the Canada health transfer, we will receive \$5.2 million to go toward mental health and \$6.2 million to address home care within the territory.

The agreement has a lifespan of 10 years, although I'm a little unclear as to how long the Canada health transfer extends for, so maybe the minister could clear that up. However, the 10 years — we know for sure — is attached to the funding for mental health and home care. If everything is running for 10 years, it means that there is little chance to make changes when the Premier and the Minister of Health and Social Services realize how far these amounts will go when addressing such critical areas of health care.

Considering the annual amount for mental health in the territory, it seems like the funding that our territorial government signed on to would not stretch very far when

addressing the needs of the territory, and the same goes for home care.

Simply put, having such small amounts of funding spread out over such a long period of time means that the needs of Yukoners may not be adequately addressed, and this is unfortunate. The funding level is simply unsustainable. It looks as though — unless further negotiations can be made to increase funding — that health care services, or perhaps services in other areas, are likely to be put under further pressure and potentially cut.

Prior to the Premier taking over as chair of the Council of the Federation, the premiers had been united in requesting a 5.2-percent annual increase to funding.

This request was based on a lot of data, including data from the chief parliamentary officer and the Conference Board of Canada, which suggested that health costs would increase at that rate. However, the federal Liberal government instead insisted on only offering the territories 3.5 percent.

In spite of this, the premiers at the time remained united. Unfortunately, the Premier, who is also the chair of the Council of the Federation, broke away from a united front with other premiers and caved into Ottawa's demands. At the end of the day, they did not hold out with other provinces to ensure that the federal government provided all jurisdictions with a sustainable amount of health funding. Mr. Chair, I believe that our leaders need to advocate for the health and futures of Yukoners and to work to achieve optimal federal funding to meet the needs of residents.

We aren't the only ones saying that the health deal that this Liberal government signed on to is an unsustainable health deal. A report published by the University of Ottawa stated that the new federal health care funding levels offered by the federal government were insufficient to meet the increasing pressures on the health care systems across Canada. It is indicated that health care costs will rise faster than the growth of health care transfers that were negotiated and signed with the federal government. Essentially, this report implies that jurisdictions may be forced to reduce health care services as a result of this increase.

When the Premier disputed this report, a representative for the university told local media that the Premier should take this issue much more seriously. In fact, the Liberals have bragged to media that the deal they signed on to left \$1 million on the table. This is \$1 million that could go toward doctors, nurses, or even providing essential support to families with children who have type 1 diabetes.

At this point, I guess I should note that the minister has recently stated that she won't be funding essential medical equipment for several families with children living with type 1 diabetes. I wonder if the minister could have been able to support the request had she fought harder for a better health transfer deal, and this is concerning for all Yukoners.

Cutting back services would essentially put Yukon in a worse situation than we were originally. Based on the University of Ottawa report, we know that Yukon will face significant cost pressures to the health system as a result of the health care deal that they signed on to.

I just want to ask again what the period of time that the current Canada health transfer covers. Can the minister now confirm that the department's plans on how to make sure that these dollar amounts are sustainable over a 10-year period that they were never meant to cover?

**Hon. Ms. Frost:** Thank you for the question. Let me start by saying that the health care funding is flexible. The targeted mental health care is really — I think that there is a multilateral agreement that we need to take into consideration.

I was present with the Premier and, in Ottawa, I met with the northern ministers responsible for health. Collectively, we sat down and came away with a collective decision, a decision that made the best sense for the north, recognizing that there will be other resources coming available to the Yukon and to the north.

By way of background, over the next 10 years, Yukon will receive \$6.2 million to support enhanced home care and \$5.2 million for health initiatives. Now, with respect to the Canada health transfer that the member opposite speaks to, this is set until March 31, 2024. Yukon will receive \$38 million — that's significant — to address the pressures that we're confronted with and that we see as challenges in the Yukon. We also see that the background — I think there are a lot of opportunities to perhaps provide more information to the member opposite to better understand, perhaps, the complexities of the agreements that we have signed with Canada.

We will continue to work at ensuring that we address critical health care needs in the Yukon for all Yukoners. The THIF funding in the amount of \$25.6 million over the next four years is significant. These deals will provide greater funding certainty for health care providers with medical travel over the next four years. We do have significant resources, and we are taking the best possible approach for a collaborative care model and will ensure that we provide the best medical services to all Yukoners — including the children who are impacted and affected.

There are times when we really need to look at the specialty services that were identified for very specific purposes and specific needs. It's very difficult to counter when we have a specific request and a specific ask without doing the due diligence and looking at costs associated and where the finding is going to come from, and whether we can fund this under our existing funding envelopes.

So really I think it is essential that we look at the collaborative care model. We look at the models that we have in ensuring that whatever services and supports we can provide to the families, we will most certainly do that.

**Ms. McLeod:** In regard to the Canada health transfer that the minister has agreed to, can she confirm what the new escalator of the transfer will be? Will it be 3.5 percent every year for the term of the agreement, which is due to expire in 2024, and can the minister advise when in 2024 the agreement will expire?

Over the total length of the new Canada health transfer deal, how much less money will Yukon receive from the new

escalator versus the 5.7-percent escalator that Yukon was originally asking for?

In regard to the additional money that is coming for mental health care and home care, in a Health Canada news release dated January 16, 2017, it was reported that the Yukon government would be developing indicators and mechanisms for annual reporting to citizens, as well as a balanced plan on how these funds will be spent, over and above existing programs. Canada and Yukon were to work out the details of accountability and reporting. Mental health services for children and youth were to be improved and the number of patients in hospital who could be supported and better cared for at home or in communities would be reduced. Those were the goals.

Will the minister tell us what progress has been made in this regard and when Yukoners can expect to hear the plans for this new funding?

**Hon. Ms. Frost:** Thanks for the question. We didn't "agree" to five percent, what we got was three percent. That was what was negotiated with regard to the increase in the amount on an annual basis. It is compounded so it will grow accordingly. What I will say again is that what we will receive until March 31, 2024 is \$38 million, and this is escalated at three percent on a compounding basis.

**Ms. McLeod:** I thank the minister for that. So the agreement will expire March 31, 2024.

The agreement is for a three-percent increase annually is what I heard from the minister, but I did not hear an answer regarding reporting to Yukoners on the agreement that was to be between Yukon and Canada — reporting to Yukoners how money is being spent regarding the new mental health fund and the new home care fund.

**Hon. Ms. Frost:** The details for the new funding — we have yet to reach that agreement with Canada. It is a multilateral announcement and we are looking at clearly defining what that looks like in the future in terms of the mental health component of that funding.

**Ms. McLeod:** The operation and maintenance for Health and Social Services is budgeted at \$131.5 million, which represents about a \$10-million increase over last year. I would like to know what's included in that line item. It's fairly large and there is limited detail in the budget.

**Hon. Ms. Frost:** Thanks for the question. What I'm going to say is that the costs associated — if you start looking at the increased costs on the O&M side, like all of our budgets, there is an increase in personnel related to our negotiations. The increase here for personnel was \$1,034,000, which consists of \$33,000 for the remainder of personnel funding for the colorectal screening for Yukon project. We have an increase of \$102,000 in funds, which is one FTE from an internal transfer from community support programming — so basically an internal transfer — and an increase of \$899,000 in territorial health funding personnel that was carried over from 2016-17 as it entered into the final year. This, I will note, is 100-percent recoverable from Canada. We did note a bit of a decrease in funding, so although it shows the number that you are referring to, the decrease sees

\$100,000 in funding from the health transfer for mental wellness. These funds are also 100-percent recoverable from Canada.

There is a transfer of \$114,000 to fund the colorectal screening for Yukon projects and this is a net decrease of \$6,592,000. I'll note that the decrease was because of a lapse in the THIF funding, so the funding that was not expended out last year was transferred over to this — this is my understanding overall around health services.

**Ms. McLeod:** I guess my question, given the response, is that I'm thinking that the \$131 million is strictly for personnel. I'm unclear if that is all personnel.

What I am looking for is how much is budgeted for medical travel within Yukon and outside of Yukon? What is the increase for each of those items over last year?

**Hon. Ms. Frost:** To respond directly to the question around medical costs, the current costs that we have on our budget is \$12.7 million for medical travel. Thank you.

**Ms. McLeod:** Thank you for that. So the total amount is \$12.7 million. I don't know where that's contained in the budget — I couldn't find it. Is it part of the operation and maintenance for Health Services of \$131 million? Also, is there a breakdown of in-territory travel and out-of-territory travel?

**Hon. Ms. Frost:** The question about where this could be found — it would be found under the Insured Health component. We don't have the specifics on how that \$12.7 million is broken down for internal and external travel, but we can most certainly provide that information — we just don't have it here.

**Ms. McLeod:** My question remains: Is the \$12.7 million contained within the \$131.5 million? I am guessing that it is.

I would ask the minister to get back to us regarding how much is spent inside the Yukon, and how much is spent outside of the Yukon. I thank the minister for agreeing to provide that. How much is the THIF funding for this fiscal year and how long is the agreement to run?

**Hon. Ms. Frost:** The earlier question is: How much was spent inside versus outside of the Yukon? Just to verify because I didn't respond to that question, for the record, we will provide a breakdown on that.

The THIF funding has been around for awhile, so it's not unfamiliar to the members opposite. The funding is \$6.2 million on an annual basis over the course of the next four years.

**Ms. McLeod:** While special considerations were made during negotiations for mental health and home care, there remains the fact that no mention seems to have been made regarding the need to address medical travel funding for the territory. Our special circumstances around the need for Yukoners to travel to BC, Alberta and beyond for medical purposes needs to be addressed as well. The cost of travel is endlessly mounting for the territory, and we all know that.

While it's a small step toward addressing mental health and home care specifically, it would have been useful to have an option to allot some of that funding toward medical travel,

as a new agreement on medical travel was not put in place before federal funding for the 2016-17 fiscal year ran out. The minister commented previously that we're pushing hard to try to get an agreement, but we really don't have a lot of control over when things are ratified.

Can the Minister of Health and Social Services please confirm that work has been done by the department to get an agreement on medical travel and can she provide a timeline for when this agreement might be achieved?

**Hon. Ms. Frost:** The medical travel treatment program — I am just going to go there for a bit because the *Travel for Medical Treatment Act* and regulations set forth rules for how the program is administered in the Yukon. Any adjustments or changes in the budget will not change the services that Yukon citizens currently receive under the legislated program. No one will lose benefits or services as a result of the change in the budget. If there is an emergency medical care need, the patient will certainly receive the benefit or the services they require. For expanded travel and expenses incurred — I think the medical travel forms part of the THIF funding. That THIF funding is currently up for negotiations with the federal government and will likely be resolved in the coming months. By the fall, we hope to have a definitive answer for the member opposite. The previous THIF funding expired on March 31, 2017 — just as a note — which included \$600,000 for medical travel. Since the agreement has expired, we are looking at negotiating some new measures.

**Ms. McLeod:** British Columbia and Alberta governments were also able to negotiate additional funding to deal with the ongoing and heightened opioid crises in their jurisdictions. Considering that Yukon is on par with these provinces on a per capita basis, there is no justification for our leaders to not have just negotiated a similar type of funding. Why did the minister not request opioid funding from the federal government? Will the Minister of Health and Social Services consider returning to the negotiating table to request funding to help deal with our own fentanyl crisis right here at home?

**Hon. Ms. Frost:** Thank you. I am happy to answer that question. In fact, just this week, the professionals, the medical association and First Nations are working quite diligently to come up with a strategy to address fentanyl and opioid overdoses and challenges in the Yukon. We recognize that there are unnecessary losses of life, and the Government of Yukon recognizes that and we are making this a key priority. Our partners with the First Nations, health providers and NGO groups, including the RCMP, are really working hard to be proactive in engaging with the public. We have provided some supports out to the communities by providing the naloxone kits. We have gone out to social media and to the media, and we have worked with the Department of Education in bridging these gaps and making and creating more awareness in our communities. Mostly it is the education component — multiple users in our communities, multiple responsibilities in our communities as well, recognizing that it's not just the Government of Yukon's responsibility.

We are working with all of the service providers and health providers in our respective communities to come up with a long-term strategy that will look at eliminating and reducing the risks associated. A lot of it has to do with building capacity and education and making sure that we have proactive measures in place — basically, what can we do to ensure that these things don't happen in our communities?

The funding is currently being discussed at the federal level because the federal government just released and announced today a report on the national crisis. BC is experiencing it, as are Ontario and all of our cities across the country, and everyone right across the country, including the federal government, is expressing this as a key crisis and a priority. Regionally, we do need to come forward with a strategic and well-thought-out plan to ask for the resources and have a partnership plan and a plan that will look at cost recoveries, but also educational components and looking at the health components.

I would say that prevention is a big component, so how do we reduce the use of fentanyl and other opioids by way of education that will then reduce the overall cost to our medical care system.

**Ms. McLeod:** I can appreciate that this is a complex issue, and I appreciate that medical associations, NGOs and the First Nations are all working together to come up with a plan to address some of the issues in Yukon. What I did hear the minister say is that funding is currently being discussed at the federal level and that, in order for Yukon to get to the table, we need to develop a plan for how we're going to put that money to use.

I'm wondering if the planning portion that the Yukon is doing is on the same time frame as the discussions around the funding that the feds are willing to release. I'm wondering if those discussions are going to line up and we're going to wind up with the money we need.

**Hon. Ms. Frost:** Right now I'm really happy to say that the partners are working quite hard. They have rolled up their sleeves; they are coming out with a strategy that meets Yukon needs. For me, right now, it's not so much about the money; it's more about the strategies to eliminate, educate and reduce the use in the Yukon.

We can and we will fund the programs if they are necessary, which we find is a key priority for this government. We will most definitely work with the Department of Education and work with medical association staff and our First Nation communities to ensure that they have the supports they need.

If we are confronted with a medical concern related to opioid overdoses or challenges, it would currently be covered under medical funding anyhow. I'm more concerned about what we are doing as a government and as a department to work with the communities to help to build their capacity and build awareness around this unfortunate circumstance that we are confronted with across the country.

**Ms. McLeod:** I have a couple of questions about home care. I have spoken to many Yukoners about home care and their level of satisfaction with the services that are provided. It

seems that care varies from community to community. However, most are pretty satisfied with the service that they receive.

In Watson Lake, the service is largely one hour per week and consists of basic care and very, very light housekeeping. Has the government considered extending home care beyond these limited amounts?

**Hon. Ms. Frost:** I thank the member opposite for the question.

Home care provides a robust and comprehensive suite of services to clients within their own homes, including health care, personal care and support services. My mandate is to provide an aging-in-place model, looking at a collaborative care model that includes a home care program dedicated to a person-centred approach, which focuses on individual needs and assessments.

We are happy to say that, through the provision of home care services throughout the Yukon, we are enabling Yukoners to remain in their homes while supporting healthy and vibrant communities. I am also very pleased to say that Yukon is one of the most advanced in terms of comprehensive services of this nature in all of Canada.

It doesn't cost the clients anything, but it's there. The services are available in all of the communities and we are taking a model or an approach — age well, age happy in place. "In place" means what services we can provide to rural Yukon and to rural Yukon older adults as they age. Granted, some of them may have to come to the city, or may have to access Whistle Bend.

We're also very pleased to say that, given the expedient services, thinking and planning from the department, we have no waiting lists in the Yukon. We are there in a quick, timely fashion as the needs arise and we basically provide the services that are requested for home care services. Clearly, a lot of the clients that we have in a home care environment perhaps are palliative care clients and they are bumped to the highest priority. We would rather that the individual stay at home and we provide the home care than for them to be in a care facility. None of us want to be in a care facility. We want to stay at home with our families, with our grandchildren and with the community.

**Ms. McLeod:** As I say, I speak to a lot of seniors about home care and whether or not their needs are being address. Some concerns have been put forward, of course. But, some time ago, I requested a review of the home care system and the client load. My question is whether or not this has ever been done? Has a review ever been done that includes the clients receiving the service?

Some of the clients say that greater assistance with housework would be beneficial — maybe only once a year to do the deep cleaning, which would include windows and walls. This could be contracted out to the private sector. It would not require any additional FTEs. Again, in Watson Lake, there is only one nurse within the home care unit and she's the manager. This obviously limits the time that she can spend with clients doing dressing changes or bloodwork and a host other assistance that could be provided.



Some seniors need daily care and this does not seem to be a service that is provided in all Yukon communities and, if it was, it would keep seniors in their homes longer and reduce the pressures on the assisted care system. All governments have expressed an interest in helping seniors to stay at home longer.

Will the government look at providing additional nursing staff within the home care sector to assist with the provision of care and to provide the necessary resources for evening and weekend needs of seniors, including those who require palliative care, because I can tell you, it's a problem. If it's not a problem in Whitehorse, it's certainly a problem in rural Yukon where these services are simply not available.

**Hon. Ms. Frost:** Thank you for the question. Maybe I'm just going to a place that I'm familiar with and that's the inequities in services — the inequities in services for rural Yukon, but also for the indigenous communities that we are obligated to provide supports to as well.

I can assure the member opposite that the program is continuously reviewed. Part of the accreditation process really looks at client feedback, so the clients who are clients of the department will provide feedback on what their service care needs are and that is generally done in collaboration with the care providers and the families.

We have also provided evening care and provide weekend supports, if required and requested by the families, so it's done on an individual as-needed basis. That's really around the case management and the care management plan for the individual.

With regard to a broader collaborative care and an aging-in-place model, I think we really need to look at having a community conversation — a conversation around why is it that this government has only provided services to Yukoners who are non-indigenous? We really have to alleviate that barrier that's there for us and push it back out further and look at what we can do to ensure that all Yukoners have access to equitable, fair and transparent services and programs.

Historical data that the member opposite is asking for in terms of whether an assessment ever been done — perhaps the previous government has conducted assessments. What I do know is that we do the assessments and review on a case-by-case basis. Currently, the number of clients ranges from 561 to 600. These are the numbers from 2016 and 2017. Thirty percent of that is made up of community members in rural Yukon. I guess perhaps the question that one might want to ask is: Are the community members getting the same services that members in Whitehorse are getting? Perhaps that's not the case.

If we want to do some assessments, I think that we want to make sure that we provide the best possible care — collaborative care — in our communities in rural Yukon, and we do aim to address that in the coming months.

**Ms. McLeod:** So I guess what I got from that is that the home care system is continuously reviewed. It sounds like it is a fairly informal process. I'm a bit at a loss to be comfortable that caseloads are considered in this continuous review.

So people who are living in their own homes or even in seniors housing and require additional home care, as I understand it from the minister, simply must request that maybe they need somebody to come in and help them with their meds after supper. I can tell you that's a bit of a challenge in rural Yukon and I don't know that instruction has been passed down from Whitehorse administration. If that's the way this is to roll out, then I would appreciate that we see that happening.

Certainly some home care workers are not — perhaps they're not receiving the full support that they could. But it doesn't address also the need for medical staff, a nurse — a real nurse — to be able to get out and to see more and more of our home care clients. Some of our clients who are in seniors housing really do need that day-to-day contact to help them make sure that their meds are being taken on a daily basis, to make sure that they're eating on a daily basis and perhaps working in collaboration with Yukon Housing Corporation. There needs to be a mechanism to determine when that senior needs to move on to a greater level of care.

Right now there are a number of seniors who don't have family supports and there is no family advocating for them. They are kind of left behind because the departments don't want to take on that responsibility and heaven forbid — I'm not sure I blame them for that. However, there still needs to be a mechanism to determine when a senior citizen must move on to a greater level of care when they cannot live on their own any longer.

Seniors have told me that all of these things are necessary to them. Some seniors are hesitant to speak at a public forum or to an official because they're just not comfortable with that, so they speak in different ways — they speak around the community and they speak to their friends. Certainly they've spoken to me. In the absence of doing a complete review of the service and the needs of seniors and considering the time involved in doing a review, will the government look at immediately increasing the scope of service provided, perhaps subject to a review down the road? That would be helpful.

Now there have been much lauded press releases around the increase in federal funding for home care to the tune of \$6.2 million, in fact. But yes, the devil is in the details and this money is spread over 10 years.

Simple math would suggest that \$620,000 per year could be expected. Now, that amount of money on an annual basis would do very little to increase services to clients, assuming that this is an additional amount, and not replacing funds invested in home care on an annual basis. But alarmingly, it's only \$210,000 in this year's budget, out of \$6.2 million. So where is the rest of it? How will the total amount of this federal funding roll out?

**Hon. Ms. Frost:** That was a lot of thought there, perhaps some speculation and a lot of questions — and then one, perhaps response. I'm going to attempt to address all of them.

No, the department is not taking an ad hoc approach to resolving and addressing care needs of clients. We are looking at the division. The department is really taking a proactive,

collaborative approach to come up with a strategy addressing the needs and looking at perhaps reassigning our program areas to better align with the individual needs. I had indicated earlier that the individual needs may not — it's different for every client and every individual, and my own experience speaks to that. Yes, I know that — as a former lead negotiator for one of the First Nations, I've worked in practically every community in the Yukon. In terms of care and services, we know that we don't provide appropriate services in rural Yukon, and we aim to fix that. We want to ensure that our elders age well and age healthy, in place. That means designing a system-wide strategy.

The objective of real nurses — well, we have real nurses, we have RNs, we have practical — not practical — we have real nurses. We have nurse practitioners in our communities, and these are real nurses. They are on the ground and they are supporting the families. We have arrangements for them to work with families to help the families become educated and aware of the client service needs on an individual basis. The department really, I think, wants to take responsibility, but we also need to look at the individual needs and the individual requests. The absence of a review of services — well, we are always reviewing our services and always reviewing the programs.

In terms of expanded scope of care providers, we have home care services. I am happy to say that home care includes physiotherapy, occupational therapy, nursing, social workers, personal care, light housekeeping, meal preparation, grocery shopping, and caregivers and respite care. These are all programs that are encompassed in the home care program. We are looking at ensuring that all 601 home care clients have access to all of these services. Again, the long-term care varies from individual to individual.

The range of clients will determine and dictate what is required as well. Some are living in acute care facilities; some choose to live at home with family support. We need to ensure that we have the supports there. We have worked quite closely with the First Nation communities to actively address needs through a variety of programs and services in the communities, enhancing services to support individuals who otherwise perhaps couldn't get into one of these care facilities or elect to stay in the communities.

We have also recently increased and continue to support the Birch Lodge facility, which is an expanded care facility, 24-hour care support for individuals who can live on their own and live somewhat independently, but who require supports. We also continue to fund in this year's budget the 10 Thomson Centre beds that are available. For north Yukon, we have increased supports in the McDonald Lodge facility to ensure that we address and meet rural Yukon needs.

Does that address and meet all of the pressures? No, it doesn't, but we are looking, and will continue to look, at an expanded divisional approach, or a department-wide view and lens, to better align with the individual needs and perhaps retool what programs and services we currently have.

**Ms. McLeod:** What I heard there is that the government would not be looking at increasing the services

provided to seniors in the absence of a review. Fair enough — but reviews and government works take a fair bit of time, and I don't know how far down the road we're looking at for a review to be completed. I'm sure the minister has no idea on that at this point either.

The minister did list a number of things that are covered by home care, such as physical therapy, shopping, taking people to the doctor — quite a list of things. For one hour a week, that's a lot of stuff. I'm a little concerned that the home care needs of that person are not being adequately addressed. To be clear, I am talking about home care; I'm not talking about extended care facilities, because that's an entirely different animal.

What I did not hear any answer to was where the rest of the \$6.2 million will be rolling out and when.

**Hon. Ms. Frost:** I'm perhaps a little perplexed. What we are doing in the department — and I'm going to say this again — is we are reviewing on a regular basis the assessments and the needs of individuals. It's not a sedentary process. We are really looking at individual needs as the individual need arises, and the programs are delivered around the need of the individual.

It varies and changes from person to person. I have listed a number of programs and areas of service that we provide to the 600 clients. So yes, regular assessments are done.

Are we going to go in and spend a bunch of money and resources to look at doing an assessment? Really, I think that what we have been mandated to do is look at an aging-in-place model. That is what we aim to do. The department is looking and working with the communities to, I think, really build a care model for an aging-in-place model. That means that the partners need to come to the table in that discussion, in that conversation. Once we start looking at this being a 100-percent Government of Yukon responsibility — I believe that society, individuals, other organizations and other governments have a responsibility as well to come as partners to the table in designing a comprehensive model — a model that will apply to long-term care in rural Yukon.

Again, it is based on need. The \$6.2-million funding this year — we'll be working with the federal government through a bilateral agreement in home care — is, again, the basis for the discussion and that will then address the needs. Aging in place, I think, are the key words, and collaborative care — aging well in place, I might add.

**Ms. McLeod:** I have to remind the minister that, when it comes to aging in place for a lot of our seniors, government is it. I'm sorry to say that, but there is no family support and there are no friends left anymore — government is it.

While it's all well and good to look at involving the community, sometimes there is no community. Seniors need additional resources. Some of them don't. Some of them are just happy with their one hour a day. They're the ones who are still active. They're getting out of the house by themselves. They can get to the store by themselves, but there are a handful of seniors in my own community — and I'm sure it is representative of the entire Yukon — who need more help. They need more than one hour a week. One hour a week is not

very much time. It's not much of an investment in those seniors.

It may have worked for a number of years, but now it's time to move to expanding that for these seniors, given that we have a ton more money — \$6.2 million. I still didn't hear how we were getting that, and if the government doesn't know or isn't willing to share that information, we have a big problem.

I would like the minister to confirm the amount of money spent on home care in the last fiscal year and compare that to the total amount budgeted for this year. The Premier has said that the new 10-year agreement on home care and mental health funding will allow the government to undertake planning and delivery of programming to ensure better outcomes over the long term. And you know what? That is a lot of government-speak that could mean just about anything.

I would like to know this: What does that mean in regard to boots on the ground in Yukon communities?

**Hon. Ms. Frost:** I am not sure where the member opposite is getting her information with respect to one hour a week, because that is simply not the case. We have clients who have received 10 to 20 hours a week. Nurses and nurse practitioners in the communities are on call when we have palliative care patients in their communities and in their homes. That is there and in a responsive fashion. That is essential. We are trying to work with our professional staff to ensure that, as we can, we have the needs in the communities.

In the budget, you will see that there is an increase for 5.5 new FTEs in this year's budget, and that is in the home care component. We have also identified 11 new mental wellness positions. Those are positions that are boots-on-the-ground in the communities that will ensure that services are provided and enhanced supports are there. That will be designed with input from the communities so the needs will be there. With regard to what was spent last year compared to this year, I don't have that data in front of me right now, but I will most certainly provide that to the member opposite.

**Ms. McLeod:** I can assure the minister that my information comes from seniors. I am not making it up. I didn't dream it. Those are actual numbers coming from seniors.

It does underline the need for review of this system. Where the minister believes that some families or seniors are getting 15 to 20 hours a week of home care — I think that's great. I don't know of anyone who is getting that, but I am sure that they exist. The five FTEs for home care that are new positions — where are they located? Where will they be working? The minister also referenced the 11 FTEs who will be in eight different Yukon communities. As I understand it, they are not associated with home care. They are associated with mental wellness and addictions. The minister has referenced that previously. Where are the five FTEs located? What are they doing for our seniors?

**Hon. Ms. Frost:** With regard to the question, the five FTEs are in Whitehorse. They won't provide support to the communities.

**Ms. McLeod:** Frankly, I am at a bit of a loss to know how that increases home care in rural Yukon. I can't fathom it. Thank you, though.

Referring to the Premier's mandate letter, can the minister elaborate on the government's plan to — and I quote: "... create solutions to promote aging in place and a full spectrum of care, both public and private..." This is a somewhat vague statement, and I am not sure how that is supposed to roll out. Maybe the minister has some details on that, but maybe it was intended to be vague so it can include a range of ideas. If there is further information on how the minister plans to carry this out, I would be happy to hear that. Also, how this is going to — and whether the government plans to include rural Yukon in these planning exercises that are not just Dawson and Whitehorse?

I have heard much importance — I have heard a lot of things about the importance of having home care extended to evenings and weekends and expanding the scope of the practice. The minister has made some reference about public health nurses filling this role on the medical end. I don't know if the public health nurses are aware of that, but in a pinch, I'm sure that they would not hesitate to attend to it.

So can the minister confirm whether this government is willing to consult with Yukon health care professionals on the range of services, both current and the desired ones, for home care and look at what other jurisdictions are doing?

**Hon. Ms. Frost:** Just to clarify, I didn't say 15 to 20. I said 10 to 20, just for the record.

Also, the clarification around the public health nurses, the public health nurses are obligated to provide medical care to clients and when we talk about aging in place, some of these clients we have are palliative patients who choose to perhaps end the rest of their days at home. That means the family, the supports and the systems have to be established and that's when the nurse practitioners or the RNs step in and they ensure that home care is provided.

We know that in every Yukon community in which there is a self-governing First Nation, they step up to the plate under their resources and they provide direct home care to their clients and to clients in the communities and continuously trying to work with the service agencies in their communities.

The mandate that I have is not vague. It is very clear to me that the Premier has given me very specific and very clear instructions as the Minister of Health and Social Services and that's to come away with an aging-in-place model. What does that look like and how does that happen? Well, let me assure you that aging in place will be a comprehensive approach that will involve community consultation and engagement. We are looking and working with Yukon Housing Corporation as well because Yukon Housing has an obligation to provide some services and supports for infrastructure and seniors complexes, seniors housing and seniors units in our communities. Is it sufficient? Perhaps it hasn't been sufficient enough, but we do aim to work with our partners and really look at a one-government approach to addressing all of the questions around home care, aging in place, and ensuring we

have collaborative care models. How will that happen? It will be done with consultation and engagement.

I'm very clear. I have no questions whatsoever about my understanding of what my mandate is. Just for the record, we have, as you will see in the budget — and having the knowledge historically, I'm sure — there are roughly 104 full-time employees who provide home care services and support to the 560 to 600 clients and they are there on call when required to provide individual care needs and assessment needs.

We do have home care nurses who work in the department, which is completely separate and aside from the RNs who work in the health centres in the communities. When available and when needed, the RNs in the communities step in and take that role on and provide support. So are they aware? Most definitely they are aware, as part of the requirement for their services in rural Yukon and in supporting rural Yukon.

**Ms. McLeod:** I thank the minister for her commitment to undertake a review, to consult with Yukoners in their home communities and to involve health care professionals and all stakeholders in this review. I hope that it is undertaken in a very timely manner — like this year — but I can see that I might not get a commitment on that part.

I would like to move on to mental health. Every Yukon community has challenges addressing mental health issues in their community. Governments have attended to this matter in a variety of ways. We have family and youth counsellors, mental health nurses and support groups, and yet we don't seem to be making any headway. Mental health for affected Yukoners doesn't seem to be getting any better. It's worth noting that about 65 percent of Yukoners think they're in a pretty good state of mental health, and that's lower than the national average of 71 percent. Clearly, what we're doing for those who need mental health support is not working as well as we should expect, especially for the investment in dollars.

In the new funding arrangement with Ottawa, Yukon will receive \$5.4 million that must be spent on the provision of mental health services. As we have seen with home care, the devil is in the details and only \$100,000 contained in this budget is from the new dollars. How come? When will we see the balance of this much lauded contribution from Canada? How much per year, how will it be deployed and in which communities? As I have said before, if the government doesn't have the answers to these questions, we have an additional set of problems.

**Hon. Ms. Frost:** I am going to take us back a week — maybe a couple of weeks. The Mental Health Association of Yukon did a presentation here in which I spoke, and there is certainly a need in the Yukon. We have heard the stigma attached to mental illnesses is really prevalent. We heard today, and we have heard in the weeks leading up to this, that individuals who have mental challenges had more stresses associated with their employment. It's a big concern for this government. We are looking at the best practices and what we can do to provide supports in our communities.

The 10-year mental wellness strategy is helping to develop a shared vision for mental wellness in Yukon, ensuring that regular visits to the communities are occurring to support a collaborative care model within the communities, within the First Nations and within governments. We are really trying to look to provide services to rural Yukon for critical incidents and critical, stressful situations. This 10-year mental wellness strategy will really help to address that. Our enhanced mental health and addictions services will meet our government's platform commitment of a comprehensive after-care program in rural Yukon. I highlighted earlier 11 new positions identified to really push home the need for mental wellness and mental care in all of our communities.

**Ms. McLeod:** Still no answer on how those 11, plus \$1 million for home care and mental health care, are going to be rolled out and spent. Zero idea on how that is rolling out other than "Ottawa is talking about it." I am concerned about that because mental health issues, as the minister knows — it takes a long time to develop programs, but if we never start, well, I can tell you we are never going to get there. I know that there are 11 new positions. The minister has said that over and over again. I do not know which communities they are going into other than there are eight. To be clear, I only know that because I read it in the paper. Can the minister tell us which communities are getting the new positions? What are their job titles? Whose office are they going to be in? Where are they going to be placed? Are they with addictions or Alcohol and Drug Services? Are they with Many Rivers? Are they with the hospital? I don't know where these people are going, and if we don't know that, we can hardly start helping the public to embrace it.

In this budget, there is \$1.945 million allocated to Many Rivers Counselling and Support Services. This is the same amount as last year. Has there been a review as to whether services to rural Yukon are sufficient? How does this tie into the mental health strategy? Is there anything in the counselling agreement to ensure full staffing levels?

**Hon. Ms. Frost:** For the member opposite, I believe that in the announcement there were some notes in there identifying communities that are, perhaps, higher on the priority list in terms of need. You will see those positions attached to those communities. The bilateral agreement on mental wellness is tied into our arrangement with Canada. Special programs really focus on and emphasize children and youth. Children and youth are a priority — most definitely. It is tied to the 10-year mental wellness strategy and the vision for mental wellness in Yukon. This is something that the previous government initiated, so I am sure the member opposite is fully aware that mental wellness and mental wellness strategies are clearly this government's priority as well.

The expanded scope of services is most definitely essential and we are looking, as I said, on a bilateral special program specific to children and youth and we will ensure that they have the first priority if we are seeing challenges in the communities. We will work with the communities to identify the scope of care and the scope of needs.

We have a core budget for mental health as well as NGO funding for Many Rivers. The funding that we're seeing — really there are a lot of resources flowing out to NGO organizations that provide front-line, timely supports. As well, we provide supports to the services under the Sarah Steele programs — the Alcohol and Drug Services programs and the mental wellness component of Sarah Steele.

With the question on the Many Rivers contract, it stays the same as last year. Full staffing is expected in the agreement so that has not been impacted or affected. They are still receiving the same amount of funding.

**Ms. McLeod:** Thank you. I'm left with what communities. What communities are receiving these 11 new positions? I think I've asked it several times today — I don't know — and I would like the answer to that.

I'm going to assume then that Many Rivers did not ask for an increase in their budget amount. I did not hear really how this ties into a mental health strategy, given that I would have thought a review by government would have taken a more active role, I guess, rather than waiting to be asked for more money. I thought the government would be a little more proactive in reaching out to all Yukon communities to find out what their needs are and if they're being met, especially in light of this new funding amount coming from Ottawa.

I can appreciate the minister confirming that Many Rivers gets its full amount of funding regardless of whether or not full staffing is achieved. I'm just wondering who the watchdog is for that. Obviously the communities and the public don't know what the staffing level should be. They don't know what they are being funded for, so they're not really in a position to keep an eye on that — so some answers in that regard, especially in what communities are these 11 new FTEs going.

Yukon schools have identified a need to assist students with a wide variety of issues regarding mental health and wellness. Many have already benefited from the services of a student counsellor. This fits quite nicely, I think, into the minister's previous statement about how the new money is tied to youth and children. I realize that this is probably a cross-departmental issue, but how does the minister plan to provide the necessary services to all Yukon students, because I have received numerous requests from schools that they have their own dedicated student counsellor?

**Hon. Ms. Frost:** I guess I can say that I'm really excited and I'm really happy that this government has taken a proactive approach. We have identified 11 positions and, later in the summer, we will, once we do our consultation with our communities, identify where those positions will be, based on community needs.

I'm not, at this point, going to speak to the Department of Education because that is really not my responsibility. I will work with the Department of Education if there is a need and a desire, and a request from the department for us to look at expanded scope and care for the communities. We most certainly will look at ensuring that this happens.

What I said earlier — in terms of the strategies that we're working on — on a mental wellness strategy — we are

working with First Nations, which is an essential component to this, given that they are recognized as a third order of government in Canada and they have responsibilities. They have responsibilities to ensure services are provided to their citizens. As Government of Yukon, we ensure that we provide some interventions as necessary to ensure that they have equitable, fair and transparent services and needs.

The Department of Education is a huge component of our consultation and our engagement as well. Bringing about early intervention skills, promoting activities and mental wellness information in the classroom setting are really key. I think education, prevention, promotion, and just ensuring that timely services and access to the supports are there — and that will be done in collaboration with the department.

**Ms. McLeod:** I'm shocked. I'm shocked that, with a government that prides itself on evidence-based decision-making, they have allocated 11 FTEs, they don't know where they're going and they don't even know if they're needed. I'm surprised at that. I would have thought a little forward work on this file would have been in order so that communities would know where they stand in this government's priority list. I'm surprised.

Moving on — a mental wellness forum was planned for June 2016 to cover initiatives for the first two years' focus of the mental health strategy and look at the feedback from community-engagement sessions.

Can the minister confirm that the community-engagement was done? What was the result from the forum, and where can Yukoners access the information gathered from the community-engagement sessions?

**Hon. Ms. Frost:** I would say that we're not ad hoc or assigning positions to communities that are not justified, not decision-based, or not evidence-based. The decisions that will be made will be well-thought-out, will be methodical and will be considering consultations, community referrals, and population in size and services. We have a lot of information already on record.

Community-engagement has been done with respect to the question that was asked. We will continue to do the consultation. Yes, most definitely, the report will come out. It's this fall, so the member opposite will have the pleasure of reading the data, the report and the compilation of what was discussed and how decisions will evolve from that with respect to strategic planning, evidence-based decision-making and addressing the needs for the communities.

**Ms. McLeod:** I'm happy to hear that the results of the community-engagement sessions will be posted online, I presume — on the Health and Social Services website. That was the fall.

Will the minister advise what progress has been made in the development of culturally informed, evidence-based, basic mental health care to be offered in every community across the Yukon? That comes out of the mental health strategy.

**Hon. Ms. Frost:** Thank you for asking that really great question because — as the lead negotiator for Vuntut Gwitchin, as the lead spokesperson for First Nations on this whole initiative of self-government — one of the key

priorities in anything that we do as a government always and has to take into consideration local traditional knowledge and cultural practices as we evolve and as we evolve as a government. Most definitely, culturally based decisions are essential in anything that we do in this government.

Perhaps that hasn't been done in the past, but we aim to do that in the future. We want to ensure that any decisions we make are void of any — how do I put this respectfully? — barriers and are free of any barriers in that we want to ensure that all positions that we bring into the Yukon communities are culturally sensitive, that they have the necessary training and are sensitive to the needs of the communities in which they provide services and support, recognizing that 25 percent of the Yukon population is made up of Yukon First Nation people. We ensure that all of our staff have the training necessary.

As we go ahead and design programs and services, we also need to ensure that we have cultural sensitivity training, but also cultural initiatives and programs designed around aspects of contemporary models. As the member opposite may know, as First Nations design legislation and as government designs legislation, we look at contemporary practices of law and general application of common law decisions that have been made, and we look at implementing them in a respectful and comprehensive way that meets the needs of all Yukoners in a racially free context and reduces all the barriers.

We will do just that and provide as much support as we can to our staff and to the program design to ensure that they are culturally sensitive and culturally based.

**Ms. McLeod:** I thank the minister for that. Today, I have heard references a few times to self-governing First Nations and the fact that their needs, wants and desires are considered, and I appreciate that. What I would like the minister to confirm is that those First Nations who are not the beneficiaries of a self-governing agreement are also being consulted and taken into consideration. I can appreciate that it is sometimes a challenge.

How has the Yukon public been kept informed about progress made in the implementation of the mental wellness strategy? March 2017 should have seen a year-end progress report. Has this been done? Where are the results? Perhaps this is the same report that the minister referenced earlier and that is coming out this fall. However, I would have appreciated it in keeping with their timelines.

How was the public involved in establishing the proposed work plans for year 2 of the strategy? What year will see a review on whether or not the strategy is working?

**Hon. Ms. Frost:** I'm happy to say that there is no challenge working with the non-self-governing First Nations. We have met quite regularly and we are reaching out and working with the communities to identify and address their needs. In fact, I have been to Ross River three times now, and I am planning a trip to Watson Lake. We are also planning a trip to White River to have input and conversations with them about their needs.

No challenge — I think that everyone and every citizen of Yukon has a voice and a voice to offer and bring to the table — and bring their concerns in the communities as well. The mental wellness with regard to how engagement happens — there's a news note that goes out every month. That will compile itself into the annual report so we can ensure that the member opposite gets copies of those monthly reports, which we'll then compile into an annual report.

Now, the public has been involved and can be involved in various ways. We have working groups that really look at providing access and providing broader input. We have also a working group for children and youth, and, of course, building capacity, as the member opposite identified, is a priority.

Community conversations are essential. We want to make sure that, as much as we can, we reach out. Part of our internal discussion is to really look at using as much as we can — webinar initiatives and multi-media engagement, given that most of our communities are now linked in and linked in to social media. We are taking every possible approach to reach out beyond the traditional practices of producing newsletters and sending those out in the mail. That's not very effective. We're going to ensure that we reach out as broadly as we can to all sectors of our society and all demographic groups in our communities.

**Ms. McLeod:** In the strategy, when we are looking at service delivery, the main heading is: "increase access to specialized psychiatric supports." Under this heading, most targets are shown as short-term achievable. My question is: How are we doing with those achievable? How many psychiatrists are practising in the Yukon? Is that an improvement over pre-strategy days? Has the strategy assisted with the attraction of more psychiatrists? What are the wait-times to see a psychiatrist in the Yukon? How are rural Yukoners able to access this advanced level of care? Is it available in any Yukon community outside of Whitehorse? How often do psychiatrists travel to Yukon communities to provide services?

**Hon. Ms. Frost:** At this point, the psychiatric services don't form a formalized part of Health and Social Services. They are a specialist service that is provided. I am not able to provide you with that specific number at this moment, but I will get that information for you.

With regard to how we access rural Yukon, I highlighted in a previous response that we are looking at utilizing telehealth supports in rural Yukon, recognizing that the service is perhaps not as timely as it should be, but we are attaching one new psychiatric nurse to the budget. We are in conversations with the physicians about expanded care. What does that expanded care look like? It is not just providing medical support. We need to look at the holistic care of the individual. A collaborative care model incorporates psychiatric care. The position really supports a collaborative care model in the core programming area within the continuum of health care, health needs and medical needs.

**Chair:** Would members like to take a brief recess?

**All Hon. Members:** Agreed.

**Chair:** Committee of the Whole will recess for 15 minutes.

*Recess*

**Chair:** Committee of the Whole will now come to order.

The matter before Committee is general debate on Vote 15, Department of Health and Social Services, in Bill No. 201, entitled *First Appropriation Act, 2017-18*.

**Ms. McLeod:** Before the break, the minister mentioned telehealth to be relied upon for providing psychiatric services to rural Yukon. While I won't disagree that, in a pinch, telehealth probably works well enough, it really is a second-rate kind of process. Anybody who has spent an hour or two on a conference call can probably attest to that. It's not the best solution, but it is certainly an aid.

The minister mentioned that we had one new psychiatric nurse. Can the minister talk a little bit more about that? I would specifically like to know how often psychiatric nurses travel to rural Yukon and whether there is one for southern Yukon and one for northern Yukon — how is the split achieved? A common concern of individuals and families is the trouble they have with obtaining psychiatric care for themselves or for a family member. Does the minister have any ideas around the retention of full-time face-to-face Yukon-based psychiatrists?

**Hon. Ms. Frost:** We're not prepared to only rely on telehealth. I think it is one avenue of many that we will occupy. We will occupy and use any means possible in terms of triaging more immediate services and immediate needs. If that is a venue that we will use, then I think that is to our advantage in terms of collaborative care and timely support.

With regard to the increase of the psychiatric nurse to the collaborative care program, the objective there is really to provide and assist with wait-lists for initial triage and services at the clinic to speed up services. We know that there is an imminent need and we need to be there and be responsive, so that is what this position is identified for.

Getting back to the earlier question that the member opposite had asked with regard to psychiatric positions — what do we have in the Yukon? We have two resident psychiatrists. We have one non-resident psychiatrist and we have one visiting psychiatrist who provides supports to all Yukon communities.

**Ms. McLeod:** With those four psychiatrists who we have access to, do they operate outside of Whitehorse? I'm wondering if they ever travel to rural Yukon. In past years, I know that there have been psychiatrists who regularly travelled to various Yukon communities and I'm wondering if that is an area where this kind of care can be further encouraged?

Has the department explored the option of hiring and retaining more registered psychiatric nurses to work full-time with patients and maintain relationships with those who are rarely able to see a psychiatrist, but may require a level of care

that an RPN will be able to provide? Again, there is a need to see people in their home communities.

I had sent an e-mail to the minister regarding a constituent of mine who was deemed suicidal by herself and her physician and sent immediately to Whitehorse to the hospital for care that could not be provided in Watson Lake. She was sent back to Watson Lake the very next day on the Greyhound without receiving the care that she felt she needed. Indeed, she felt that she didn't receive any care. So I asked the minister what sort of help was available for this young mother in the Yukon and I never received a response. That was some months ago and it is quite concerning.

I want to ask the minister what sort of long-term care is available for a person suffering from a mental disorder to this degree, in or out of the Yukon, and just how does one access that care?

**Hon. Ms. Frost:** Just as a note, the four positions do provide services and supports to Watson Lake and Dawson City and, in cases where relevant, go out to other communities as well. In our pool of health professions, we have psychiatric nurses who provide supports, as well as the psychiatrists.

Now on May 10, the member opposite asked a very similar question of me in the House on types of services provided to Watson Lake. I can reiterate that we have services provided to Watson Lake with two full-time addiction program workers through Alcohol and Drug Services, two mental health support workers and three full-time social services workers, although one is on parental leave.

Home care provisions are also provided, so we have full-time nurses and three part-time home support workers. Watson Lake community hospital and Watson Lake centre have two doctors and seven full-time registered nurses and two full-time practical nurses and two full-time health nurses.

In terms of Many Rivers Counselling and Support Services, they are in the community as well and they have one counsellor residing in the community — or one counsellor who tends to the community.

We have other services that we provide to Watson Lake. Periodic, intermittent services include child services through the Child Development Centre, the children's dental program, physiotherapy, occupational therapy and other services as deemed necessary in the community. We have a direct toll-free number for Watson Lake for the services.

With the question that the member question posed — I think we are providing sufficient services to Watson Lake and to all rural Yukon communities. The Whitehorse hospital caseload — when required, we look at providing services outside of Yukon if necessary if we're not able to provide that service at the Whitehorse General Hospital, or perhaps in this case, in Watson Lake or Dawson City. So the referred care clinics provide for the services, whether it is through mental health or addiction services.

**Ms. McLeod:** I didn't really hear an answer on that long-term care portion and how people access it. Perhaps the minister can commit to getting that information back to me.

I'm going to move on a little bit. Regarding the conference of provincial, territorial and deputy ministers of

Health that is scheduled for today in Edmonton, as a matter of fact, did the Yukon send anyone and how large was our delegation? What were the topics on the agenda?

**Hon. Ms. Frost:** Yes, we did send representation to the provincial and territorial deputy ministers' meeting.

**Ms. McLeod:** Part of that question included: How many people did we send? What were they sent to talk about? What was the position that the Yukon was putting forward at this meeting?

**Hon. Ms. Frost:** Just for reference, the deputy ministers generally meet on a regular basis via teleconferences or in person to collaborate and look at some of the federal initiatives that are coming down the pipe — some policy direction. They don't actually make any decisions, nor do they provide any direct input without, first, consultation and engagement. Right now, we know that the federal government is rolling out its cannabis legislation. We know that there is a national crisis on fentanyl, as the member opposite highlighted earlier — opioid overdoses happening across the country and the pharmaceutical misuse of prescription drugs. Those are some of the general policy-type conversations that are had at the deputy ministers' level and the ADMs level that will inform these broader political decisions that we make in the Yukon.

**Ms. McLeod:** In that same line, then, the social services federal-provincial-territorial meeting that was held on May 16 in Halifax — did the Yukon send anyone to that? How many people did we send? The minister can tell me if it was the same format — just a get-together to discuss topical issues without decision-making. Can she confirm those?

**Hon. Ms. Frost:** We did send one senior policy advisor, and our deputy minister participated in that DM meeting via teleconference.

**Ms. McLeod:** I am going to move on a bit here to dental care. We know that poor oral health can affect a person's quality of life. Oral pain, missing teeth or oral infections can influence the way a person speaks, eats and socializes. These oral health problems can reduce a person's quality of life by affecting their physical, mental and social well-being.

Dental care for rural Yukoners is a constant concern. Is the minister prepared to subsidize dentists setting up shop in rural communities, subsidize costs involved with dentists travelling to communities on a regular basis, or, at the very least, provide a medical travel allowance for those seeking dental care in Whitehorse?

**Hon. Ms. Frost:** Dental care, aside from the youth program that is in the schools, is not an insured service. Recognizing the member opposite's concern about oral hygiene care in the communities is a problem. Health and Social Services is looking at moving toward providing some support to private dentists to reduce costs associated with travel to rural communities, providing a location for dental providers to practice — with the aim to improve access to care in rural communities. The intermittent services available in Dawson City and rural Yukon — to cover all costs related to expenses for two dental trips a year. The local health centre

and the school dental program are still available. I just wanted to highlight that because it's a non-insured service. We need to be more creative in terms of what we can do to provide services and work with the dentists and private dentists to reduce some of the associated pressures.

**Ms. McLeod:** I'm happy to hear that the department is looking at providing some assistance in that regard. I believe the majority of Yukoners would prefer to receive treatment in their own communities and this might be the most-effective way to do it.

It was reported in the news that Dawson City was preparing a petition to government regarding the lack of dental services in their community. Can the minister tell us what the result of that petition was? Will the minister tell us about the services provided to schoolchildren throughout the Yukon? I think the minister just referenced that twice-a-year visit, which probably had to do with schoolchildren, but if she could just confirm that.

Are the children provided with a complete dental service? That is: Are there dental problems being treated in the schools, or is it a diagnostic program that then leaves it to parents or guardians to seek treatment?

**Hon. Ms. Frost:** The dental therapy program is in a bit of turmoil right now, given the school of dentistry is no longer open. The original school in Fort Smith closed and the one that moved to Prince Albert, Saskatchewan, also closed, so we don't have dental therapists in the communities any longer. We have very few, so we are utilizing those services that we have on a limited basis.

With respect to alternatives and what we are doing to ensure that we provide the necessary support, we will work with Minister McPhee on the school programming. We are working with communities as well. Health and Social Services is trying to expand the scope of services in the communities. There's definitely nothing we can do with the challenge of the school shutting down and the lack of dental therapists.

Now, the Department of Health and Social Services is currently resuming and reviewing the intermittent services provided to Dawson City. Yes, we did receive a petition from the community of Dawson City following the death of the resident dentist. They provided an online petition to identify that there is a need, and they were advocating for comprehensive dental care in Dawson City. What does this involve?

It involves a collaborative care model that involves community engagement, given that it's a non-insured benefit, a non-insured program. We have to look at working with the private dentists there and look at what we can do to occupy that space. I am pleased to say that we are looking at trying to secure the space. The equipment that was available in the community was privately owned as well, so there are some factors that we have to consider within Dawson City. Beyond Dawson City, we have not really had any other private dentists in the other communities, but we are looking at ensuring that we provide appropriate care and dental care programs for children — that we don't lose sight that there is,



of course, clearly a prevention component that has to be considered. Preventive care is essential.

**Ms. McLeod:** I can certainly agree with the minister that preventive care is the first step. I acknowledge that the dental therapist education piece affects all of Canada. I guess I'm a little bit unclear as to what services are being provided to Dawson City. It sounded like a dentist was being contracted to go to Dawson — you can clear that up for me, if you would like.

I did see, on the contract registry, a contract for dental services. Perhaps the minister could just tell us a little bit about what that was. I have just a request for the minister: all Yukon communities are deserving of this care, so when programs are instituted in one community, every community should benefit at the same time. By all means, kudos to Dawson City for getting that petition together, and I'm happy that the government has listened.

I am going to move on a bit to talk about the Hospital Corporation for just a minute. The Member for Lake Laberge mentioned a lack of funding for the Yukon Hospital Corporation in terms of O&M and specific projects. One, in particular, was the electronic health information system at the hospital called Meditech, which is in need of replacement, and it was not addressed by the minister when she was asked about it. This is a critical part of the hospital's infrastructure, and we're hoping that the minister can tell us if she recognizes that the replacement of this system is important to this government.

**Hon. Ms. Frost:** With regard to the Meditech project, the lead department is clearly Health and Social Services, given that the Yukon Hospital Corporation — the funding flows out to the Hospital Corporation and they identify their priority needs to the department.

Several years ago, the Hospital Corporation submitted a request for approximately \$4 million to upgrade its Meditech system from version 5.6 to 6.1. The electronic system used by the hospital linked with specialists in hospitals outside of the territory. This upgraded system would improve functionality of the hospital information system. However, the Yukon Hospital Corporation is still able to operate under the 5.6 version, so the 5.6 version is still commonly used and is in place among many hospitals across the country. The request for enhancement of \$4 million to upgrade is not detrimental to the system as we speak. They are still functioning quite well with the commonly used system that is used elsewhere in the country.

At the time of the request, Health and Social Services was beginning to work on the implementation of the three Canada Health Infoway e-projects: client registry, lab information systems and drug information systems, which included a \$6-million recovery as well as the tight completion of March 31, 2017. It was not possible for the two projects to occur at the same time, as they may require many of the same resources. The previous government was involved in that process and the decision was made to proceed with one and not the other.

Clearly, when the time comes and, given the timelines and resources, Health and Social Services will look at addressing that. As well, the fact that Health and Social Services just approved \$71 million to the Emergency department and the MRI at the Whitehorse General Hospital — it was determined that it would be best to defer the project to a later date. Replacement of the Meditech system has been part of the hospital's capital plan for many years. I recognize that and appreciate that at some point in the future we will have to replace that, but at this point, given the budget and given the pressures from the hospital and the new build, it is not feasible and currently the funding request for updating the system is not in this year's budget.

**Ms. McLeod:** I thank the minister for that and I'm going to assume then that the Yukon Medical Association and the Hospital Corporation are satisfied with having to delay that implementation of the upgraded program.

Of course we know that this Liberal government has underbudgeted for the Hospital Corporation this year and in fact the hospital will receive a one-percent increase in funding over last year. It's very short of what they had asked for.

The minister said that the Hospital Corporation was excited to have an opportunity to reduce costs and provide justification for the millions in funding that they will be short in this fiscal year.

What is the minister's plan if the Hospital Corporation cannot provide the same level of service and incorporate the increased pressures due to rising drug costs, increased patient volumes for services, such as medical imaging, and the cost of the expanded ER?

**Hon. Ms. Frost:** The Yukon Hospital Corporation has a one-year funding agreement ending March 31, 2018. The agreement provided for a \$600,000-increase to reflect increasing costs of operations. Increased occupancy, costs and volume pressures have been addressed in various ways over the years. Operational funding for the Watson Lake and Dawson City community hospitals has had adequate and stable funding over the years that they have been operational.

Now the services beyond that — chemotherapy, drugs, costs and volume pressures have been increasing over the last few years as well as a result in advancements in treatment, so there are increases in medical costs and larger, harsher treatment programs resulting in better survivorship. We're looking at the average costs of \$1,777, an increase of \$515 over the last five years.

Annual patient volume in 2016 was 880 — an increase of 302 over the last five years. We have further data, but clearly the measures that we've taken do help to alleviate some of the pressures. We have additional funding assigned to provide assistance to the hospital. We are really looking at a collaborative care model and looking at what we can do to eliminate some of the current medical pressures.

There is \$1.5 million from a total of \$3.1 million for an increase in O&M for the new Emergency department and the MRI expansion project, which includes the operating costs as well. Part of what we have not reflected historically was the

new build and the costs associated with O&M expenditures tagged to those new resources that are the new facilities.

**Ms. McLeod:** Health and Social Services is a very large department and we certainly could be here for a number of days, but I might have to move on a bit.

While I would like the minister to give us a definition of a solid collaborative care model in relation to the Watson Lake and Dawson City hospitals — I would like to know what that is, but perhaps the minister can confirm that by letter.

I would like to move on to childcare. Of course the minister might not know this but I'm a great supporter of licensed childcare. It enables parents to work or go to school and it can provide some much needed respite care.

The minister has stated that the focus on childcare spaces in Yukon will centre around the creation of new spaces. Where does the minister expect these increases will be and how did the minister arrive at that decision?

**Hon. Ms. Frost:** With regard to the point that was made on the hospital funding and the written response, as part of the health care system, the Hospital Corporation has one year in which to come forward with a sustainable health care system for Yukoners. We are working with the hospital board, and I assure the member opposite that, if there is a pressure and a need, then clearly those are things that we would take into consideration in the fall when we look at the budget.

With regard to childcare, I did a bit of a media request this morning, and that request was talking about childcare, childcare programs and services in the communities, and licensed facilities. As of March 31, there were 1,439 licensed spaces available in childcare centres and family day homes in Yukon. Seventy-seven percent of these spaces were occupied as of that date. I also want to note that, of course, it is very important. The quality of childcare and early child development is a priority of this government as well. Over the last two fiscal years, the department provided \$8,735,011 in direct operating grants and \$3,297,149 in childcare subsidies to childcare centres and family day homes. That highlights that the enrolment component for the direct operating grant talks about the types of programs provided. We want to look at the component that we are challenged with. That is the capacity development in childcare centres and ensuring that we are responsive to some of the challenges that we have heard and seen — that perhaps there is an insufficient level of childcare supports in the Yukon. To this end, we are in consultation with Canada to secure funding for the national early learning and childhood framework agreement. I believe I highlighted that earlier whereby Canada committed \$500 million in 2017-18 to provinces and territories and will support existing and future early learning and early childcare initiatives in the Yukon. What are we doing? We provided a lot of support and a lot of resources, and we will continue to do that to ensure that we provide the best possible quality childcare services for Yukon children and families.

**Ms. McLeod:** Of course I appreciate all the efforts that governments have made over the years to support childcare. I come from a time when there were zero supports for

childcare, so I appreciate that government is recognizing the value.

While I can appreciate the \$500 million from the federal investment in childcare across the country, that really doesn't suggest that Yukon will ultimately benefit. What I would like to know, and what daycares would like to know, is whether or not there is an increase to the direct operating grant in this budget. I know this has already been brought up by the Third Party. It is a concern for childcare centres everywhere.

Is the direct grant that is based on the level of daycare provider qualifications going to remain in place? Is an increase contained in this budget for that aspect?

**Hon. Ms. Frost:** There is no increase, but it is part of the early learning and childhood strategy so it will form a part of that discussion.

With regard to the Department of Health and Social Services childcare models in the communities, we are looking at piloting a rural childcare model in Dawson City, Ross River and Watson Lake. That will provide some stability, sustainability and accountability in childcare funding, as well as providing and promoting quality in staffing and programming for children in these three respective communities.

**Ms. McLeod:** One of my questions would have been regarding this new way of providing childcare in rural Yukon that the minister made reference to on May 25. I don't know what that means to rural Yukon or to these three communities. Oddly enough, when I was speaking to daycare providers just a couple of days ago, Watson Lake did not indicate anything about this, so I'm wondering if any consultation has taken place. I would like to know what the word is. What have they been told about this?

I want to get back to the direct grant based on the level of qualifications for childcare workers. I know this part of the grant to daycares is structured to ensure that it's spent on wages in recognition of their different levels of training. I wonder if the minister is aware that this fundamentally puts rural daycares at a disadvantage, because rural daycares can't attract level 3 childcare workers. That's just a fact. It's very difficult.

So they kind of benefit from this funding for the training but, at the same time, they still have to pay wages commensurate with any other place, or they wouldn't have anyone at all. Does the minister have any plan to re-look at this situation in order to level the playing field for rural daycares?

**Hon. Ms. Frost:** I will respond by saying that this government clearly looks at recruitment and retention strategies for all our program areas, ensuring that rural Yukon has the supports and services it needs by way of qualified, competent staff in all sectors.

The point around the direct operating grant is that it is a funding program provided to licensed childcare facilities in the Yukon to assist with their operating costs. All licensed childcare programs are eligible for the grant. With respect to rural Yukon, there are some times and some places where some of the communities don't have that service available.

We are working with the communities. Clearly, once this budget is passed and we have the authorization, we will go out and speak to the communities.

Right now, what we're understanding from the communities is that they see a need. If the Member for Watson Lake can help us to identify — perhaps there's no need for childcare support or additional support in Watson Lake, then we need to know that and we can divert. Right now, I understand that these are the three communities, based on feedback and based on what we have received from our support staff in the communities. These are the three communities that we focused on.

The enrolment component — just for reference — provides a monthly payment of \$180 per infant and \$135 per toddler, and the salaries for a level 3, highly qualified individual in the communities is \$40 an hour. In my estimation, that seems to be a pretty fair and equitable wage. Level 1 is \$31 an hour. The salary range is based on competencies and based on skillsets.

The amount of subsidy is provided on an income-tested basis, so if we have a family and their income determines that we need more support, then we have a calculation that we can share with the member opposite in terms of what is provided for the families.

**Ms. McLeod:** To be clear, I am not talking at all about the childcare subsidy that is provided to parents. That is an entirely separate matter. The DO grant is a separate matter. The top-up I'm referring to — which may indeed form part of the DO grant — however one wants to phrase it — has to do with the level of contribution that government makes to encourage the hiring of level 3 childcare workers. My concern remains that you can't attract these people to rural Yukon and they don't benefit from having to pay their staff that same rate in any case, although I have never heard of a childcare worker making \$40 an hour — ever. Maybe it's out there — I don't know. I would be really curious where that childcare worker is.

As far as the pilot project that the minister referenced in those three communities, I hope she is not taking my comments to mean that Watson Lake is not deserving or does not want to participate. I never said that. What I did say was that the childcare people I spoke to did not mention it. That leads me to believe that they are not familiar with the plan. I don't know. I only know what I hear.

I hope the minister carries on with that. I would like the minister obviously to look at these funding levels far in advance of the federal government ever deciding how they are going to spend \$500 million across the country. We know that this is going to be so far down the road that the people using childcare now probably won't need it — but kudos to the investment.

I'm going to move on. I am just going to boil this down a little bit. I want to talk about continuing care. Of course we know that the Liberal government in the past has been quite critical of the construction of the Whistle Bend extended care facility. It sounds like the size of this building is going to be held to 150 residents.

Will the minister confirm this? Considering that the facility was designed to add more beds, is this something this government would consider, should the need arise? We know that the wait-list for this type of care is quite high, and so I would like the minister to tell us where that is at today. How many people are sitting on a wait-list?

Further to that, what are the plans going forward? What is this government planning in order to accommodate the future needs of Yukoners? As I understand it, the new Whistle Bend facility may be close to being full and it hasn't even opened its doors yet.

I know that the Vimy housing project has been supported by past government and, when questioned about this government's support, the minister said that this government has other priorities. Will the minister confirm that the project has this government's support and what that means to the Vimy Heritage Housing Society? How much money is this government prepared to invest in this type of health care, which obviously has the ability to lessen the stress placed on government supports?

Finally, on this topic, during the election in 2016, the Premier committed to providing extended care in every Yukon community. What are the plans to date? What is the minister currently looking into for providing this care in Haines Junction and maybe Watson Lake soon?

**Hon. Ms. Frost:** Just back to the earlier question and comment — the department made three significant improvements to childcare subsidies in 2015. The government of the day increased the income threshold by five percent to make families eligible for subsidy, so there have been significant increases and maximum amounts received by families. That was just done 18 months ago. Most definitely, if there are alternative needs we will certainly take that under advisement and consideration.

With regard to wait-lists and the Whistle Bend care facility, we have currently 80 to 90 on the wait-list. Once the Whistle Bend facility opens up in 2018, that list will no longer be there so we will then eliminate the pressure.

With the added 10 beds at the Thomson Centre, the 10 beds at Birch Lodge and four additional beds at McDonald Lodge, we currently have addressed the pressures. As one colleague indicated not all aging in place leads to Whistle Bend; we have to look at a community-based model, a rural Yukon model, and an aging-in-place model for members of rural Yukon so that they can age well in their own homes and in their own communities.

Looking beyond that, the government remains committed to offering compassionate care for our elderly and for those who are in specialized need in our communities. Whistle Bend is one key component of that collaborative solution. For the full spectrum of specialized care for people who are no longer able to live in their homes, this will be resolved in accessing one of these facilities that I have just mentioned.

I'm really, I think, looking beyond Whitehorse. My mandate is to look at rural Yukon and looking at opportunities for members of our rural communities who perhaps don't have access or who perhaps choose not to come to Whistle

Bend or to one of the care facilities in Whitehorse if they have a choice.

We need to present opportunities for them to have that choice. With regards to Vimy, we are continuing to collaborate with Vimy and at this point in this budget we have not committed any resources to Vimy. Why? I will reiterate what I said before — we have significant concerns around homelessness and poverty, so we are attempting to put our resources into the pressure areas that we are confronted with in this mandate — in my mandate — which is to eliminate the pressures. We have an excess of 60 to 100 clients living in hotel rooms. In some cases, we have mothers with children living in hotels.

When you're trying to balance a budget and provide the services and collaborative care services, but you're trying to look at aging in place as well, and if you spent significant resources on the Whistle Bend facility and other models, we still have a huge pressure around eliminating poverty, eliminating homelessness, and trying to house those who are hard to house. Housing First models are really essential. The costs associated with hotel rooms are in excess of \$700,000 every year. If you put that out 10 years, that's \$7 million — we can then eliminate homelessness in our communities. These are some of the broader models that we're looking at.

Clearly, as I indicated earlier in my presentation, we have to look at a multi-government approach — multi-lateral approach — and that means community engagement and working groups having input on finding the solutions. Clearly, the demographic group that Vimy is hoping to capture in terms of its proposal — is that a high priority right now? I guess I am asking myself. I ask that question every day. How do I balance and provide shelter in a stable environment for a mother and child and then to put resources into establishing a facility that perhaps could be self-supporting? We do clearly need to work with the Vimy Heritage Housing Society in finding them and supporting them in their search for some stability as well. That is clearly essential and we are going to commit to doing that. We have established that we are going to have that dialogue with them.

**Ms. McLeod:** I am wondering if the department is closing Macaulay Lodge — we know that it is coming close to the end of its life — and whether or not those residents have been factored into the numbers that the minister quoted for the Whistle Bend facility. I think what I heard was a backing away from a commitment to provide extended care in Yukon communities and, instead, move to kind of a supported-care model, I guess is maybe where that was going. But they are really still relying on moving extended care patients into Whitehorse and into all of those facilities that the minister mentioned. I don't believe that there has been any consultation on this in communities. Perhaps the minister can comment on that.

**Hon. Ms. Frost:** I am not sure if there has been — historically — consultation with the communities. I know that the Member for Kluane has raised the elders facility in his community on a number of occasions. It would be really good to get that type of feedback. If there has been historical

consultation or engagement or information that would help us, that is really great. I am quite pleased to say that I did sit and have tea with the elders — I know a lot of them. I know from my time in Dawson City and my time in other communities that a number of members of my community members and my constituents are at Macaulay Lodge. I really enjoyed sitting with them and hearing about their concerns and validating where they are as older adults. What are their needs? What do they look for and what did they request? In taking that into consideration, it looks at the holistic approach to aging well. What does the facility look like at Whistle Bend? I know for a fact that as the Whistle Bend facility was being designed and implemented, we have not taken into consideration the O&M expenditures for that, so the types of programing and services — what would they like to see there? They provided that type of input on what they wanted to see in the facility.

Most definitely, they have been consulted and have been taken into consideration. I'm not sure how many of them there are, but there are something like 48 older adults — 47 at Macaulay Lodge — and some of them might elect to not go to Whistle Bend. Maybe they want to move elsewhere. In fact, one of the residents I met with there is now at Birch Lodge and is quite happy — an older adult who wanted to have more mobility, more access to downtown and more access to the services, and is really quite happy.

I think it is up to the individual. Once Macaulay Lodge is closed, all the residents will be moved into one of the other care facilities. It is really essential and important to note that we are going to put them in a place and put them in some of these facilities, or perhaps a facility of their choosing, and that will be done by individual assessments with the families. Remodeling perhaps where we put our — we're not going to have our clients who require high-end care here and some at the other facility. It has to be well-thought-out, because we now have two really quite large facilities, but we want to make sure we align the staff so they are in place and provide the best care for the individual — and specialized care in these facilities that are available.

**Ms. McLeod:** So yes, the government is going to close Macaulay. I'm happy we have an answer on that, but what we didn't get an answer on is how many of those residents are counted into the numbers for the Whistle Bend facility. I understand that maybe they won't all desire to go there, but I'm thinking that, given that we appear to have been under a crunch for space for these citizens, perhaps there are not a lot of options out there.

Just that question of whether or not that is factored into the number — I can't remember what it was — of 90 people already on the list for Whistle Bend. Are those 40 — whatever the number — from Macaulay factored into that, or are they on top of the 90? If they are on top of the 90, then I trust the government is already exploring options on how it's going to move forward.

I really did have to get into this one to start with, and it's about medical travel. I think we had a bit of a discussion earlier on how much money is being spent on medical travel. I think it was \$12.7 million on medical travel, but we do not

know how much is inside or outside of the Yukon and the minister was going to answer with that.

What I would like to know is how that \$12.7 million compares to last year. I don't have that number. It's really the only fair indicator of whether or not we're funding it appropriately.

My other question is: Where does that money come from? Does it come from the Canada health transfer? Does it come from THIF? Does it come from — I don't know; maybe there is a special fund for it. I'm curious to know where that money comes from.

My other question is about the subsidy that Yukoners receive while they are on travel status. I know that Yukoners all over the Yukon appreciate that small amount of money that they get to assist them with their travel, but it really doesn't do a darn thing, does it? It doesn't, for instance, get you a hotel room.

Is the minister prepared to look into raising the amount Yukoners receive to help with food and lodging so that maybe they could afford a hotel room for a night?

The minister must realize that we have sort of a two-tiered health system here in the Yukon and that people outside of Whitehorse have to pay money out-of-pocket to receive the same level of care that Whitehorse residents receive as a matter of course. Of course, this is in addition to having to leave their homes for two or three days to attend an appointment. Again, is the minister prepared to revisit the dollars provided to rural Yukoners?

I spoke earlier about travel for dental reasons. Now I would like to ask about care for, for instance, psychiatric reasons. I'm unable to determine from the budget documents whether travel for reasons of seeking any type of mental health care is covered when it's advised by a medical doctor. If so, what have the costs been for the last fiscal year and how much is allocated for this year?

In the same vein, is travel for physiotherapy covered and what are those figures?

If these things aren't covered, I really would like to know what attempts have been made to provide these services in Yukon communities — again, it all kind of points to a two-tiered system.

**Some Hon. Member:** (Inaudible)

**Ms. McLeod:** I'm just a rural Yukoner.

How often are hearing clinics held in rural Yukon? Is this something that is covered by medical travel?

**Hon. Ms. Frost:** I just wanted to make note that there was a pretty loaded response. There are a lot of questions in that — medevacs, expenses, funding. Let me just start by saying that there is no tiered system in the Yukon — rural Yukon versus Whitehorse versus First Nations versus non-insured versus social income support — I think we really want to look at providing the services to every Yukon citizen as possible and as needed.

The costs associated with medevacs are different from personal travel, so if you're travelling to Vancouver or elsewhere or coming in from the communities, for that matter,

and you travel on a commercial airline, that would be different from if you were medevaced.

The budget envelope is not broken down into individual areas. With regard to psychiatric care, that is covered, as I indicated earlier. Looking at various options in terms of services and monitoring the expenses as they come out, we are clearly assessing medical travel and assessing expenses incurred on medical travel. We are seeing now that medical expenses incurred with our citizens of Yukon travelling south — we don't see the expenses and we don't see that invoice until after the year has completed, which affects this current year's funding — this current year's envelope.

How do we assess that? Has there been historical data collected to define appropriate and adequate care so that we can start eliminating some of the medical travel and look at redesigning strategies to preventive care models in the communities, preventive care models through health and through medical services? Clearly that is as big as that. We need to look at doing proper assessments and proper analysis.

\$600,000 from THIF is part of the contribution, but all of the money comes from various sources within Health and Social Services. It is not one specific envelope of funding. We try to balance it — \$12.7 million is a lot of money and that continues to escalate. I think we're fortunate in that we're not in excess, like Nunavut or Northwest Territories, where they are seeing higher costs.

I just wanted to note that we don't really have a tiered system. I don't know what that was about, but medical travel benefits in Yukon is one of the most generous — in the Yukon. What I do know is that, if you travel from perhaps the outskirts of Whitehorse, you drive into Whitehorse, you get travel support and travel subsidy. Is that appropriate? That is part of the escalation in the costs — and looking at ways to reduce travel costs.

What can we do to reduce travel costs that are not necessary? I'm clearly, I think, trying to take a broader approach to address all of the pressures and all of the concerns, but looking at the evidence and the data to make those decisions as well, and monitoring where we are within advanced programming and advanced services. If we look at our physician negotiations right now in the Yukon, if we can expand out into a collaborative model into the communities and we can then provide the services into the communities that have not historically been provided, that might reduce some of the costs.

We're hearing from the physicians in some of the communities, for example, that they need physio. We have a physiotherapist who comes into one the communities on an irregular basis, so if there is pressure, what do they do? They send them off to Whitehorse and they get the care in Whitehorse, but if we can expand and pay for that support, that would eliminate medical travel and medical costs. So we're always looking at solutions and looking for cost reductions as best we can with the information that we have available.

The staff in the department is really doing that good work in trying to compile the data — compile the analysis in a

really broad view of all the budgets. Granted, it's a huge budget and there are responsibilities — but we also have to be responsive to spending taxpayers' funding and taxpayers' money in a timely, efficient, and effective kind of way. Right now, I don't see that — we're spending an escalated amount, but it's really about cost reductions and service delivery in our communities and keeping our communities well in place.

**Ms. McLeod:** According to the budget documents, there were 760 detox admissions for 2015-16 — and I'm going to presume that's a Whitehorse number. The 2016-17 forecast was for a lesser number — 697. The forecast for 2017-18 is the same at 697. I'm asking the minister to explain these numbers, given that we ought to have an expanded capacity for detox and treatment with the new facilities.

There's a substantial increase to the budget over last year, and it looks like in excess of \$3 million. Can the minister explain this increase while we're maintaining lower numbers of detox patients?

**Hon. Ms. Frost:** I'm going to refer to the question about the detox admissions. I think the biggest thing that we're doing right now is an expanded scope of care in detox, so it's not just focussed on alcohol addictions right now.

It has expanded beyond that to look at all measures of addictions. The new facility has increased the duration of stays. If clients come into the facility, they can stay for an extended period of time which, inevitably, will lead to fewer admissions — fewer recurring events, which we have historically seen. That is what we are trying to do — reduce that cost and reduce the number of times we see the clients. The wait-list at Alcohol and Drug Services has reduced from 10 months to a matter of weeks for some treatment and counselling options. This is a result of the opening of the new Sarah Steele Building. Much of the increase in dollars is for the expanded care of the Sarah Steele Building, and that is what we are seeing in this budget. I guess part of that is the complexity of the programs in that area as well. It is scoped out broader than just alcohol services. Hopefully that responds to the question.

**Ms. McLeod:** I guess I have to use my imagination a little bit there because the minister agrees that we are treating fewer people. I am not sure if she was suggesting that is because the numbers are a little bit misleading, that we are treating people with higher success rates so we are not seeing them as often, and that is why the numbers are down. Perhaps it is a combination of all of that. I am not sure why or if that covers off the explanation. If that's the way that's playing out at the end of the day, I'm happy if more people are being treated and treated successfully.

On May 8, the minister said there was an increase of \$2.157 million in expenses for health services and supports. It included additional physician supports of the chief medical officer of health. How much is attributed to this assistance to the chief medical officer and what exactly is that for?

**Hon. Ms. Frost:** The position is a salary position. I don't really have the scope right now for that position but I will most certainly be able to provide that for the member opposite. Definitely, I wanted to just highlight and further

comment that the mental health services in the community strategy and the mental wellness strategy really relates back to the alcohol and drug addictions program at the Sarah Steele Building. Critical incidents, stress management and reduction, wellness approaches, and a people-centred approach are all things that are relevant and essential in providing the best care possible. I just wanted to highlight that. Thank you.

**Ms. McLeod:** We had a discussion earlier regarding — not earlier today, but earlier this week — about type 1 diabetes in children. There are a small number of children who are suffering from type 1 diabetes and they want to ease the stress and burden of the disease placed on their families through the use of constant glucose monitoring, or CGM.

This is something parents will find very helpful and a very effective way of monitoring the health of their children on an ongoing basis when children can't always let people know that something is not right. It is reported that this is somewhat expensive, and the minister has been asked if she would consider some funding operations. It hasn't been welcomed by this minister. Will the minister provide some kind of assistance to these families?

The minister has also been advised of parents who would like to meet with her to discuss these options and issues, and the minister has not agreed to do so. I am urging the minister to reach out to these families and have a dialogue with them to hear first-hand their concerns about their children with this very serious illness.

**Hon. Ms. Frost:** I can assure the member opposite that I'm always open to hearing and listening to the families and meeting with the families. I have committed to doing that and my staff are setting up that meeting. I think that information is completely inaccurate. I am meeting with the families and am committing to doing that and will hear the families out.

We are currently looking at monitoring the data to see if constant glucose-monitoring produces improved health outcomes for patients. Is it a cost-effective method of treatment for Yukoners with diabetes? Without evidence provided by conclusive studies, all public drug plans in Canada and the large majority of private insurers have decided not to include the constant glucose-monitoring sensors on their list of benefits. We will continue to monitor the status of the CGM sensors as a benefit through public drug plans in Canada, in line with other jurisdictions, as soon as the evidence warrants itself.

We will look at that and I do commit to meet with the families.

**Ms. McLeod:** In January this year, there was a tender let out for a request for proposal, called "Applied Behaviour Analysis Consultation Services for Children and Youth with Autism Spectrum Disorder" and the closing date was February 17, 2017. Why was this contract closed with no award and what was the purpose or intention of the work?

**Hon. Ms. Frost:** The services for autism and providing supports is a model that comes out of another jurisdiction. We are looking at expanding that and looking at what we can do in Yukon to ensure that we have family supports. It comes out

of our Family Support unit and it's a specialized care program.

I have an autistic grandchild, so I know what is required and what is needed, and I know the challenges. It is certainly something that all of us want to see for our children. All children with disabilities in the Yukon are provided with the necessary services.

Seeing the time, I move that you report progress.

**Chair:** It has been moved by Ms. Frost that the Chair report progress.

*Motion agreed to*

**Hon. Ms. McPhee:** I move that the Speaker do now resume the Chair.

**Chair:** It has been moved by Ms. McPhee that the Speaker do now resume the Chair.

*Motion agreed to*

*Speaker resumes the Chair*

**Speaker:** I will now call the House to order.

May the House have a report from the Chair of Committee of the Whole?

#### **Chair's report**

**Mr. Hutton:** Mr. Speaker, Committee of the Whole has considered Bill No. 201, entitled *First Appropriation Act, 2017-18*, and directed me to report progress.

**Speaker:** You have heard the report from the Chair of Committee of the Whole. Are you agreed?

**Some Hon. Members:** Agreed.

**Speaker:** I declare the report carried.

**Hon. Ms. McPhee:** Mr. Speaker, I move that the House do now adjourn.

**Speaker:** It has been moved by the Government House Leader that the House do now adjourn.

*Motion agreed to*

**Speaker:** This House now stands adjourned until 1:00 p.m. tomorrow.

*The House adjourned at 5:28 p.m.*

#### **The following document was filed May 31, 2017:**

34-2-8

Destruction Bay Marina, correspondence re (dated between January 17, 2017 to March 23, 2017) among Wade Istchenko, Member for Kluane, Hon. Richard Mostyn, Minister of Highways and Public Works, Hon. John Streicker, Minister of Community Services, Cpl. Ryan Hack, Haines Junction RCMP Detachment, Jane Woolverton, Kluane Lake Athletic Association President, Fritz Mayr-Melnhof, and Ross Elliott, Ruby Range Outfitters (Istchenko)