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HANSARD

Tuesday, March 22, 2022 — 1:00 p.m.

Speaker: The Honourable Jeremy Harper

YUKON LEGISLATIVE ASSEMBLY

2022 Spring Sitting

SPEAKER — Hon. Jeremy Harper, MLA, Mayo-Tatchun
DEPUTY SPEAKER and CHAIR OF COMMITTEE OF THE WHOLE — Annie Blake, MLA, Vuntut Gwitchin
DEPUTY CHAIR OF COMMITTEE OF THE WHOLE — Emily Tredger, MLA, Whitehorse Centre

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

OFFICIAL OPPOSITION

Yukon Party

| | | | |
|-----------------------|---|-----------------------------|--|
| Currie Dixon | Leader of the Official Opposition Copperbelt North | Scott Kent | Official Opposition House Leader Copperbelt South |
| Brad Cathers | Lake Laberge | Patti McLeod | Watson Lake |
| Yvonne Clarke | Porter Creek Centre | Geraldine Van Bibber | Porter Creek North |
| Wade Istchenko | Kluane | Stacey Hassard | Pelly-Nisutlin |

THIRD PARTY

New Democratic Party

| | |
|----------------------|--|
| Kate White | Leader of the Third Party Takhini-Kopper King |
| Emily Tredger | Third Party House Leader Whitehorse Centre |
| Annie Blake | Vuntut Gwitchin |

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Yukon Legislative Assembly
Whitehorse, Yukon
Tuesday, March 22, 2022 — 1:00 p.m.

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

Prayers

DAILY ROUTINE

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

Introduction of visitors.

INTRODUCTION OF VISITORS

Speaker: Members, please join me in welcoming the grade 10 ACES class from the Wood Street School and their teacher, Colin Abbott.

Applause

Hon. Mr. Clarke: In attendance here for World Water Day and Canada Water Week, we have, from the Department of Environment — please welcome to the House Brendan Mulligan, senior scientist, groundwater; Cole Fischer, groundwater technologist; Ella Parker, program advisor; Nicole Novodvorsky, operations manager; Heather Jirousek, director of Water Services branch; and Christine Cleghorn, who is the ADM of Environmental Sustainability.

Applause

Hon. Ms. McLean: I would like to acknowledge each of the students who are here today with the Wood Street School. Thank you very much for coming today. I also acknowledge Colin Abbott, a teacher at the school, and I would like to welcome Anneke Aasman, Jesse Amos, Jebz Argao, Calvin Cibart, Beatrix Duncan, Teagan Ewing, Hope Goury, Zyanya Hoffmann, Alex Kiriak, Doon McDowell, Rowan Nehring, Chase O'Brien, Ryan O'Farrell, Benjamin Perrault, Kaidence Reynolds-Fraser, Luke Roberts, and William Van den Hoorn. Welcome.

Applause

Speaker: Are there any tributes?

TRIBUTES

In recognition of World Water Day and Canada Water Week

Hon. Mr. Clarke: I rise to pay tribute to World Water Day and Canada Water Week. Canada Water Week is a national celebration that is held annually in March to coincide with World Water Day globally on March 22. As part of promoting Canada Water Week in the Yukon, Yukon schools will receive presentations that encourage youth to think about how water affects our daily lives and to consider potential water-related careers.

Each year, World Water Day raises awareness of the approximately two billion people living without access to safe

water. In the Yukon, we are, of course, privileged and must not take our water security for granted.

For 2022, the theme of World Water Day is “Groundwater — making the invisible visible”. Groundwater is our most abundant form of water in the Yukon, yet it is poorly understood and often ignored. Ninety-seven percent of Yukon’s drinking water is sourced from groundwater. Aquatic and terrestrial life rely on groundwater to replenish surface water and keep ecosystems healthy. Groundwater stabilizes temperatures and provides nutrients to rivers, lakes, and ponds.

Groundwater is critical to our economy, and yet groundwater is vulnerable to contamination from a variety of human activities. It is expensive and complicated to clean up contaminated ground water, so it is critical that we protect it. Groundwater is contained in layers of sand, gravel, and fractured rocks called “aquifers”.

I want to commend the First Nation and municipal governments that have source-water protection plans or aquifer and wellhead protection plans to ensure sustainable and responsible stewardship of our groundwater. In partnership with First Nations, municipalities, the federal government, academics, and environmental consultants, Government of Yukon is working to map the aquifers underlying our communities. So far, aquifer maps have been completed for Carmacks, and we are now working on aquifer maps for Watson Lake and Teslin.

Government of Yukon is working to understand where and how groundwater is vulnerable so that we can continue to protect this vital resource. In February 2022, we installed new monitoring wells at Army Beach to improve our understanding of how groundwater levels are affected by high water events at Marsh Lake. In 2020, we launched the Yukon water well registry, an interactive online map where people can find well records, see mapped aquifers, and download reports about our large public water systems. The registry has been warmly received by the public, drillers, environmental consultants, researchers, and others who are seeking information about groundwater. In particular, a homeowner seeking to have a well drilled in their property can use the registry to help forecast how much the well is likely to cost based on other wells in their area.

The Kluane sound project — a partnership between Kluane First Nation, Environment and Climate Change Canada, Fisheries and Oceans Canada, and the Government of Yukon — is using traditional knowledge and novel scientific approaches to understand how groundwater conditions are changing around Kluane Lake after a dramatic drop in water levels due to the retreat of the Kaskawulsh glacier.

Earlier today, I had the honour of being part of the World Water Day celebration. This morning, the Yukon Beringia Interpretive Centre hosted an online talk about the world of groundwater featuring Government of Yukon staff, researchers, and a graphic illustrator who brought groundwater concepts to life, making the invisible —

Speaker: Order.

Applause

Mr. Istchenko: I rise on behalf of the Yukon Party Official Opposition to recognize March 21 to 22 as Canada Water Week. This national event is a celebration of water. Here in the Yukon, we have some pretty spectacular bodies of water, like Kluane Lake in my beautiful riding of Kluane, our largest body of water — over 409 square kilometres — and arguably one of the most beautiful places on the planet, and the Yukon River, which stretches 3,190 kilometres throughout the territory. Our water resources are integral to our health, livelihoods, activities, and experiences across the territory.

Canada Water Week is held during the third full week of March each year by design to coincide with World Water Day on March 22. World Water Day serves as a yearly reminder of the importance of water to life around the globe and to bring awareness to the fact that there are two billion people living without access to safe drinking water. Achieving clean drinking water throughout Canada is an important goal.

Today, Mr. Speaker, there are 36 drinking water advisories in place between Saskatchewan, Manitoba, and Ontario. Every one of these advisories is located on a First Nation reserve. Slowly, these advisories are being addressed, but not nearly fast enough.

So, we are so fortunate here in the Yukon. Our water is clean and crisp, and we live in one of the most beautiful places in the country. There is a reason that the population growth for the Yukon surpasses the other Canadian provinces and territories; it's to enjoy our wilderness and enjoy our water.

So, be good stewards of the land for our future generations, and our beautiful territory will come to thrive and give back to the people who call it home.

Applause

Ms. Tredger: I rise on behalf of the Yukon NDP to pay tribute to World Water Day and Canada Water Week.

When we talk about water, there are so many things we can talk about. We can talk about clean drinking water, about where it comes from, about who can access it and who can't. We can talk about rivers, lakes, and wetlands and how we live in relation to them. We can talk about the fish and the animals that make their homes in water. We can talk about industry and the water we need for agriculture and mining. We can talk about everything from environmental stewardship to municipal infrastructure to energy production.

Water and access to it — it's a compelling example of how our world is interconnected. We need to shift our thinking of water just as a resource that we can exploit and start asking: What does a healthy relationship with water look like? How do the choices we make about water today shape the future of our society?

I think about the communities across Canada without access to safe drinking water. How many years do communities have to be under boil water orders before access to clean water is the norm? It's unacceptable that any community suffers from the health impacts of contaminated water. It's especially disturbing that a country as rich as Canada has allowed it to happen.

I think about our Yukon wetlands policy that is being created right now. Will we make sure that our wetlands are protected for future generations? I think about climate change and the consequences of droughts and flooding on our environment. We have many challenges ahead as we work to develop a sustainable relationship with water, but there is also great opportunity.

UN Secretary-General António Guterres spoke about World Water Day this year and said — and I quote: “Water can be a source of conflict but also of cooperation.” Water is life-giving, and we need to protect it.

Applause

In recognition of staff commitment and resiliency throughout COVID-19 pandemic

Hon. Ms. McPhee: I rise in the House today to mark the two-year anniversary of COVID-19 in the Yukon. Two years ago today, we received the news that our first COVID-19 cases had arrived here. I offer this tribute to recognize the sacrifices that Yukoners have made over the last two years and to pay tribute to the incredibly hard-working staff that have shown commitment and resiliency throughout the pandemic. Together, we have been able to navigate our way through COVID-19.

Thank you to the Community Nursing staff and the vaccination teams for helping to educate and serve Yukoners and deliver COVID-19 vaccinations to our friends, our family, our children, and our elders. Their efforts are something to be celebrated, with over 85 percent of Yukoners aged five and older having had their second dose. To the many health care workers who have devoted long hours and demonstrated incredible dedication — nurses, doctors, paramedics, pharmacists, and lab technicians — we thank you.

Thank you to the Yukon Communicable Disease Control staff who were there to help Yukoners who tested positive and were a contact with a positive case, walking them through the steps to keep themselves and those around them safe. Also, to the staff at the COVID-19 testing centres and at-home rapid test distribution sites, testing helped to limit the spread of infection and played a major role in the success of where we are today.

Thank you to the essential workers who have helped to keep our economies going, kept us fed, and cared for our children. Thank you to teachers, truck drivers, and staff at restaurants, grocery stores, and public transportation. The working people at our airports and borders who provided information about public health measures, declarations, and how to travel safely must be recognized.

Thank you to all Yukon government staff and our partners across the territory who worked tirelessly to ensure that Yukoners were informed and had the most up-to-date information. It has been a roller-coaster ride, with many twists and turns that none of us bargained for. I would like to honour everyone who has played a role in keeping the Yukon safe during this pandemic. We pulled together. We avoided outcomes that could have been far worse.

Now the Yukon is in a position to end our public health measures and we are moving toward a new kind of normal, but

we must continue to be diligent. We must be respectful of one another and our choices to keep ourselves safe.

Thank you to each and every Yukoner who has diligently followed the public health measures and has been vaccinated to protect our friends, our family, our elders, and our little ones. We have come so far, but we must ensure that we continue to use our COVID-19 sense and be safe and kind.

Mr. Cathers: I rise on behalf of the Yukon Party Official Opposition to recognize this two-year anniversary. The pandemic has created challenges for everyone, but it's important to recognize that its impacts have been harder on some people and some families.

I want to begin by thanking all of the health care professionals and others who have been part of the vaccination rollout in the Yukon. While others may try to take credit for your work, we remember that it was your efforts that have been instrumental in achieving high vaccination rates earlier here than in many jurisdictions. I want to also thank those who have been involved in the testing part of the system.

I want to thank Yukoners working in our hospitals, medical clinics, EMS, nursing stations, continuing care facilities, home care, and allied health services for your efforts in providing health care services during this difficult and often stressful time. Your work has made a difference and is appreciated.

Thank you as well to businesses, sports organizations, churches, NGOs, and the list goes on, for your efforts in dealing with the pandemic and the challenge of offering services and supports during this difficult time. Thank you indeed to all the Yukoners who have made an effort.

This has been a time of neighbours helping neighbours as they isolated, dropping off supplies, checking in on friends and family through windows, distant porch visits, over-the-phone or Zoom visits, and people rallying to support businesses in danger of closing.

Businesses and organizations have been forced to adapt the way in which they did business or served people. Working from home and meeting distantly has become commonplace.

People have been resilient and many have adapted, but there have also been serious impacts. There have been mental health impacts, an increase in drug overdoses, and Yukoners who have passed away from COVID and others who have been sick with it. There are also businesses that have been hit hard by the pandemic.

As we mark two years since the impact of the pandemic reached the Yukon, we must recognize lessons we've learned, the resiliency we have seen, and also struggles faced by many people — two years of uncertainty and ever-changing restrictions. Restrictions and a decrease in tourism have led to once-thriving businesses, in some cases, struggling to keep afloat.

Government restrictions and mandates have led to job losses for some, in an already difficult time. Yukoners have been through a lot. During the last several months, we've seen some people growing increasingly frustrated with autocratic decision-making by Cabinet without public consultation on rules that were impacting their lives.

Two years ago, in March 2020, we called for public consultation to guide the response and proposed an all-party committee to deal with pandemic response. Since then, we have repeatedly called for more public consultation, especially on regulations and ministerial orders.

Like rules for occupational health and safety or highway safety, that rules may be needed does not mean that government ought to make those decisions autocratically. Unfortunately, the government continues to reject our constructive proposals for improved democratic oversight and public involvement, including voting against changes to the *Civil Emergency Measures Act* that would have provided for that public consultation and democratic oversight.

While this does not take away from the efforts of Yukoners, especially those working in the front lines, it is unfortunate that the elected level of government has been unwilling to share more information, to work more cooperatively with all MLAs, and to seek feedback from people while the rules were in place.

Mr. Speaker, we are hopeful that things will return to normal, but as we face the prospect of living with COVID, going forward, government should recognize that things can be done better —

Speaker: Order, please.

Ms. White: Today, I stand on behalf of the Yukon NDP to offer my thanks and gratitude to all Yukoners. We echo the thanks of our colleagues for all of those who worked on the front lines.

These last two years of the COVID pandemic have felt more like 20. There isn't a single aspect of the pandemic that has been easy for anyone. These last years have skyrocketed issues into the forefront of our collective knowing: a decline in mental health for so many, including children; an increase in drug use and deaths from drug poisoning; and lesser known issues, like the consumption of hand sanitizer — a cheap replacement for alcohol, which was never intended for human consumption. As we continue to go forward, these issues and others will need to be addressed with humanity and compassion.

The Yukon family has been deeply affected by COVID. We honour your losses and we share your sadness.

Everyone's experience is unique and everyone's story is their own.

I have always loved the Yukon, but that love deepened as I watched our community join together in kindness and rise together to face the unknown. Thank you for your strength, your adaptability, your patience, but especially for the kindness that you directed toward others.

We'll need to harness the best of what we've learned over the past two years to forge a path forward where no one is left behind. Years from now, when we look back on this pandemic, I hope that we can see the lessons we learned as a starting point for a kinder, more gentle and inclusive Yukon.

Speaker: Are there any returns or documents for tabling?

TABLING RETURNS AND DOCUMENTS

Hon. Mr. Mostyn: I have for tabling a document that shows that, unlike the Conservative leader Candice Bergen, the Yukon Party leader favours cooperative deals with the New Democratic Party.

Speaker: Are there any reports of committees?
Petitions.

PETITIONS

Petition No. 10 — received

Clerk: Mr. Speaker and honourable members of the Assembly: I have had the honour to review a petition, being Petition No. 10 of the First Session of the 35th Legislative Assembly, as presented by the Member for Whitehorse Centre on March 21, 2022.

The petition presented by the Member for Whitehorse Centre meets the requirements as to form of the Standing Orders of the Yukon Legislative Assembly.

Speaker: Accordingly, I declare Petition No. 10 is deemed to be read and received. Pursuant to Standing Order 67, the Executive Council shall provide a response to a petition which has been read and received within eight sitting days of its presentation. Therefore, the Executive Council response to Petition No. 10 shall be provided on or before April 4, 2022.

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

NOTICES OF MOTIONS

Hon. Ms. McLean: I rise to give notice of the following motion:

THAT this House supports the Yukon First Nation School Board.

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

THAT this House urges the Government of Yukon to develop legislation that grants rights to water.

Ms. White: I rise to give notice of the following motion:
THAT this House urges the Government of Yukon to ensure that all Yukoners have access to year-round recreational opportunities.

Ms. Blake: I rise to give notice of the following motion:
THAT this House urges the Minister of Health and Social Services to provide at-home rapid COVID-19 test kits to the Old Crow Health Centre for distribution to Old Crow citizens.

Speaker: Are there any further notices of motions?
Is there a statement by a minister?

MINISTERIAL STATEMENT

Solar energy installations at highway camps

Hon. Mr. Clarke: Our government is continuing to make strides on the commitments laid out in *Our Clean Future*. *Our Clean Future* is a Yukon-wide strategy to tackle climate change that involves all levels of government, businesses, organizations, and individuals. Our government is leading by example, and we continue to support efforts that empower Yukoners and Yukon businesses to advance the territory's climate change goals.

Climate change is a very real issue, particularly here in the north. The Yukon green infrastructure program at Highways and Public Works focuses on meeting greenhouse gas reduction targets for public infrastructure owned by the Government of Yukon. Located throughout the territory, highway maintenance camps are critically important to keeping people and goods moving to and through our communities. However, due to the often remote locations of these camps, many of these facilities are off-grid and serviced exclusively by diesel-generated electricity. Investing in renewable energy sources, such as solar energy, is key to reducing greenhouse gas emissions and dependency on fossil fuels.

Feasibility assessment work has identified four such highway maintenance camps at which we will install solar energy systems. These are the Klondike and Ogilvie maintenance camps on the Dempster Highway, the Tuchtita camp on the Robert Campbell Highway between Watson Lake and Ross River, and the Blanchard camp on the Haines Road. These four projects have been reviewed by the Yukon Environmental and Socio-economic Assessment Board and have received a recommendation to proceed.

These systems will include the construction of a solar array and a battery storage building within the existing maintenance compound at each location. The first two projects, which will be tendered this spring, will be design/build contracts, tendered individually. The following two projects will be tendered in the fall. The first two are planned for construction this summer, with the following two planned for construction in the summer of 2023. Adding a renewable solar energy system at these four camps will help us to achieve a significant reduction in fossil fuel consumption, up to 200,000 litres of diesel per year.

These four projects will also help to reduce the government's greenhouse gas emissions by approximately 530 tonnes per year. To give you an idea of the impact of this reduction, it is roughly equivalent to 2,500 round trips from Whitehorse to Dawson City by car.

The department is continuing to invest in renewable energy projects such as these through the green infrastructure program.

Mr. Speaker, this is another great example of our government investing in a better and cleaner future for Yukoners. I look forward to sharing future progress on these exciting projects and continuing to make strides toward meeting our commitments within *Our Clean Future*.

Mr. Hassard: First off, it's important to note that we are strongly in favour of actions to reduce our emissions and to tackle climate change, and anytime we can save diesel

electricity generation is a good thing, but I do have some questions for the minister about today's announcement. These questions are based off those submitted by First Nation governments during the YESAA commenting process, and I hope that the minister is able to respond to these questions today.

With respect to all of the highway camps that will see this work, the YESAB submissions indicate that a significant amount of heavy equipment will be required to install these solar systems. Each site is expected to require an excavator, a dump truck, a pile rig, three pickups, and other fossil-fuel-powered equipment.

Several years ago in this House, the Liberals committed to looking at all decisions through a climate lens so that we can understand the impacts on the climate from decisions that they make. However, none of these projects have had an analysis done on the amount of greenhouse gas emissions created due to construction. This is an issue raised by the Tr'ondëk Hwëch'in government, which asked the Government of Yukon to consider, document, and report all GHG emissions created through construction of this project. So, I'm hoping that the minister can confirm for the House today if he will live up to this request.

Another question specific to the Klondike camp that was submitted by TH was with respect to the location of the solar panels. The government is planning on repurposing the existing junkyard at the grader station to be used for the location for the solar panels. What will be done with the items currently in the junkyard? Will they be moved off-site or disposed of? I'm hoping that the minister can provide an answer for that.

These projects are also bringing battery storage to the sites. The YESAB submission indicates — and I quote: "... removal of lithium-ion batteries from the site to an appropriate off-site disposal facility." A question submitted by one of the First Nation governments asked the government where the closest appropriate off-site disposal facility is and what the associated greenhouse gases created to transport the battery there are. Another question is about the true life-cycle cost of the renewable energy system proposed for these highway camps.

As noted in one submission to YESAB, if components are manufactured using methods that create substantial GHGs and if other project components are transported internationally, these GHGs should be considered and calculated as a factor in the overall GHG reduction potential for the project.

Can the minister confirm if the manufacturing of components such as batteries and solar panels and the transportation of components and equipment from source to site has been factored into the GHG reduction calculation?

While the minister is up, I would also like to raise some concerns with the state of the highways. Over the past few years, we have seen cuts to the highway maintenance budget. Maybe the minister could explain these cuts, as people rely on our roads and highways to travel from community to community for such things as to attend medical appointments. This, of course, is why road maintenance is so important. I am hoping that the minister will also announce that he will be reversing these cuts while he is on his feet next.

Ms. Tredger: Every time we move from diesel to renewable energy, we are taking an important step toward reducing our greenhouse gas emissions. For people and places in the Yukon who are not connected to the grid, moving off of diesel generators is not easy, but we've seen such innovation and leadership as people find ways to make it happen. There are many examples to point to. In 2013, Northwestel started a pilot project to use solar to power its most remote sites and has been investing and expanding its solar projects ever since.

Projects are underway across the Yukon to reduce rural communities' dependence on diesel. Some are already in operation, such as solar projects in Old Crow and Dawson City. We are grateful to these forward-thinking communities for leading the way, and it's good to see Yukon government learning from them to reduce its own dependence on diesel. We look forward to the projects coming online and hope that future initiatives will incorporate renewable energy from day one.

Hon. Mr. Clarke: Since 1948, temperatures in the Yukon have increased by 2.3 degrees Celsius, which is close to three times at which global temperatures are rising. Climate change, even in the face of the pandemic, remains the biggest challenge of our generation, and we must do everything we can to protect our territory and the world for future generations.

Our Clean Future lays out a road map for the Yukon to reduce our emissions as a territory and better protect our environment. A significant piece of the work is transitioning the Yukon to renewable energy sources and reducing our reliance on fossil fuels. One of the actions in *Our Clean Future* is to conduct retrofits to Yukon government buildings to reduce energy use and to contribute to a 30-percent reduction in greenhouse gas emissions by 2030 — actually, 45 percent.

These four projects alone would get us approximately five percent closer to meeting our goal by 2030. In addition, these projects will help meet our commitment to install renewable electricity systems in five Yukon government buildings in off-grid locations by 2025. We are now on track to meeting that call to action in *Our Clean Future* one year earlier than committed.

Mr. Speaker, our focus is to continue to make investments in renewable energy projects that will help the Yukon meet its emission reduction targets and ensure that energy rates remain low across the territory.

The Yukon Party's plan, by contrast, is to go backwards. They want to invest in more fossil-fuel-produced energy, creating the need for more diesel generators in the territory at a time when gas and diesel prices are rising. This will not only hurt our environment but also the pockets of Yukoners.

Mr. Speaker, we are going to continue to work to meet our targets in *Our Clean Future* and build a stronger, more resilient territory.

I was happy to see yesterday that all MLAs in this Assembly supported the creation of the better building program — but, of course, the Yukon Party voted against the bill last fall. This is the type of innovative action that we need to continue to take to help Yukoners reduce their emissions. We

know that decisions we make today will affect Yukoners for generations to come, and it is incumbent on leaders in the territory and around the world to make bold, progressive action to fight climate change.

Speaker: This then brings us to Question Period.

QUESTION PERIOD

Question re: Dawson City recreation centre

Mr. Hassard: So, yesterday, we asked the Minister of Community Services about the budget for the new recreation centre in Dawson City. In response, the minister stated that they had submitted a request for federal funding based on a budget estimate of \$21 million. However, we have obtained a letter dated February 22, signed by the minister himself, indicating that the new rec centre in Dawson could cost as much as \$81.2 million. Now, that's a \$60-million difference from the number that the minister gave the House yesterday.

So, can the minister explain this discrepancy?

Hon. Mr. Mostyn: I'm happy to talk about the Dawson rec centre this afternoon.

We are investing in all of our communities' recreation centres and we are happy to do so. We think that recreation in rural Yukon is important, and we will continue to make investments where necessary.

This is a project that has been going on for several years. We've been working very closely with the City of Dawson on this proposal. We did submit an application to the federal government. That's what we had to do. We had to do it in a timely manner when we put the program in.

Since that time, there has been a lot of things happening in the world. There is a war in Europe. There are trade disputes with China. Prices of commodities, COVID itself, supply chains — we've seen an increase in expenses across the board in many, many places.

So, yes, the application was made several years ago. In the time between this application that was made until now, we've absolutely seen the world change, so we are now in a new world.

We're working with the City of Dawson to build a rec centre for that community. We're working very closely. They have identified their needs, and we will work to get that centre built so that the citizens at Dawson can have a rec centre that they can be proud of, like every other community in the territory.

Mr. Hassard: I would just remind the minister that those changes didn't all happen since he gave us that information yesterday here in the Legislature.

Now, we've also obtained the leaked functional plan and concept designs for the proposed Dawson rec centre, and the plan lists a range of options. One of those options is called "Dome Road option 1". The estimated cost for this option is \$54 million. On July 2021, the project team, which includes members from the Government of Yukon, wrote a letter to the City of Dawson recommending this option. On August 31, 2021, the City of Dawson unanimously voted in favour of this option.

But then yesterday, the minister told us that he was budgeting just \$21 million for it. So, that's \$33 million less than the option actually chosen by the City of Dawson. Can the minister explain this discrepancy?

Hon. Mr. Mostyn: Once again, what we're seeing is that Her Majesty's Loyal Opposition is just not a reliable source of information. I'm shocked, actually.

So, what we heard is the Member for Pelly-Nisutlin talking about \$80 million, now it's \$21 million, then it's \$50 million. It's just agents of chaos. That's what they're trying to do here, Mr. Speaker. They are trying to sow chaos and discord in communities where there really isn't any.

I honestly wish that they would be a little more responsible in this House with their information flow, because they are really just trying to sow discord. I really think that does Yukoners a disservice.

We are working very closely with the City of Dawson to identify a rec centre — and the Dome Road is the recommended option — and to create a recreation facility that serves the needs of the citizens of Dawson for the most reasonable cost that we can. We're in a process of doing that right now.

We have already said publicly that we have applied to Ottawa for support for a \$21-million facility. Yes, the facility has come up in value. That happens in this thing. We're working with the City of Dawson to come up with a plan that will actually give those citizens the recreation facility that they deserve, and I know they appreciate that.

Mr. Hassard: What we are trying to get is accurate information from this government, but it appears to be a serious challenge most days. So, we know that a project team that includes members for the Government of Yukon recommended last year that the government go ahead with a new Dawson rec centre that costs \$54 million. We know that the Dawson City council voted in favour of that option last fall, but now the minister has only budgeted \$21 million for this project. As I said, that is a \$33-million shortfall from the recommended option that has been chosen by Dawson, so that leaves two options, Mr. Speaker: Either the minister thinks that he is getting \$33 million from somewhere else or he is going to make cuts to the project to make it smaller to reduce that cost. Can the minister let us know how he is making up that \$33-million shortfall?

Hon. Mr. Silver: I can understand why the member opposite is confused as to this process of consultation, or confused on the process of getting the dollar value in a supply chain management issue of a year, or even taking a look at inflation. On this side of the House, we are doing the consultation that we necessarily need to do with the City of Dawson. We are working hand in glove with them. There is money in this budget, and there are also pressures from inflation and pressures from supply chain management.

Now, the members opposite, of course, don't understand this part of it. They stopped short of all those things. I sat there, as the Member for Klondike, for years. I watched the photo op from the members opposite. They dug down into the ground and said, "This is where we are going to build a rec centre", and for five years, I sat in opposition and asked questions about it,

and they kept saying to me, “In due time, in due time” and never got it done.

We are committed to working with the City of Dawson, and we will commit to making sure that this rec centre gets completed.

Question re: Watson Lake continuing care

Ms. McLeod: Last weekend, Watson Lake residents came together to discuss the need for a continuing care facility in their community. People in the area no longer want to send their loved ones to Whitehorse for that level of care. In the past, I have asked the minister to engage the community on this topic, and we even saw a petition tabled last year with over 500 signatures.

Is the minister now ready to reconsider her position on this and begin working to establish a continuing care facility in Watson Lake?

Hon. Ms. McPhee: I am pleased to rise today to speak about this important health issue. I am also very pleased to see that the member opposite is working with her community on the planning exercise. That is how these kinds of things get done. Communities come together, we meet with them on a regular basis, and they talk about their priorities.

The work that was done by the former Yukon Party government with respect to long-term care facilities is an important factor in relation to the work that we are — in contrast to the work that we are currently now doing.

Of course, their planning process included Whistle Bend here in Whitehorse, with a total of 300 beds, which would mean that everyone needed to leave their communities to come here for either end-of-life or particular medical treatment. That is not our plan. We are working with a process where individuals can age at home and be there, hopefully, as long as possible — also working with communities across the territory for the purposes of dealing with how they would like — usually just their elders, although other people with particular medical situations — to be cared for close to home.

Ms. McLeod: Given the minister’s lack of willingness to listen to rural Yukoners, we launched our own consultation and will compile the results in a “what we heard” document.

Will the minister agree to review the input from the community of Watson Lake on the need for a continuing care facility, and will she agree to come to the community herself and host a public meeting to discuss how to move this project forward?

Hon. Ms. McPhee: I had a wonderful visit to Watson Lake in the fall of last year. I spoke with many individuals from the community, as well as individuals who work for and with the Department of Health and Social Services and the Department of Justice in that community, and I spoke with them about their needs and their priorities. It was an excellent opportunity; I would be happy to go back again.

I think what the member opposite is failing to realize is that our priorities with respect to Yukoners — and we’ve heard from Yukoners on this — is the aging-in-place action plan. It was released back in September 2020, and this plan was based

on extensive public engagement with more than 1,200 people from across the territory.

Its vision is to ensure that all Yukoners — regardless of age, income, or ability — have access to the supports that they need to live safe, independent, and comfortable lives in their own home or community for as long as possible. The first aging-in-place annual report will be publicly released very soon, and I look forward to that. The report summarizes the progress that has been made to date, and I am happy to stand again on this question.

Ms. McLeod: Even if the minister was willing to listen to rural Yukoners and agreed to proceed with this project, we know that it is going to take several years to complete. In the meantime, the people of Watson Lake still need improved services.

What steps will the minister take immediately to help people in Watson Lake live independently and stay in their homes longer?

Hon. Mr. Silver: The minister has answered the question and talked about the extensive study and research that we’ve done to make evidence-based decisions in all communities, including all the rural communities. This does represent a complete 180 from the member opposite. Her government was designing and planning a 300-bed facility in Whitehorse for all of our elders in all of the rural communities who needed that level of care. That would have meant us apologizing years later for that particular institution.

What we did from the first time that we came into government here is that we designed and built the 150, with operation and maintenance — which was not contemplated by the members opposite either for that facility — knowing full well that we wanted to make sure that we kept our elders in the rural communities forever. For five years now, that’s what we’ve been doing.

The minister has been to her feet to talk about the studies, the consultation, and the work that we’ve done in these rural communities. We will continue to do so.

I’m glad to hear that the member opposite now believes in having aging in place in the communities. I hope they change their mind on acute care as well, because *Putting People First* has said that the best way to move forward in Yukon is a people-centred approach and a collaborative approach to health care. Maybe they will flip-flop on that one as well.

Question re: Long COVID support

Ms. White: After two full years of the COVID-19 pandemic, more and more long-term effects of the virus are coming to light. Last year, the World Health Organization defined the post-COVID condition now known as “long COVID”. The Public Health Agency of Canada also recognized the existence of long COVID, along with a long list of symptoms. But here in the Yukon, the Department of Health and Social Services says that the definition of “long COVID” is still up for debate.

That begs the question: What science is being followed now in this situation? Does the government acknowledge that long COVID does indeed exist and affects many Yukoners?

Hon. Ms. McPhee: I don't think there is much debate about the fact that there are individuals across the world suffering from what has been termed "long COVID". I don't think there is much debate about the fact that health professionals and experts across the world are determining, studying, and researching what is known as "long COVID" to determine its ultimate effects, ultimate treatment, presumably, as well as perhaps medication and/or vaccinations going forward.

That work is being done across this country. It is being done by the medical officers of health across the country — the chief medical officers of health. It is being led in Canada by Dr. Theresa Tam's office, and the experts will certainly be providing guidance, as they have with respect to COVID-19 throughout the last two years, for how medical individuals and professionals can treat their own patients and how individuals who might suffer from long COVID will be able to address this situation in their lives.

Ms. White: I appreciate that acknowledgement of long COVID across the world, but it does exist here in the Yukon. So, according to the Public Health Agency of Canada, about 60 percent of adults who have recovered from COVID reported experiencing symptoms more than 12 weeks after the initial infection, which can then be classified as "long COVID". Some of those symptoms include fatigue, memory problems, shortness of breath, general pain, and difficulty thinking, and 10 percent of adults with long COVID said that they were unable to return to work in the long term. Yukoners affected by long COVID are sharing their stories and asking for support, only to be told by this government that there is no such thing as long COVID.

What is the government doing to support Yukoners suffering from long COVID?

Hon. Ms. McPhee: Well, I can tell you that the first thing that this government is doing with respect to Yukoners who might suffer from long COVID is acknowledging them — acknowledging their situation, acknowledging the difficulties that they are having, and certainly recommending that they are working with their own health professionals.

We are all learning about this. The medical professionals are learning about the effects of long COVID and, ultimately, individuals will be working with their own medical professionals to do that.

I can also indicate that some of my colleagues have been working with a group of individuals here in the territory who have indicated that they do have long COVID. They are seeking meetings — one of the meetings I think is set for this weekend — as a way to start the dialogue and to determine the priorities of this particular group of individuals and what they would like to see as a response from their government. We will be listening very well to the group and understanding what we can do and determining what role we can play to support them through this difficulty. They will be supported. We have supported Yukoners throughout the last two years, both financially and otherwise, and we will work to support Yukoners with long COVID.

Ms. White: Unfortunately, the minister's assertion isn't the experience of Yukoners with long COVID, and that meeting is on Thursday at 11:00 a.m. Many provinces in Canada have started long COVID clinics where a team of doctors and health professionals can support and offer advice. In the Yukon, not only are people being denied help, they are also being told that if they didn't get a positive PCR test, they can't have long COVID. The thing is that most people who got COVID were not eligible to get a PCR test in the first place, and that doesn't even include that the government stopped administering PCR tests in January. This leaves folks struggling to access treatment, often telling them that they have no choice but to pay out of pocket for whatever treatment they can find that makes them feel a little less helpless.

Will the minister work with existing long COVID programs in other jurisdictions so that Yukoners can get the help that they need?

Hon. Ms. McPhee: I don't really know where to start. The correction about the meeting — the member opposite might be going to a meeting on Thursday at 11:00 a.m., but ministers on this side of the House have a meeting on Saturday. I think that maybe they can take me at my word on that. It's not about people's schedules; it's about connecting universally with people who identify as having long COVID here in the territory.

With respect to testing, it is also not correct that the government stopped PCR testing here in the territory in January. Testing at the testing centre in downtown Whitehorse continues to be available to individuals who qualify for those tests. I can also indicate that, of course, we will absolutely be supporting individuals who have come forward and identified that they have symptoms, effects, and impacts on their lives from long COVID. We will support them if they need particular testing for that indication.

I am not sure exactly what the member opposite is referring to, but let's get the message straight: We will absolutely support individuals who are suffering or have impacts from what they term as "long COVID". We will be meeting with that group this week. We will identify their priorities. We will listen to them and we will work with that group.

Question re: Electrical rebate

Mr. Cathers: Last week, the Premier made a speech about his budget to the Yukon Chamber of Commerce. Unfortunately, it was poorly attended and only a handful of people showed up to listen to the Premier, so most Yukoners weren't aware of the announcement he made. Realizing that his budget was already out of date and completely forgot about tackling inflation and the rising cost of living, the Premier announced a new measure not contemplated in the budget — an electrical rebate to residential and commercial customers of \$150 for the year.

Can the Premier tell us how much this new program will cost, when it will roll out, and why the measure wasn't budgeted for at all?

Hon. Mr. Streicker: I happened to also attend the Premier's meeting with the business community hosted by the

chamber. The chamber did a wonderful job, by the way, of organizing that. There were 40 or 50 people there, but it was also online. There were people who brought questions from across the territory, so I think it was rather well-attended.

The Premier did make an announcement. We put out a press release on it today. If the members would like, I am happy to come back with a ministerial statement. If they would prefer that, I'm happy to do it.

What we announced was \$50 a month for three months for a total of \$150. This is to help Yukoners because we know that there are prices rising. We know that the war in Ukraine has pushed the price of fuel up and also the price of food. This is us responding to that situation. I appreciate working with the chamber — with the Minister of Justice earlier — when they came to us and talked about potential ways we could be supportive. I'm happy to get this measure out the door.

We did put out a press release on it today. The total dollar value, I believe, is \$3 million. I'm happy to answer further questions about how we're supporting Yukoners in a time that is very difficult for everyone.

Mr. Cathers: Well, Mr. Speaker, the minister may need to get his eyes checked because there were closer to 30 people there, not counting ministers and staff.

The Yukon Party Official Opposition has been pushing the Liberal government to do more to help Yukoners with the rising cost of living. We have proposed waiving the fuel tax, reversing the Liberals' multi-million-dollar tax hike on insurance, and pushing the federal government to cancel the carbon tax increase during this inflation crisis, but the Liberals have dismissed all of these suggestions. The Minister of Economic Development even dismissed waiving the fuel tax as nothing more than a boutique policy that he said was plagiarized from Alberta.

It's not lost on Yukoners that the \$150 rebate is a policy directly copied from the same Alberta government whose policy the Liberals criticized as being "boutique".

Will the Premier admit that his last-minute effort to copy Alberta is further proof that his budget is already stale-dated and out of touch with the challenges facing Yukoners with the rising cost of living?

Hon. Mr. Silver: So, again, the member opposite is incorrect. When we take a look at what they suggested as far as getting rid of the six-cent fuel tax here in Yukon, we made it known that it's the lowest fuel tax in Canada.

Now with this rebate that we are giving out to people — \$50 per month — think about how many times you would have to fill up your gas tank to equal that type of support with the Yukon Party-led response.

Some Hon. Members: (Inaudible)

Hon. Mr. Silver: I guess they're not interested in the answer, as they heckle off-mic.

Some Hon. Members: (Inaudible)

Speaker: Order, please. The member has the floor.

Hon. Mr. Silver: Thank you, Mr. Speaker. This is important information for Yukoners. It's another method that we're doing to make sure that lives are affordable for Yukoners.

The member opposite also brings up the tax premiums issue. We've established many times over the last year and a half that what he's trying to connect is absolutely not correct, and it is not connectable. Yet, the member opposite still brings that to the floor as if it is fact.

On this side of the House, we will use evidence-based decision-making. We will do long-term, medium-term, and short-term budgeting to make sure that we are accomplishing the needs of Yukoners and making lives more affordable, whether that's for inflationary reasons, world conflicts, or just the regular modus operandi of this Yukon Liberal government.

Mr. Cathers: I have to remind the Premier that the fuel tax is about \$9 million, and it's only the Premier who thinks that insurance companies hit with a multi-million-dollar bill won't pass that bill on to their customers.

We're just weeks into this Sitting, and the Liberal's budget is out of touch with the reality faced by many Yukoners — so out of touch that they're making up policy on the fly and introducing new programs not contemplated by the budget. The Premier raved that his budget is not stale and they don't need to do anything to help Yukoners with the cost of living. His Minister of Economic Development dismissed the idea of waiving a fuel tax as boutique, even though provincial governments are doing that to help people struggling with the climbing prices.

Now the Premier's throwing a Hail Mary with a new program that wasn't even included in the budget. Will he admit now that his "back of the napkin" plan for a \$150 rebate is more proof that his budget is stale-dated and completely out of touch with the challenges Yukoners face?

Hon. Mr. Pillai: First and foremost, I think that the budget that was tabled by the Premier has the flexibility and the ability to monitor and adapt, and that's what we've been doing.

Second, I believe we spoke about the boutique approach by Alberta. Certainly, some feel that's in place because the current leader of the Conservatives in Alberta is under fire and going into a very significant leadership review in the short term. Economists are touching on that.

But moreover —

Some Hon. Members: (Inaudible)

Speaker: Order, please. The member has the floor.

Hon. Mr. Pillai: Must be touching a nerve. Again, why we call it a "boutique approach" to policy is because, in this case, we think that a large majority of people would be touched by it and could see a benefit. Making sure that we reduce the electrical bills of Yukoners is the best way for the biggest impact.

All I can say is, listening to the mayor of Faro just a couple of weeks ago, on CBC, when he talked about the many Yukoners in the Pelly-Nisutlin riding who — many of them don't drive vehicles, but they all have electricity bills to pay. So, we think that this is the best way to have the largest impact across the Yukon. We didn't build a program — it is a program — the interim electrical rebate program is in place. It is something that we can scale up or pull back. It is something that I think is the biggest positive impact to Yukoners, and that is what we did.

Again, a budget that is ready to go — we can deal with any existing push on our economy, and again, we can deal with inflation.

Question re: Canada Winter Games infrastructure

Ms. Clarke: On March 11, the Canada Winter Games Bid Committee submitted their technical review package for the games. The technical review identifies that Whitehorse will need significant new infrastructure to support the hosting of the games. The Liberals' five-year capital concept contains no reference or budgeting for any of these items.

Can the minister tell us why there is no Canada Winter Games infrastructure included in the five-year capital concept?

Hon. Mr. Mostyn: I am going to begin my exchange with the good member opposite this afternoon by correcting the record once again. This is not a five-year capital concept; it is a five-year capital plan — although I understand the opposition not understanding this, because they never did it. They never did it. There was no capital plan, no five-year forecast — nothing — and you know what we heard? We heard from the contracting community and from Yukoners, who we spoke to on a regular basis, that they wanted something that they could help plan. They also wanted just-in-time tendering, which we also brought into being.

We have done enormous amounts of work to try to increase the information that we are providing to the public so that they can better plan their projects and do work better. I am sure that my good colleague, the Minister of Highways and Public Works, can go into this in a little bit more detail.

The Government of Yukon is excited to once again have the opportunity to host the Canada Winter Games with the City of Whitehorse. I have been working with the City of Whitehorse, with the games committee, and with Piers McDonald for a very long time now, for months, and we are working closely in the lead-up to the official launch of the bid, which took place — we had the official launch in September of 2021 — and we are going to work very, very closely to put on the best games that Canada has ever seen in 2027.

Ms. Clarke: One major piece of infrastructure that Whitehorse will need in order to host the games is a new arena. As indicated, there is no reference to a new Whitehorse arena in the budget that was tabled just a couple of weeks ago.

Can the minister tell us what the initial cost estimates are for a new arena in Whitehorse?

Hon. Mr. Mostyn: I am really glad to talk about our legacy of creating more recreational opportunities and more recreational facilities for people across the territory. I am working very closely with my colleagues at the City of Whitehorse to make sure that the City of Whitehorse, which is a growing community, actually has a new facility. We know that we lost one of the ice sheets at the Stan McCowan arena. The City of Whitehorse has identified this as something that they would like to see as part of a legacy of the games. We are working very closely with the City of Whitehorse and with other partners to make sure that we have the facilities in town to meet this growing community.

We are growing at 12 percent. It's unbelievable, the growth we are seeing in our territory. Trying to juggle that is, of course, a job in and of itself. It's a good problem to have, because this territory is proving that, under our strong leadership, people are migrating here to get a piece of the Yukon. I think we should celebrate that, and we are going to celebrate it in 2027 with an absolutely exceptional games, provided our bid is accepted.

Ms. Clarke: Another major piece of infrastructure that Whitehorse will need in order to host the games is an athletes' village capable of housing 2,000 athletes. Again, there is no reference in the budget to the construction of an athletes' village for the Canada Winter Games.

Can the minister tell us what the initial cost estimates are for a new athletes' village? What is the proposed solution for this infrastructure need?

Hon. Mr. Mostyn: I am so glad that the opposition has finally cottoned on to how important these games are in 2027. It's great to hear their support and that they actually have a little bit of information. Some of it is even accurate, because honestly, a lot of the time, we're getting unreliable information from the opposition, but yes, the member opposite is correct that we do need an athletes' village, as does any games.

We are working very closely with the bid committee and the City of Whitehorse to make sure that we have a proper facility where the athletes can come north and actually participate in these games. We have done this before. We did this in the last Canada Winter Games in 2007 that we hosted. We did a great job. We are looking this time to learn from what we learned in 2007 and actually apply those lessons to these games and actually come up with an athletes' village that will service the City of Whitehorse, which is having — we're working on our housing as well. This is another piece that will feed into our housing strategy. So, it's all good, Mr. Speaker.

What we're going to do is have one of the best games in Canada in 2027. It's the 60th anniversary of the Canada Games and it's actually north of 60. It's a great confluence of events, and I'm looking forward to it.

Speaker: The time for Question Period has now elapsed.

Notice of opposition private members' business

Mr. Kent: Pursuant to Standing Order 14.2(3), I would like to identify the item standing in the name of the Official Opposition to be called on Wednesday, March 23, 2022. It is Motion No. 288, standing in the name of the Member for Porter Creek North.

Ms. Tredger: Pursuant to Standing Order 14.2(3), I would like to identify the items standing in the name of the Third Party to be called on Wednesday, March 23, 2022. They are Bill No. 304, standing in the name of the Member for Whitehorse Centre, and Motion No. 168, standing in the name of the Member for Vuntut Gwitchin.

Speaker: We will now proceed to Orders of the Day.

ORDERS OF THE DAY

Hon. Mr. Streicker: 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 (Ms. Blake): Committee of the Whole will now come to order.

The matter now before the Committee is continuing general debate on Vote 15, Department of Health and Social Services, in Bill No. 203, entitled *Third Appropriation Act 2021-22*.

Do members wish to take a brief recess?

All Hon. Members: Agreed.

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

Recess

Deputy Chair (Ms. Tredger): Committee of the Whole will now come to order.

Bill No. 203: *Third Appropriation Act 2021-22* — continued

Deputy Chair: The matter now before the Committee is continuing general debate on Vote 15, Department of Health and Social Services, in Bill No. 203, entitled *Third Appropriation Act 2021-22*.

Is there any further general debate?

Department of Health and Social Services — *continued*

Hon. Ms. McPhee: I am happy to welcome the Deputy Minister of Health and Social Services, Michael Hale, to the Committee of the Whole discussion this afternoon. As he gets settled, I will indicate that I will be resuming the comments I was making last evening near the end of the day with respect to the supplementary budget before the Committee regarding Health and Social Services.

I was, last night, speaking about vaccinations and indicating that our government and the Department of Health and Social Services is continuing to provide booster vaccinations to those Yukoners who have received their second doses, six months ago or longer, and that we continue to provide first and second dose vaccines to all Yukoners aged five and above. I continue to urge all eligible Yukoners to get vaccinated. We do not know what the next variant of concern will be, whether it will be milder or more severe, but we do know that getting vaccinated is our best defence.

World health experts are discussing more or future vaccination combinations, and we will need to continue to be

at the ready — ready to protect Yukoners. It is the responsibility of the department and that work will continue.

Turning to testing for a moment, all types of testing have been used here in the territory and will continue to be used as we manage this pandemic. Our testing strategy will continue to evolve, based on evidence and the guidance of the office of the chief medical officer of health, who, of course, works with the Canadian chief medical officers of health across the country as well as Dr. Theresa Tam in her office, and we will continue to do that work.

With the arrival of new rapid-testing resources and an increase in cases related to Omicron since January, our lab-based PCR testing resources have been focused on populations with the highest risk of negative impacts from COVID-19. In conjunction with that and to complement that process — at-home self-tests are recommended to be used for lower risk individuals and when a person is showing symptoms.

We have just expanded the distribution availability here in Whitehorse and in Haines Junction. Rapid at-home tests are available in every community in the territory. I know that there has been some concern expressed about Old Crow. I can indicate that those kinds of tests are available for distribution currently in Old Crow at the administration offices and that they will be available very soon at the health centre as well in Old Crow, because it is incredibly important that people have access to these kinds of tests.

They are available in most every other community at health centres. The self-tests have now been distributed widely throughout the Yukon and they are available, in addition to the specifics that I just mentioned. They are available at schools and childcare centres and to the general public throughout the Yukon. Pickup locations are listed on yukon.ca. We have a main pickup location here in Whitehorse. It's just next door to the building often referred to as the "tourism building" and the tourism centre in downtown Whitehorse.

As of early March, we have distributed more than 100,000 rapid antigen self-tests. I think I've noted before in this Legislative Assembly — and it's important to note — that those come in large batches and have to be repackaged for distribution, so we have had lots of people working on that. I thank all of those individuals who have come forward to do that kind of work and helped us be able to send that many rapid-antigen self-tests out to the communities.

Funds have been made available and continue to be used to support the acting chief medical officer of health in monitoring the environment, including assessing epidemiological models and providing recommendations to Yukoners, which all have been vital resources and vital activities to combat the virus.

I can also indicate that some funds in this supplementary budget have been identified for use at a number of 24/7 facilities that the department manages. Some of the additional funding continues to be spent on cleaning and screening to ensure that we comply with best practices. It will be a good reminder to Yukoners that the Department of Health and Social Services — and Continuing Care alone — has approximately 300 long-term care beds and more than 700 home care clients.

We continue to support the Yukon Hospital Corporation's COVID-19-related financial needs within the total COVID-19 allocation in this supplementary budget — the allocation of \$29,973,000. The hospital allocation is \$5,862,750, and that is being used for logistics, policy work, infection control, screeners, emergency department, lab supports, and other efforts.

Everything that we do in the Department of Health and Social Services is done to maintain and improve the well-being of Yukoners. I am proud to work with the individuals who are so dedicated to helping Yukoners in the helping profession and in helping the department.

I am very pleased to be here today to continue the debate with respect to the supplementary budget regarding the requirements for the Department of Health and Social Services in 2021-22.

Mr. Cathers: In rising to speak to the Health portion of the supplementary budget, I will note that I am planning to save most of the questions that I have for the department for later during debate on the main estimates for Health and Social Services. I would like to start with a few areas that are important ones.

Last fall, as the minister will recall, we had a fair bit of discussion in this Assembly about the fact that over one-fifth of Yukoners, according to the Yukon government's own numbers, do not have a family doctor. We had expressed concern about the government not reinstating the physician recruitment position that had previously existed. What I am asking the minister is: In the time since the Fall Sitting, can the minister please tell us what work she and the department have done on the issue of physician recruitment and the family doctor shortage?

Hon. Ms. McPhee: I don't see this as related specifically to the supplementary budget, but I'm happy to respond with information that I do have at my fingertips today. The *Putting People First* report did indicate that far too many Yukoners do not have access to a regular health care provider and, as we implement the recommendations from that report, we do remain committed to expanding access to primary health care services.

We are currently working toward opening a new walk-in clinic in Whitehorse. This initiative is just one piece of the work that we are doing to expand access to primary health care. The member opposite wants to characterize this as happening since last fall, and that is fine. We are continuing to do that work.

We don't expect that the provision of physicians in the territory, expanding nursing resources, and expanding the ability for individuals to have mental wellness workers and counsellors will be something — it will be an ongoing project; let me say it that way — because we continue to have need and expanded need. We continue to have a focus on the opportunities to make sure that Yukoners do have access to acute and primary care. *Putting People First* is focused entirely on that goal.

We do expect to — working with the medical community in the territory, we hope, in the very near future, to be able to

speak about a walk-in clinic that will be — have the opportunity to have that service available to Yukoners here in Whitehorse.

I can also indicate that we have made concerted efforts with respect to focusing on hiring nurses, nurse practitioners, and physicians with respect to providing additional services, recognizing, as the member has noted, the issues that we have with health care here in the territory — and, I think it's fair to say, across Canada. Our government is aware of the situation, and we have spoken to many Yukoners who have been impacted both in a positive way through the COVID process and also those who are ultimately concerned about having a family doctor assigned to them.

I can indicate that it is definitely an unfortunate impact of the pandemic that recruitment efforts have resulted in pressures here in the territory. This is an example: Between 2017 and early 2020, there was a five-percent vacancy rate among primary health care nurses within the Community Nursing branch. Certainly, we have a number that shifts from time to time but is higher than that.

We continue to explore options to connect Yukoners to primary health care services. That's the focus of this particular question.

We have the "find a family doctor" program that continues to work. In the last couple of years, we have matched more than 1,100 Yukoners with primary health care through that program. We're working to expand access to virtual care alternatives across the territory for individuals who will be able to have virtual access to physicians who will help them through their process and indicate that they will be able to provide prescriptions and other services that can be accessed by individuals who are here in the territory. We're working to expand that in the very near future. We've been working on that since the fall — that's the question.

As we continue, we are working to hire additional nurse practitioners. The money is in the budget for additional nurse practitioners to work in communities and in integrated primary health care clinics. We continue to meet with the Yukon Medical Association to address physician recruitment and retention. The Yukon Medical Association is given particular funding in relation to recruitment for physicians here in the territory. I know that they have contracted with a particular recruiter. We are supporting that process, not only financially, but through our work with the Yukon Medical Association, having the opportunity to work with them closely so that, ideally, issues of retention and recruitment will be something that we work on together.

I can also indicate that this is, if not the most serious priority, one of the top three. With the Canadian Medical Association — I have spoken and met with Dr. Katharine Smart, who Yukoners should know is the current president of the Canadian Medical Association from here in the territory. She and I have spoken about the priorities, not only here in the territory, but how those match with the Canadian priorities. Physician recruitment and retention is one of those top priorities, and we continue to do the work with that organization as well.

Mr. Cathers: Unfortunately, in that narrative, I didn't hear much in the way of specific actions, which is concerning because, as the minister noted, she referred to it as being a top priority for the Canadian Medical Association. This is also a top priority for Yukoners, especially the one-fifth of Yukoners who do not have a family doctor.

I would note, as well, that she indicated that the Yukon Medical Association has a recruitment position that government is providing them funding for. Our understanding, from talking to the YMA, is that they are funding that themselves through their own resources with no direct contribution from government. I would ask the minister if she could check on that. If the government is now taking credit for funding it without actually providing YMA funding, perhaps they would consider providing them funding so that they can continue the position beyond the limited term that it's in place for. Our understanding is that the Yukon Medical Association took that effort themselves with their own resources and that it is time-limited at the moment, due to the limitation of their resources. Perhaps the minister would like to check on that and update me, as well as the Yukon Medical Association.

Another specific area related to family physicians that I would ask — that I would note for the minister — is that, among the examples that we've heard from people — I will give one example of someone who contacted me about her father, a long-time Yukoner, who has been on the doctors list ever since it came out for the "find a doctor" program and has yet to have any success through it. The existence of that resource is of little comfort to somebody who has been on the waiting list for years and never actually getting a doctor through that program.

I want to ask specifically about the issue of Haines Junction. My colleague, the Member for Kluane, has raised this issue on behalf of constituents and about the interest, of course, of people in one of the communities he represents — Haines Junction — and seeing a doctor who could provide services there, as well as to the surrounding area.

Can the minister indicate whether the government has done anything specific related to the gap in Haines Junction?

Hon. Ms. McPhee: I can indicate that we are having ongoing discussions with the Yukon Medical Association about funding, and we will continue to do that important work with them. Building relationships and building partnerships is how we will be able to proceed with the important work of implementing *Putting People First* — of providing widespread and high-quality patient-centred health care for Yukoners.

With respect to the Haines Junction situation, I can indicate — and I will update this information if need be, but since being informed that the previous resident physician serving Haines Junction and the communities along the north highway would not be renewing their contract beyond April 12, 2021 — which was their choice to do so — the Department of Health and Social Services has been exploring options to ensure that residents have continued access to primary health care services there in that area. Government is committed to working with our partners to expand access to primary health care services so that Yukoners can access supports that they need near their

communities and in their communities to lead healthy and happy lives.

The department has been working with the Yukon Medical Association on this issue to identify a new resident physician, and an active recruitment process is underway. This includes a search both locally and nationally, as we do with all physician searches, with a position that is posted to a number of national recruitment forums.

We recognize that recruiting a resident physician in rural communities does sometimes take time. Individuals have to choose to move their lives to a smaller community, and a right fit, an important fit, in that community is what we are seeking. That is why we have worked to put interim supports in place while this search continues. Two Whitehorse-based physicians have been contracted to deliver virtual-care services to residents at least twice per week and have been providing supplemental in-person visits to the communities so that residents have continuity of care, having the same two physicians providing that interim service.

Mr. Cathers: So, with the shortage of physicians, one-fifth of Yukoners being without a family doctor is top of mind for many, many people right now. What I would ask is: With this area of physician recruitment and the doctor shortage, has the minister met with the Yukon Medical Association to discuss this topic, and if so, how many times has she met with them to discuss this topic since being sworn into her position?

Hon. Ms. McPhee: I appreciate that this topic is top of mind for the member opposite and for Yukoners. I know that it is top of mind for all Yukoners. It is certainly a priority for our government, and that translates into it being top of mind for us as well.

I can indicate that, yes, I have met with the YMA president and the new executive director on a couple of occasions. I can also indicate that the department's senior officials have monthly meetings with the YMA executive director and have just met recently with the entire executive.

But I can also indicate that those meetings have slowed at the moment because we are currently in negotiations with the Yukon Medical Association with respect to their ongoing contracts, and it is not appropriate for us to be meeting on all of those topics at the same time as those negotiations continue, but we continue to build our relations with the YMA and look forward to really fruitful results of the negotiations as well as all the projects that we are working on together.

Mr. Cathers: Another issue that is of great importance to people and has been made worse in fact by the pandemic is the issue of wait times for surgeries and specialist appointments. Some of the measures put in place here as well as in other jurisdictions upon which the Yukon depends have exacerbated this problem. We know — and have heard directly from officials, including from the Yukon Hospital Corporation last fall — that the wait times for many surgical and specialist procedures, as well as diagnostic procedures such as MRI, are longer than they believe is appropriate and longer than the Canadian standard.

I would ask the minister: Especially since the Fall Sitting, what action has she taken on this area, if any, since last fall?

Hon. Ms. McPhee: Thank you for the question. Our government continues to work with the Yukon Hospital Corporation and the Yukon Medical Association to address timely and appropriate access to specialty services, which the member is asking about with respect to surgeries. We are keen to have those services closer to home and, whenever possible, to reduce the need for Yukoners to have to travel out of territory for that service.

Yukoners can access specialty services in a number of ways. There are resident practitioners — so people who live here and provide that service — and there are visiting specialists. There are virtual visits and then, of course, there is medical travel. To date, our investments have resulted in improved wait times for multiple specialist services, including ophthalmology, pediatrics, psychiatry, and orthopaedics, including orthopaedic surgery. We implemented a plan that successfully reduced ophthalmology wait times in the Yukon, bringing down wait times for cataract assessments from 37 months to less than four months.

We have worked with the Yukon Hospital Corporation to build on the success of our resident orthopaedic program. The resident orthopaedic program has helped to further reduce wait times for orthopaedic consults and total knee replacements. In the fall of 2021, the resident orthopaedic program completed the territory's very first total hip replacement. Those surgeries have been continuing on a regular basis since that time.

Non-urgent services have been impacted by COVID-19, but we are hoping to see the end of that issue, and there will be some periods of time to catch up. The summer of 2021 outbreak impacted some specialty visits of medical practitioners that were going to take place in July. The need to reduce patient volumes and non-urgent surgical services were addressed then, but since that time, the Yukon Hospital Corporation continues to work with specialists to increase the number of visits and to use virtual care in the 2021-22 fiscal year to reduce wait times.

As noted, in dermatology, nephrology, internal medicine, rheumatology, and cardiology, services are provided for Yukoners here in the territory at a much more available rate than has been in the past. We are collaborating with the Yukon Hospital Corporation and the Yukon Medical Association to explore ways and to continue to improve the effectiveness in visiting specialty services by establishing wait-time benchmarks and developing strategies to reduce wait times. That work happening since last fall seems to be the focus of the questions — but ongoing work. This includes increasing the frequency of specialty visits, repatriating services to the Yukon when we can do so — as with the orthopaedic surgeons and the great team of orthopaedic surgeons who operate here in the territory — and by expanding the use of virtual technologies.

I will certainly, as a former patient of the orthopaedic team here in the territory, express my clean bias with respect to the amazing services provided by our surgeons here in the territory.

I can also note that this work is incredibly important and is supported, in addition to what I have described, to the increases that we have made with respect to medical travel. The amount that individuals are allowed with respect to reimbursement for people who need to travel for medical services out of the

territory has been doubled. Previously, it was \$75 per day but began on the second day. It has been doubled to \$150 per day and now people have access to that on the first day.

A person who needed to travel, in the past, for a two-day trip with respect to getting medical services outside the territory would have received \$75 with a two-day trip, and now they receive \$300. That is an incredible impact on Yukoners who are travelling for an often very stressful situation to obtain medical service outside of the territory and maybe very far away from their home community. The financial ability to support them does not reduce that stress, but in some cases, it will because individuals would not have had a proper place to stay or been able to afford that and may not have taken the trip based on the fact that the financial hardship would have been a concern for them.

I can also indicate that, with respect to medical travel, we have increased through our collaboration with partners outside the territory the places that an individual might go to have medical treatment. It has been primarily Edmonton, Calgary, and Vancouver, but there are additional places now where someone might receive medical services, and that also has a positive impact on Yukoners.

Mr. Cathers: Another issue that we've heard about in a number of areas is the impact that the amount of resources the public health campaign is directing toward the COVID-19 vaccination has had on other vaccines being available. There has also been a disconnect when, at times, the minister has indicated in this House that certain services were being provided by Public Health or by pharmacies when in fact that has not been the case. Tetanus, for example, was one that I had raised in a question and was told by the minister that it was being offered, yet, in talking to a constituent who had attempted to go where the minister indicated they could, they received a different answer and were unable to get the vaccination.

I would ask a several-part question in that area. The first is with regard to infants and children who had vaccinations delayed as a result of the focus on COVID-19. What is the status of those children? Are they now back on track for their vaccinations that were delayed? Secondly, could the minister please indicate what they're doing with regard to pharmacists and offering vaccinations at pharmacies there?

Hon. Ms. McPhee: I will leave the immunizations of children for a second and indicate that the work of the staff has been tireless with respect to redeploying to areas of urgent need in the response to COVID-19 and the pressures that it brought or brings. This includes COVID-19 testing, case and contact management, and confirmed cases as well as the delivery of an unprecedented, multi-stage vaccination campaign. The acting chief medical officer of health and the Yukon immunization program have provided guidance on how to prioritize the COVID-19 and non-COVID-19 vaccines while taking into consideration operational constraints and staffing ability. Based on that guidance, infant series and primary vaccinations had been identified as a high non-COVID vaccination priority, while travel vaccines, as an example, have been identified previously as a low vaccination priority.

Throughout our response to COVID-19, access to core pediatric vaccines has been maintained with infant series and primary vaccinations remaining available through the Whitehorse Health Centre. In some cases, infant series and primary vaccinations had experienced some delay, while still being administered as close to the recommended period as possible. So, there were some recognized delays. Although there have been some delays with the delivery of those publicly funded, non-COVID vaccinations throughout the pandemic, the Community Nursing branch has continued to deliver routine, publicly funded vaccines for children under five.

As an example, in December 2021, which is one of the biggest pressure months for vaccines — as we could all recall, as our teams were delivering both adult boosters and first doses to children aged five to 11 — the Whitehorse Health Centre maintained an average vaccination rate of 95 percent for children aged three months to 18 months. I think that this is incredibly important for Yukoners to know, not only because the service provided responded to the needs of children and families here in the territory, but because of the undying dedication of the men and women who work at that location and the work that they did to maintain the average vaccination rate of 95 percent for children aged three months to 18 months. This is a testament to the dedication and the hard work of the Whitehorse Health Centre team to infant care here in the territory.

We also appreciate the support of local pharmacists who have been delivering the seasonal influenza vaccine to individuals over the age of five. That occurred mostly in the fall, but there is still an opportunity for individuals to receive that vaccination at local pharmacies — and the shingles vaccine, also known as Shingrix, and the HPV vaccine.

It is certainly recognized by our government at the Department of Health and Social Services that the importance of continuing these vaccination opportunities is critical, even though it seems like our world, in the last two years, has been taken over by the concept of COVID vaccinations — and in many ways, it has.

Some school-aged immunization programs have been deferred or delayed to accommodate the redeployment of staff and the delivery of COVID-19 vaccines to children aged five to 11, which was determined to be the priority by the acting chief medical officer of health, in conjunction with the work she does with other doctors across the country. As the demand for COVID-19 vaccines has temporarily slowed, the department has had the opportunity to increase access to some non-COVID-19 vaccines. It is incredibly important that we get back on track with that.

Between March 28 and April 13, 2022, the Community Nursing branch will be offering school-based vaccine clinics to catch up on delayed school-aged immunization programs, including tetanus, diphtheria, and pertussis for grades 9 and 10 students, as well as HPV immunizations for grades 6 and 7 students.

Yukoners who require access to a vaccine, such as a tetanus shot on an emergent basis, should continue to access that vaccine through the emergency department. The call

should be made initially to the Whitehorse Health Centre to determine if that is available there as well. The travel vaccine program through Community Nursing is not currently available while staff are supporting other areas of our COVID-19 response. We're also working to deliver regular, publicly funded health programming. Travel vaccines are not publicly funded here in the Yukon, so they became the priority last on the list. Travel vaccines at the Whitehorse Health Centre are currently only offered to humanitarian workers and to international health care workers who are travelling to high-risk areas.

During the 2021-22 flu campaign, seasonal influenza vaccines were administered at the central vaccine clinic, at community health centres, and at pharmacies — as a reminder. Between October 2021 and January 8, 2022, there were approximately 12,346 flu vaccines administered here in the Yukon Territory. I hope that responds to the question.

Mr. Cathers: Another issue that we're aware of and the minister is as well — she will recall that there is an outstanding issue regarding pharmacies and certain medications that the government structure was covering, less than the cost of certain medications, that officials had committed to fixing and making good on those costs retroactively, as it was going to take some time for government to adjust their billing system. The last that we heard from pharmacists about this — this issue has been going on for a number of months and has resulted in hundreds of thousands of dollars that are at issue here.

Can the minister please update us on what steps are being taken to correct this and to ensure that businesses that undertook, in good faith, to provide certain medications, based on the request from government, are not left arguing with them over the cost of that or, in fact, carrying a balance that government has promised to pay them but not yet made good on?

Hon. Ms. McPhee: Thank you for the question. The member opposite is making reference to a situation with respect to an issue between the Department of Health and Social Services and local pharmacists with respect to dispensing a certain class of medication. We worked with the pharmacists to implement a short-term solution back in August 2021, while longer term solutions were identified.

Initially, we addressed the issue quickly with pharmacists on an interim basis. Then, throughout the fall of 2021, we continued to meet with pharmacists to be updated on the progress and the challenges that were related to the implementation of long-term solutions, and we are actively continuing to work to review the necessary system-level changes that will help us not have this issue again — the system-level changes that are required to resolve the issue, moving forward.

Until these changes can be introduced, an interim solution will remain in place. The process has been developed together to pay outstanding claim amounts to pharmacies, and as of March 7, 2022, the vast majority of these outstanding payments have been provided. I understand there may be one or two that are still in question, and we're working with the pharmacists to sort that out, awaiting some information from them to respond.

I just want to note that, while the Yukon was in a state of emergency, which we are no longer in, and for 30 days afterward — so, I guess we're still in that grace period — we have provided pharmacists with additional prescribing abilities so that they could extend many prescriptions to serve Yukoners and make that option available for them. We continue to work with pharmacists to explore options for that process beyond the state of emergency. It is not something that is easily done, but we're committed to that to make sure that the scope of practice for physicians — for pharmacists, sorry, and for physicians — here in the territory is the best it can be to serve Yukoners.

The issue specifically being asked about here is resolved, or it will be resolved in the interim, and a long-term solution is being worked on with the pharmacists. I am happy to report that that's the case.

Mr. Cathers: I do appreciate the answer provided and the information. I would just encourage the minister and deputy minister to double-check the status of this. As of a recent conversation with one of the pharmacists, my understanding was that it, in fact, was not as resolved as the minister's note indicated that it is — that in some cases, there still are significant outstanding amounts that are being carried by businesses — well into the six figures, I should note, is my understanding — and that the process for dealing with some of this was quite paperwork-intensive.

I will just leave it there. I'm sure I'm not going to get additional information from the minister, at this point. I am just asking her, the deputy minister, and other officials to look closely at the status of this and ensure that anything that was provided in good faith by pharmacists, based on their understanding with the Yukon government, is, in fact, made good by government.

Moving on to another area related to the pandemic, I would just ask if the minister could provide us with clarity on — there were additional amounts in COVID spending that we saw included within this budget and an additional request in the supplementary — if the minister could just provide more of a breakdown on that.

The second question that I will ask, while I am on the floor — if I had understood correctly from the information provided by officials, there were some amounts that were expected to be spent under the territorial health investment fund that were not expended in this fiscal year and are being carried forward to next year.

Could the minister just clarify if that is indeed correct and, if so, what the dollar amounts were and the reason for that being the case?

Hon. Ms. McPhee: I'll address first the question regarding the supplementary estimates that are before the Committee at this time. The increase requested by the Department of Health and Social Services is — I think, as noted in my comments earlier — \$5 million. I can provide the following breakdown. Of course, these are approximates, not to the dollar and cent. They have been allocated in the following way: \$1.5 million to the Yukon Hospital Corporation; \$1.5 million to the requirements for the cost of self-isolation in the territory; \$600,000 to the rapid-test implementation in

communities and Whitehorse; \$200,000 to communication supports; \$400,000 to the vaccination rollout, which is all kinds of responses to the vaccinations, not only here in Whitehorse, but elsewhere in the territory; \$300,000 for testing; \$500,000 as a contingency; for a total of \$5 million.

I'm also happy to turn to — to be clear, the proposed budget increase — and that's what is before the Committee today — and the additional \$5 million, should it pass, means that there is approximately \$30 million for the COVID-19 response in total for the 2021-22 budget. It is \$29,973,000.

I can also indicate, turning to the question regarding the territorial health investment fund, sometimes known as "THIF", that the Government of Canada budgets approximately \$6.4 million annually to be provided to the territory. They have permitted a \$4.3-million carry forward here in the territory from the 2021-22 budget into our current budget year for the purposes of responding to COVID and other health issues. Obviously, a very fluid time, and the THIF agreement with the Government of Canada has permitted this particular fund carry-over here in this year.

I should also indicate that, from that total number, which comes to \$10.7 million, historically, \$2.1 million of that is automatically allocated to offset the costs associated with medical travel.

I hope that helps the member opposite and responds to the question.

Mr. Cathers: Moving on to continuing care and particularly as it pertains to care of residents in continuing care facilities and family involvement, as well as the process for ensuring that, if there are concerns from family members about the care for parents or other family members, that there is the ability for this to be dealt with respectfully and appropriately and followed up on — I'm not going to get into too many details regarding an individual situation. I don't want to compromise anyone's health privacy, but as the minister will be aware, both she and I have been copied on correspondence from a constituent of mine regarding his father in continuing care.

There has been frustration regarding gaps in some personal care issues, such as hearing aids being dealt with in a manner that the son feels is appropriate and also frustration on his part with the response. Again, respecting the personal health privacy issues, I just want to describe enough that the minister is aware of what I am talking about, and I know she isn't going to be able to provide information about that particular case here, but my question is one generally.

I do want to note, as well, and recognize that, for staff in continuing care facilities, this has been a difficult time for them, as well, and there have been some gaps related to vacancies, the vaccination mandate, et cetera, but elements like that related to personal care can be quite important to the quality of life of seniors in a facility. It's important that, even if the reason that mistakes are being made is an understandable one, appropriate steps be taken to ensure that any quality-of-life issues are heard respectfully, dealt with promptly and appropriately, and that there is a resolution that ensures, ultimately, that seniors and others in continuing care facilities are receiving high-quality care and having their own unique personal needs met.

So, my question for the minister would be if she could just talk about what steps are currently in place to provide for family involvement in care, as well as dealing with family concerns about care and, secondly and most importantly, if the government is looking at additional measures to try to better ensure that these types of gaps in personal care don't happen on an ongoing basis.

Hon. Ms. McPhee: I should say that I appreciate this question. It reminded me of something that I wanted to say in relation to two questions ago, when the member opposite noted some issue with a particular pharmacist. We will certainly look into that, but I am hoping that the member opposite could send me a note or provide me with the business owner or pharmacist's name so that we can follow up directly, if they are able to do that. Also, the reference here to a separate individual's situation — again, I understand that officials in the department, if I have this right, are working with this individual family.

We prioritize family opportunities and family participation in care. It is so critical — something that I know of personally — but, certainly, so critical that the support from family, and even friends, is something that is a positive contributing factor to the mental wellness of our patients and clients in long-term care, or in hospital care of any kind, and that it certainly supports the medical professionals — the nurses, the doctors, the LPNs, and other care professionals who are providing service to individuals — that the family becomes a whole part of that process, and that becomes absolutely critical in the health and safety of individual elders, if that is the circumstance, and also in the ability for those folks to participate in the care of a loved one.

We are committed to ensuring that our residents and our staff in Yukon's long-term care homes are safe and well cared for. Nothing is done perfectly, but I think it's absolutely critical to thank and recognize our long-term care facilities. During COVID, we have not experienced the tragic circumstances that other places have had across Canada with respect to outbreaks in long-term care facilities. I think that not only do we need to be thankful for that, but we need to recognize the individuals who work so hard to help us make that a community reality. We are fortunate to have a high quality of care in our long-term care homes. Definitely, a thank you to the staff for their ongoing dedication and hard work.

I know that we have had lots of thank yous, whether they be during the media events with respect to reporting on COVID-19 and telling Yukoners what is happening or whether we have had tributes in this House — this very day — that say a thank you to the staff, but I think I can say from all members of this House a heartfelt, honest thanks for the dedication and hard work of these individuals, particularly for keeping our elders safe.

Our guidelines for long-term care continue to evolve, as the situation in the territory changes. We have population changes, we have a focus on *Putting People First* changes that will come in the future, and we are working to communicate with our partners, staff, families, and residents throughout this process.

Back in November 2021, more than 94 percent of long-term care residents had been fully vaccinated against COVID-19, and 79 percent of the residents had received their booster. I am sure those numbers can be updated now, and I will endeavour to have those numbers updated. Vaccination was determined to be a vital step in protecting Yukoners, inside or outside of long-term care facilities, and represents a huge accomplishment with respect to the Yukon's long-term care homes.

As of January 30, 2022, our government requires all government employees, including those who work in long-term care, to have two doses of the COVID-19 vaccine. This measure will continue as we go forward, the long-term care facilities being identified as places where vulnerable Yukoners reside, and as a result, the vaccinations will continue to be required.

We definitely took steps early on to protect the residents and the staff at the early stage of the pandemic, and that included limiting movement of care staff between different homes. We restricted visitors to only those providing essential care or essential end-of-life visits, and there was enhanced cleaning of high-touch surfaces, mandatory masking of all persons in the care homes and continuing care offices, mandatory screening of all persons entering the care homes, and screening of staff for COVID-19 symptoms.

We have resumed some programming and services now, when and where possible, in line with COVID-19 guidelines. Outside health care providers, such as private foot-care providers and physiotherapists, may enter long-term care homes with approved COVID safety plans.

I can indicate that caring for our elders is an absolute priority. Making sure that their families are connected to this process and included in decision-making going forward as well as the care plans for individuals is incredibly important.

I urge the individual's situation, which I won't speak about but I think that the member opposite is referring to — we welcome contact with the ADM of community care, and if that information needs to be provided to the member opposite, I am happy to do that to connect these individuals.

What I want to say, as well, is that cases are dealt with — because there always need to be policies and process, but cases, especially in health care, must be dealt with on a case-by-case basis because we must take into account all of the factors that are impacting an individual and their care. That opportunity for us to work with the family and to resolve issues that they have identified is an incredibly important way of managing files, people, and medical situations, but it's really about the care that the individual is receiving and the opportunity to work with their family to address issues that are identified. I welcome that. I know that the Department of Health and Social Services welcomes that approach.

If that is not what is happening in the situation noted by the member opposite, then I urge him to contact me for more information and we can make sure that this situation is being addressed properly.

Mr. Cathers: I do appreciate that answer and information. I would just note as well that — while I

highlighted one example that I thought the minister would know what I was talking about without me talking about individual details — it's not the only issue that we have heard with concern from someone about a family member in a care facility. Another individual has been in contact with both the Member for Watson Lake and me. I also just want to note that, in dealing with this, for staff in continuing care, we realize that it has been difficult and stressful for them. There have at times been gaps in staffing that may have impacted things, including that some of these mistakes may have been mistakes that no one there wanted to see being made either. I don't want to, in any way, assume bad intentions on anyone's part. I just am raising it as a matter — I think the minister seems to agree as well — that, when we're dealing with the care of seniors, if there are gaps in the care, including personal care, even if it is just a simple error of omission, it is important that government figure out how to respond to those concerns appropriately and ensure that the quality of care that is provided is there for the person who is depending on the system so that both their urgent needs and quality of life are served well in the facility.

I'm going to move on to another area related to government services and the other crisis or emergency that has been in play throughout the last number of months, and that is the substance use health emergency declared in the Yukon. Government has made some commitments around additional things under the substance use health emergency. A press release was issued at the end of January. But my first questions are: What is the current addiction treatment capacity here in the territory in the Sarah Steele Building and government programs? How many people are using that right now? Is there a wait-list for those programs? If so, what is that wait-list?

Hon. Ms. McPhee: I understand the member opposite to be asking about the withdrawal management services that are provided, as well as treatment — longer term treatment — that is provided at the Sarah Steele facility here in downtown Whitehorse. The withdrawal management is one aspect of the spectrum of supports and services that are available to individuals dealing with substance use. It is important to note — and I hope that every Yukoner who has a friend who is struggling, who has a family member who can help them or individuals who are struggling, hears this because it is so important to know that withdrawal management services is a 24/7 medically supported program that provides a safe place for people in withdrawal from substance use. Individuals can access withdrawal management services by calling Mental Wellness and Substance Use Services or by attending at the Sarah Steele location on Steele Street here in Whitehorse.

Services include medical assistance with withdrawal from substances, psychoeducational programming, and a referral to ongoing treatment, counselling, social work supports, or self-help groups and other support services, if any of those are appropriate for an individual. Withdrawal management staff help facilitate connections to additional supports, including counselling services and inpatient treatment, where appropriate. Withdrawal management services staff can also refer clients to the referred care clinic, if they might be interested in opioid treatment services that take place at the

referred care clinic. There is no wait-list for withdrawal management services, as it operates on a "first come, first served" basis due to the urgent nature of the care that is required.

If an individual is planning to leave their community for this service, they may call ahead and staff will reserve a bed for that client or provide them with an estimate of bed availability, if that is an issue. In the event that all spaces are occupied, staff will work with clients to build a safety plan. Clients are referred to other appropriate supports, which might include the hospital, if necessary, the Whitehorse Emergency Shelter, or client-generated support networks. The key here is attempting wraparound services to support the person who is in crisis.

Within the withdrawal management services, there are currently — this information I have would be from about a week ago — 12 out of 14 beds in use for adults and four beds are in use for youth. Mental Wellness and Substance Use Services opened the interim support program, which is provided at the Sarah Steele Building, which provides 10 post-withdrawal treatment beds as well. The program is running again due to the current situation with respect to public health, as well as the current substance use health crisis and emergency. That program provides stabilization and programming for clients who face homelessness or other socially marginalizing challenges.

I have to say that I am so proud of the services that are provided. I know how hard the members of the Mental Wellness and Substance Use Services unit at the Department of Health and Social Services, and the individuals who provide the withdrawal management services, are working to address and to support individuals who find themselves in this situation and in need of these services.

I thank them, and I encourage individual Yukoners who might be needing such service to go to the Sarah Steele Building, call, go to your health clinic, if you're in a community, ask for help in getting connected to these services. They are there to support Yukoners, as just one piece of the response to the substance use health emergency here in the territory.

I'll leave it there but hope to be able to speak more about the services available in response to the substance use health emergency.

Mr. Cathers: Just returning briefly to the topic of continuing care, can the minister indicate what the current occupancy is at Whistle Bend Place, as well as just generally within the Yukon government's continuing care facilities? How many beds are made available or, if there is a waiting list, what is that current status right now?

Hon. Ms. McPhee: I think that is a really important question for Yukoners. I know that the demographic trends show that, across the Yukon and Canada, the population is aging, and we certainly know that the population in the Yukon is increasing. In the coming years, we anticipate that more Yukoners will begin to seek access to long-term care services, and the aging-in-place action plan does guide our planning as we work with the seniors community and elders to ensure that Yukoners can access the supports that they need to live safe,

independent, and comfortable lives in their homes or home communities for as long as possible.

We do also recognize Yukon's aging population. It is important that we work collaboratively with our partners — including municipal, federal, and First Nation governments, the private sector, non-governmental organizations, and community groups — to implement the aging-in-place action plan to ensure that seniors' needs are met. At this time, there is no ongoing or permanent wait-list for long-term care. As of March 10, which was about 12 days ago, there are 253 permanent long-term care rooms in the Yukon and 24 respite rooms. On average, there is a total of five and a half admissions to long-term care each month, and there is no wait-list. There is a total of 121 beds at Whistle Bend, because one of the parts of Whistle Bend has not been fully utilized yet; there has not been the need to do so.

Yukon's long-term care homes, of course, offer various levels of support to residents as part of the territory's continuum of care. Our ongoing investments into home and community care also positively impact the lives of Yukoners by increasing supports so that more Yukoners can stay in their homes and their home communities. I am very pleased with the work that has been done, and I know that we can reinvigorate that, if COVID stays at bay. We will continue to collaborate with individuals and their families, and their community partners, to ensure that Yukoners receive the right care and the care that aligns with their own philosophies, with their own care plans, and with our home first philosophy.

We have to, of course, look forward, taking into account the increase in the size of Yukon's aging population, and we must continue to plan to meet those needs. As I noted, one house at Whistle Bend is not yet open, and once that house is opened, there will be an additional 12 rooms expected to become available, but as of March 25, as I said, there is no wait-list, and there are 25 unoccupied, permanent long-term care rooms.

This number represents just a snapshot in time; it changes all the time based on new admissions or discharges or individuals who are changing their care plans, but that's the information that I have in relation to Whistle Bend.

Mr. Cathers: Just moving on to the area of the medevac program, could the minister please provide the numbers for the number of medevac flights, both in and out of territory? And specifically, as she will likely know, at the briefing, I asked if we could get a breakdown indicating the number of flights within the territory that have been required to dispatch EMS personnel from Whitehorse to rural communities that had gaps in their coverage, especially those where gaps in coverage were the result of the vaccination mandate causing some EMS volunteers, who weren't comfortable getting vaccinated, to be in a situation where they chose not to provide service instead, when faced with the choice, of getting the shot that they weren't comfortable taking and needing to do that to comply with the government's vaccination mandate.

So, the questions again: the number of medevacs in total, both in and out of territory, as well as a breakdown on the flights to dispatch EMS personnel from Whitehorse to rural

communities, particularly those that were the direct result of the vaccination mandate.

Hon. Ms. McPhee: I appreciate the question. I know that the member opposite asked this question at a briefing with respect to this budget, and I appreciate that.

I'm still gathering information with respect to total medevac flights. I can provide the figure of — the one that I have been provided with right now is 367 medevacs inside the Yukon Territory between April 1, 2021 and last Friday, which was March 18, 2022. That number could well change before the end of the fiscal year, which is March 31.

I can also indicate that work is ongoing to respond to the question about whether or not there has been any occasion where individuals in communities needed to be supported by EMS workers through Community Services. That's a job that we are doing as the Department of Health and Social Services with the Department of Community Services to determine that figure.

Of course, there are ongoing conversations as well with how we have been supporting our communities throughout the territory and how that has provided service to Yukoners throughout the pandemic.

I hope that figure — the one I do have — is of assistance to the member opposite. The other information that I am seeking in response to that — let me just see if I do have a bit more information.

By comparison — this might be helpful — in fiscal year 2020-21, there were 1,931 out-of-territory medical travel cases and 3,379 in-territory cases. That's medical travel, not necessarily medevacs, but it might give some scope to the member opposite.

Due to COVID-19, there was a drop in medical travel cases for non-urgent care. We will continue to ascertain the numbers, not only of medical travel cases here in the territory and outside the territory, but those that are assisted by medical evacuation.

Mr. Cathers: I would just appreciate some additional information. For the medical travel numbers that the minister cited, I appreciate her providing those, but there is a significant difference in the program — whether it's non-urgent travel via a carrier such as Air North and Air Canada or whether it is urgent medevac care provided by Alkan Air. Those two numbers are both fairly important to understanding this issue. How many people are being urgently sent out of territory on a medevac flight versus how many are being sent out for non-urgent medical travel? I look forward to her providing the other information when she is able to.

Hon. Ms. McPhee: Yes, these are figures that we will ascertain and I can provide them to the member opposite. Thank you.

Mr. Cathers: I appreciate that commitment from the minister.

I would just note — again in the area of the vaccination mandate — one number that I don't believe we have heard yet in any government figures is the number of staff at continuing care and long-term care who are placed on leave without pay. Can the minister please indicate what that number is — of staff

there who were placed on leave without pay due to the vaccination mandate?

Hon. Ms. McPhee: I appreciate the question. I cannot provide the exact figure with respect to individuals on leave without pay who otherwise work at continuing care. Of course, at this point when individuals will soon be welcomed back to their employment in certain areas across the territory, we must be careful not to break that number down too closely, but I do have some information that may be of assistance to the member opposite. As of March 7, approximately 93 percent of all department staff — so just Department of Health and Social Services — completed their attestations for the COVID-19 vaccine.

So far, seven percent did not complete their attestation, which represents approximately between 115 and 117 employees throughout the department who have not done the attestation. The vast majority of those are auxiliary-on-call or casual employees.

Beginning on April 4, 2022, the vaccine attestation requirement will remain in place for employees, contractors, or volunteers who work in residential high-risk settings and designated Government of Yukon-operated settings.

We're working to ensure that the department's essential work continues. Throughout our response to COVID-19, Health and Social Services has redeployed staff to support the COVID-19 response and to ensure the delivery of essential services while mitigating the risks of disease.

Government of Yukon employees have previously had the opportunity to complete a skills inventory survey. As needed, we can explore options using the survey results to redeploy resources that are available government-wide. The individuals who have been placed on leave without pay as a result of the vaccine mandate — as members know and as Yukoners hopefully know — will be welcomed back to work as of April 4, 2022. The government will be working with individuals who are not vaccinated or have not completed the attestation that they are vaccinated in relation to where they are employed. We do not expect that to be an excessively large number of people.

In the Department of Health and Social Services, we have the largest number of employees in the department. We will work with each and every one of them, hopefully, to make sure that they are welcomed back to work in a safe environment.

Mr. Cathers: I do appreciate the information the minister provided.

The minister also indicated that employees would be welcomed back to work on April 4, but we had understood from the comments made by the Premier previously that there are exceptions to those who would be welcomed back. The minister may correct me if I'm wrong, but I had understood that the exception included employees in long-term care.

I would just ask the minister to provide a further breakdown of how many employees — and which areas the government does not expect to be allowing employees to return to on April 4 if they have not completed the vaccine attestation.

Hon. Ms. McPhee: Thank you for the questions. I think that all of those things, as noted by the member opposite, are in

fact the case. Let me just say it this way: I cannot provide you with the number of individuals who are employed by the Department of Health and Social Services and who work in long-term care and are currently on leave without pay, but I can assure the member opposite that these individuals will have already received letters through the Public Service Commission to indicate — if they are working in a particular high-risk location, which long-term care facilities are — if their skills can be redeployed elsewhere. That is the work that is currently ongoing. That is what I can say about that.

What I can say is that, as of April 4 — and I think that this is clearly what the member is asking about — COVID-19 vaccination will continue to be required for employees, contractors, and volunteers who work in high-risk settings in the Yukon Territory. High-risk settings include long-term care homes, residential substance use programs, hospitals, shelters, residential care for children and adults, correctional centres, Yukon government-operated community health centres, and Yukon government-operated public health clinics, including the Referred Care Clinic. This requirement will apply to current workers, as well as new workers, in these settings.

In non-governmental high-risk settings, employers will continue to be required to implement policies for employees, for contractors, and for volunteers to be vaccinated, as appropriate, for their settings. An example might be someone who, through their work in this situation of non-governmental, high-risk settings, is in contact with individuals who are at high risk; then they would need to be vaccinated.

If their work at that same organization does not involve contact with those individuals, then they would not need to be vaccinated if that's what the policy determined at each of those places.

The clear purpose and focus of this is that individuals who are at high risk or reside in high-risk settings or are getting services in high-risk settings will be protected to the very best that we can. The vaccination requirement in these settings remains in place to stop the spread of COVID-19 and protect the most vulnerable Yukoners who are at risk of severe health outcomes if they were infected with COVID-19. Vaccine appointments can still be made online at yukon.ca/this-is-our-shot. Whitehorse residents can also call 1-877-374-0425 to arrange a vaccination appointment. Residents in rural communities can call their local health centre to book an appointment or find clinic dates and times online at yukon.ca.

I think that is what I can say with respect to responding to this particular question.

Deputy Chair: Do members wish to take a brief recess?

All Hon. Members: Agreed.

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

Recess

Acting Chair (Mr. Hassard): Committee of the Whole will now come to order.

Mr. Cathers, please continue.

Mr. Cathers: The next question that I have for the Minister of Health and Social Services is regarding the government's plans to develop a health authority. As the minister probably knows, I had raised this with the Premier and he had indicated that it would be better raised with the minister.

So, I would ask the minister, particularly with regard to the role of health professionals and their representatives in the development of this: First of all, what efforts have been made by the government — by either the minister or the Premier — to reach out to the Yukon Medical Association, the Yukon Registered Nurses Association, and other health professionals about their involvement in this process? Secondly, what role or what structure will there be for oversight of this? I understood from officials that there would be an oversight body. Can the minister clarify whether health professionals will be part of that body? If so, what will that structure be?

Hon. Ms. McPhee: Our government is committed to establishing a health authority as outlined in the *Putting People First* report. I should also note that the Yukon Territory is the only jurisdiction, with the exception of Nunavut, that does not have a health authority, so health authorities are a common practice here in Canada.

We have now an additional deputy minister in place within the Department of Health and Social Services to oversee the creation of the health authority and the transfer of the territory's health services to a health authority. This is an extremely long-term project; let's make that particularly clear.

The other thing I want to make absolutely clear is that yes is the answer to the question asked by the member opposite, which is: Will health professionals be involved in the creation and the work that goes into designing, building, and implementing a health authority? Yes is the answer to that.

In the *Putting People First* report, the independent expert panel recommended establishing "Wellness Yukon" — that is what they called it — a new arm's-length statutory agency that would deliver a range of health and social services. This is in *Putting People First*. This is one of the recommendations in *Putting People First*. We have accepted all of the recommendations of *Putting People First*. Work is beginning on this initiative.

The health authority may also contract with NGOs or other providers to deliver some services. This is the future of health care here in the territory. In response to the *Putting People First* report's specific recommendation 1.2, as part of our commitment under the 2021 confidence and supply agreement to implement *Putting People First*, which was happening in any event, we are working on policy options to establish a health authority in the Yukon Territory.

A health authority will take significant time to develop. Preparatory work on developing a legislative plan, which is the first step in creating a health authority — a statutory body, a legislative plan, identification of the policy issues — is required and is beginning. Development of legislation to support the creation of a health authority in the Yukon is a priority for our government and the first step in this process.

Government-to-government work with Yukon First Nations is an essential element of system transformation, and

the Government of Yukon is committed to working in partnership with Yukon First Nations. We have initiated discussions with Yukon First Nation governments to design a structure that will support the development of a shared set of principles to guide the system change forward as well as collaborative planning, priorities setting, and decision-making. We have initiated these conversations, including through discussion at the recent Yukon Forum — I think a couple of weeks ago. I made a presentation at that forum and great conversations were had with Yukon First Nation leaders. Further discussions await the finalization of the partnership structure with Yukon First Nations.

The first step is to concentrate on a statutory instrument that will give life to a Yukon health authority. In order to do that, first discussions are happening in order to finalize the partnership structure with Yukon First Nations. That is the next step. Through that work, we will ensure that we work closely with all affected partners in health care, including the Yukon Medical Association, unions, the Yukon Hospital Corporation, health care providers, and Yukoners who access health services. Their contribution will be built into this process that I have just described.

All jurisdictions across Canada, as I have noted, except Nunavut and Yukon, have some form of a health authority. We will be working to see what they have that responds to their communities and how that might be of assistance here in the territory. The establishment of a health authority is foundational to many of the recommendations that are in *Putting People First*. We have accepted that report and all of its recommendations.

Moving the service delivery outside of government, which is anticipated to be the function and purpose of a health authority, will allow for increased agility and accountability in service delivery and for the government to focus on its oversight function. We are considering a number of legislative options that will support the comprehensive health authority for the Yukon Territory, and that work is just, as I have said, beginning.

It is incredibly important to note — and I have said it earlier — that the preparatory work on developing a legislative plan, which is the first pillar in producing, developing, and implementing a health authority, is underway, but the legislative plan and the identification of policy issues is just beginning. That work must be done in order to determine what the piece of legislation will look like, what authority it will have, and how it will create a health authority here in the Yukon Territory. This is extremely exciting work. It is ultimately designed to provide better care, to provide wraparound, people-centred services, and to provide individual Yukoners with medical care and medical services going forward that will respond, in their entirety, to the services that Yukoners need.

We have had the independent panel tell us what that looks like. We have had amazing input and engagement with Yukoners and ultimately wonderful research and determination as to how we can build a path forward. *Putting People First* is that path forward. A major part of that is the health authority. I am pleased to have been able to provide this information today.

Mr. Cathers: The minister said yes in answer to my question but then talked about something different from what I had actually asked. So, just to clarify, my question was: We understood that there was going to be an oversight committee for the development of the health authority; will health professionals be part of that oversight committee?

Hon. Ms. McPhee: I think that I have answered, but I am happy to clarify. I think the words “oversight committee” is something that has been used by the member opposite in the question. What I have described is a collaboration between Yukon government and Yukon First Nations to determine what the process will be and what the structure will look like. Ultimately, it could be called an “oversight committee”, but I don’t think that it will. I think that we are working to finalize the partnership structure with Yukon First Nations, and as I have said, through this work, we will ensure that partners in health care, including the Yukon Medical Association, unions, the Hospital Corporation, health care providers, and Yukoners who access health services, will all be involved at every stage of the discussions to determine how the legislation will work and ultimately how we will implement this.

So, I don’t think that we have named, yet, an oversight committee, because I can assure you that the structure is not yet built. So, my answer is yes — health care professionals, the Yukon Medical Association, and other stakeholders who will be affected and involved, with respect to building a Yukon health authority, will be at the table — absolutely. That is my answer — yes.

Will they be part of an oversight committee? We don’t yet know that we’re having an oversight committee. Those are words that have come from the member opposite. I’m just not able to agree that this is the name of a committee or the name of any organization that will be involved in this, and I don’t think that’s fair.

So, yes, health care professionals will be involved in the development and implementation of a Yukon health authority.

Mr. Cathers: If I was using the wrong terminology, I apologize, but I would note for the minister that, when we’re only provided verbal information and are not given information on what the government is currently sharing with First Nations or working on internally, we are left with limited information and have to try to reflect that in the best way that we can, based on the government keeping its cards held rather close to their chest — to use the analogy.

It is unfortunate that, with something like this, they haven’t simply chosen to be more forthcoming. I would ask the minister if she would agree to share the text or PowerPoint presentation that she made at the Yukon Forum — whatever format that was in. I don’t know whether it was a PowerPoint presentation, text, or some other format, but if she would agree to share that with us, that would be helpful.

In the interest of allowing the Third Party time to ask questions, as per a conversation, at this point, I will turn the floor over to the Member for Vuntut Gwitchin.

Hon. Ms. McPhee: Thank you for that last comment. I think that’s why I’ve made so many references to *Putting People First*. The recommendations in *Putting People First* are

what are being complied with by government as we work through this process.

I will consider the question about the presentation or providing more information. I think it’s certainly available, and I don’t have any trouble with that, so I’ll just look into that request.

Ms. Blake: The first question that I had was in response to the COVID testing, or rapid testing, available for my riding of Old Crow. I’ve heard from citizens in the last week or so that there have been challenges in accessing rapid tests in the community, not knowing where to pick up the test in the community or who to call. Also, I was wondering, with Old Crow being a smaller community, if there is consideration of sending PCR testing up there as well.

Hon. Ms. McPhee: Thank you very much for the question. My ministerial advisor, I note, has responded, but I’m sure that the member opposite has not yet had an opportunity to see it by e-mail.

I’m happy to confirm that, when this came to our attention, we looked into it right away this morning. We understand that rapid tests are to be available at the Vuntut Gwitchin health centre, not the YG health centre, but we can confirm that 872 tests were sent to the Vuntut Gwitchin government. Our team at Health and Social Services has now confirmed that the shipment was delivered to the Vuntut Gwitchin government and will be distributed as they see fit and will direct. They are currently being prepared for distribution. An additional 250 tests were provided to the school, and they are also being distributed through the school.

Ms. Blake: I thank the minister for her response to my question. Just to clarify, we don’t have a Vuntut Gwitchin health centre in the community, so I’m wondering if you were referring to the Vuntut Gwitchin government health and social department.

Hon. Ms. McPhee: I am sorry; that was probably my misstep. I understand that they will be distributed through the Vuntut Gwitchin government at the main administration building.

Ms. Blake: I thank my colleague for the questions that he brought forward. He echoed many of the questions I had noted down. One of the follow-up questions that I had was with regard to the health authority and with the presentation that was done at the Yukon Forum to the chiefs. I am wondering if there are any plans in the near future for the minister to connect with the First Nations directly to see if there are any chiefs who would like to have a direct conversation regarding a health authority and any concerns that they might have.

Hon. Ms. McPhee: Thank you for the question. I can indicate that, at the Yukon Forum, the presentation was well-received, I will say. I am never interested in speaking on anyone else’s behalf, but it was a positive conversation. We followed up. I think that a letter might have gone out to each chief and council before the Yukon Forum, and then we followed up with one following the Yukon Forum to obtain their response on how we want to work together going forward to determine this process. I understand that they have committed to getting back to us in the near future. We will proceed with this work.

I can also indicate that one of the requests — and we are happy to comply — is that we will visit each First Nation in the territory with respect to the specific issue and work with them on how they can best be engaged throughout the process.

I have high hopes that the process and the opportunity that was taken with respect to the *Child and Family Services Act* could be something that we continue for the purposes of having engagement on the health authority legislation and ultimately the health authority itself.

Ms. Blake: I wanted to go back to the question regarding COVID testing availability in the community of Old Crow. In my home community, there are a lot of folks who rely on the Internet to access information about where to get whatever service they are looking for, and I have a printout off the Yukon government website on where to pick up a COVID-19 at-home test. I notice that Old Crow is not listed on there. I am wondering if Old Crow will be added to the list, and if so, how soon will that happen?

Hon. Ms. McPhee: Thank you to the member opposite for bringing that to our attention. Of course, it will need to be updated, and I think that it is an excellent reference to the fact that lots of folks in Old Crow do access information in this way. We will update that website to include the information that I provided today — probably not the number of tests, but certainly where they are available — and that will be completed — I am told that it can be done by tomorrow and I will request that it be done by tomorrow.

Ms. Blake: I thank the minister for that response.

I think the remainder of my questions I will hold onto for Committee of the Whole, because there are a lot of issues that I want to bring forward from my riding that I have been hearing from citizens. I have been travelling to Old Crow regularly, at least once a month since coming into this position, and meeting with citizens in the community and hearing concerns that are related to health and social services.

Some of the concerns that do come up are the need for ambulance services in the community, medical equipment at the health centre, supports for the staff at the health centre when they deal with traumatic experiences and death in the community. Part of that support for staff at the health centre is to decrease the impacts of vicarious trauma with situations that staff encounter. There have been questions that come from the community in regard to access to the Dawson hub, because right now, the service is being provided through one counsellor from the mental wellness service unit here in Whitehorse, and there are questions about how to maintain the connection and relationship with the staff at the Dawson hub.

There have been many concerns from citizens who have asked about optometry and dental services being available in the community. In my last trip to Old Crow at the end of February, we had a visit with a citizen, and he was taping his glasses together while we had a visit; there's a definite need for that service in the community.

I have lots of questions in regard to addiction support for citizens in the community. We have citizens who are on different — I guess different places in their journey, when it comes to dealing with addictions or accessing support services

— whether they're returning from treatment or pursuing treatment or trying to maintain sobriety and after-care supports, availability of local resources, such as reading material, videos, access to AA meetings and NA meetings in the community.

I just wanted to bring these issues forward now so that it's on record and also so you know that I'll be asking questions about these in Committee of the Whole. There are lots of concerns from our elders about respite care, home care, medication — med management — and also foot care and palliative care support for citizens in the community. Our community has experienced a high rate of suicide in recent years, and there are questions from youth and elders about what supports are going to be put in place, or could be made available, when it comes to talking about suicide and suicide prevention in the community.

There are questions about trauma regarding situations we see in the community; supports for families and those impacted by trauma or when there is death in the community; increased access to social workers in the community, because right now, we have the visiting social worker who is not always there when emergency situations arise; access to pediatric services, which is, I think, a follow-up to a letter that came from a citizen; domestic violence supports for citizens in the community; grief and loss support.

We have lost citizens to the opioid crisis and other forms of traumatic deaths, and our community feels there is just no time to process the grief or loss before another death happens, especially for our children and youth who are losing their parents, and also questions regarding access to detox and treatment services here in the territory.

Right now, we have some citizens accessing treatment services outside of the territory through funding agreements with the Council of Yukon First Nations and the feds, I believe. They are coming home to no after-care support. With Old Crow, there are limited services because we are an isolated community. The services that are available to our citizens primarily come from the First Nation, which could be limited when we're dealing with capacity issues. Those are some of the questions that I will bring forward in Committee of the Whole.

Deputy Chair (Ms. Tredger): Is there any further general debate on Vote 15, Department of Health and Social Services?

Seeing none, we will proceed to line-by-line debate.

Mr. Cathers: Pursuant to Standing Order 14.3, I request the unanimous consent of Committee of the Whole to deem all lines in Vote 15, Department of Health and Social Services, cleared or carried, as required.

Unanimous consent re deeming all lines in Vote 15, Department of Health and Social Services, cleared or carried

Deputy Chair: The Member for Lake Laberge has, pursuant to Standing Order 14.3, requested the unanimous consent of Committee of the Whole to deem all lines in Vote 15, Department of Health and Social Services, cleared or carried, as required.

Is there unanimous consent?

All Hon. Members: Agreed.

Deputy Chair: Unanimous consent has been granted.

On Operation and Maintenance Expenditures

Total Operation and Maintenance Expenditures in the amount of \$5,000,000 agreed to

On Capital Expenditures

Total Capital Expenditures in the amount of nil agreed to

Total Expenditures in the amount of \$5,000,000 agreed to

Department of Health and Social Services agreed to

Deputy Chair: The matter now before the Committee is general debate on Vote 55, Department of Highways and Public Works, in Bill No. 203, entitled *Third Appropriation Act 2021-22*.

Do members wish to take a brief recess?

All Hon. Members: Agreed.

Deputy Chair: Committee of the Whole will recess for 10 minutes.

Recess

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

The matter now before the Committee is general debate on Vote 55, Department of Highways and Public Works, in Bill No. 203, entitled *Third Appropriation Act 2021-22*.

Is there any general debate?

Department of Highways and Public Works

Hon. Mr. Clarke: I would like to take the opportunity to introduce my officials. To my right, I have Deputy Minister McConnell, and to my right, Deputy Minister Richard Gorczyca. I have some brief introductory comments.

I'm pleased to speak to you about the Department of Highways and Public Works supplementary budget for the 2021-22 fiscal year. This is a large and diverse department. We have a variety of divisions, branches, and agencies that provide central functions to the government as well as direct services to the public. With all these things to manage, we must make difficult choices with our spending so that we can provide the best possible service to Yukoners.

Despite a high level of care that goes into planning our budget, it is impossible to predict every cost. The supplementary budget allows us to address those unexpected costs and continue to provide top-quality services.

Highways and Public Works is expecting an increase of \$3.556 million to our 2021-22 O&M costs. I would like to provide some details of those expenditures.

As you all know, this year we experienced unusual weather events. Some were even record-breaking. Not only did it impact us in the winter with an increase in snowfall, but also in the spring when the melt caused major road washouts. We were required to increase the department's budget by an additional \$407,000 to maintain our roads and repair the damage from the

washouts. This is one example of how unanticipated weather events can significantly impact the department's budget.

Another impact to our budget this year was the rise in fuel costs and electrical costs, which increased the costs of heating our many buildings.

Unforeseen costs can come from a number of things, but perhaps the most significant was the pandemic. From the perspective of Highways and Public Works, our aviation industry was hard hit when the pandemic began and it continues to require our support. Through the essential air service program, we have provided an additional \$2.4 million to continue supporting the Yukon aviation industry. Those expenditures are 100-percent recoverable from Canada.

While we saw an increase in the O&M budget, we saw a commensurate decrease in the capital budget. This was due to a decrease in spending in this fiscal year on the Dempster fibre project. Due to weather and material availability, certain aspects of the project could not be completed last year, but the project is still on track. So, the net sum sought in the supplementary budget for Highways and Public Works to receive legislative appropriation is \$956,000, which is quite a modest number, in my view, in contrast to the \$355-million total budget.

As I wrap up today, I would like to reiterate that our department performs a significant range of services. The work that we do impacts all Yukoners, the work that we do is important, and we take pride in doing this work well.

Thank you for your time, Deputy Chair, and I look forward to any questions.

Mr. Hassard: I would like to thank the officials for being here today, as well, assisting the minister in this little exercise that we have today.

I have a couple of questions regarding contracting. Highways and Public Works recently put out RFQ 2022-2-1366 for vegetation control. I am curious why Highways and Public Works has taken to doing RFQs for something like vegetation control. Normally, this would be used in larger or more technical types of tenders. So, I am just curious if this is a new direction that the government is taking — if we can anticipate RFQs for more projects — or, I guess, generally, what direction is the government taking?

Hon. Mr. Clarke: The Yukon government has implemented a roadway safety improvement program designed to make Yukon roads safer through brushing, improved lane markings, removing hazards in the right-of-way, and installing and maintaining more roadside barriers. The government is ensuring that Yukoners have safe roads to travel on throughout the year.

Since 2019, over \$15 million has been allocated to the programs. The department has brushed over 2,100 kilometres along Yukon highways, installed over nine kilometres of new barriers, and painted over 2,600 kilometres of highway lanes. Some of the considerations that all members will be aware of is that wildlife interactions represent a real danger for drivers in the Yukon. Frequent brushing allows drivers to better see wildlife crossings and help prevent collisions. Brushing also

helps to keep signs visible, decreases snow accumulation and drifting, and improves roadway drainage.

We have also had active engagements with the general public with respect to brushing and roadway safety improvements. In July 2021, Highways and Public Works sent 698 letters to property owners who are nearby upcoming vegetation control work. The letters directed owners to an online platform that mapped the locations where vegetation control may be taking place, noted the specifications of plant vegetation control, and also explained the benefits of vegetation control.

With respect to the specific question that the member opposite asked with respect to whether future brushing contracts would be proceeding by way of an RFQ, we can certainly return to the member with a response during Committee of the Whole with respect to the main estimates, as there is no request for additional funds with respect to this program in the supplementary budget. I look forward to the future discussions with the Member for Pelly-Nisutlin, including an answer to his question.

Mr. Hassard: I was hoping that I would be able to get an answer for contractors who have been asking me this question, without having to wait for weeks to come. I hope that the minister isn't offended, but I have trouble taking him at his word that he is going to get back to me with that information, because last fall, when I stood here in the House and asked about what Highways and Public Works was doing about aggregate for the Teslin bridge project, he promised that he would get back to me before the House rose, and I still haven't received a response from that.

So, even though it is not in the supplementary budget, maybe today he can give me an answer and tell me where that aggregate is coming from.

Hon. Mr. Clarke: I just had an update from my officials with respect to the brushing contract — and trying to be responsive to the Member for Pelly-Nisutlin. Going forward, the purpose of the RFQs and the brushing control contracts is to create a qualified source list. I'm advised that there is an information session on this topic this upcoming Thursday. As I indicated, I can likely provide some additional information in future discussions in Committee of the Whole on the main estimates, but that is what I'm advised by the department on the direction that they are proceeding with respect to future brushing and vegetation control contracts.

On the other matter, with respect to the Nisutlin Bay bridge and with respect to the aggregate, what I would say right now is that, as the member opposite will know, the Nisutlin Bay bridge is a critical link along the Alaska Highway. In the spring of 2019, the Yukon government and the Teslin Tlingit Council signed a project charter for the bridge replacement. Through the project charter, we are working together to provide a safe, reliable structure that can accommodate an increase in traffic while also improving access for pedestrians and cyclists.

This project will provide a significant, positive economic outcome for the territory, local businesses, and the community of Teslin. As I have said previously, a tender was posted on

October 13, 2021 for two pre-qualified contractors and closed on February 3, 2022.

A proposal evaluation and additional steps are in progress. This will take some extra time and effort, given the complexity of the project. To allow us this time, we have extended the irrevocability period for an additional 30 calendar days until May 4, 2022. Discussions continue, engaging the Teslin Tlingit Council, the Village of Teslin, the public, and specific stakeholders on this project as it moves forward.

As I indicated previously in the House, the prices have come in higher than anticipated due to current global circumstances and the high premium on steel and other materials. We are in the process of securing options to secure additional funding needed to award this contract; however, awarding this contract is certainly a high priority for us, but we must also do our due diligence to evaluate whether we are making the right decision on behalf of Yukon taxpayers before we proceed with this award.

Part and parcel of the award and the additional benefits that we hope will accrue to the Village of Teslin, the Teslin Tlingit Council, the public, and specific stakeholders will presumably include the aggregate contract for the new Pelly-Nisutlin Bay bridge. That is all part of the discussions that are taking place with respect to the qualified contractors right now, so it would be premature to discuss that contract right now.

Mr. Hassard: The question was: Where was the aggregate going to be sourced? I asked this months ago. The government has to know where the aggregate is being sourced in order for the companies to even come up with a price to provide it to the government, so for the minister to stand here and say that we can't talk about that at this time is a little bizarre. Obviously, he is a little out of touch with what his job is here, so let's try another one.

The question regarding the Yukon First Nation procurement — it is my understanding that, in order to get paid for a job, the contractor has to provide proof of First Nation involvement. I am curious if the minister can tell us what type of proof they have to provide. Is it in terms of statutory declarations or does the government take the contractor's word for it? Does this apply to all contracts or specific contracts?

Hon. Mr. Clarke: The final question faded a bit at the end there. I heard some questions about a statutory declaration, but what was the final part of that question?

Mr. Hassard: I was asking what type of proof the contractor has to provide. Does that proof need to be given for all contracts or are some contracts different from others?

Hon. Mr. Clarke: On December 1, 2021, verified Yukon First Nation businesses started to be listed on the Yukon First Nation business registry. There is a link to the registry under "Doing Business" on yukon.ca. The Yukon First Nation Chamber of Commerce accessed the registrar of the registry. The registry assists Yukon First Nation businesses with the application process and performs the business verifications. As of March 15, 2022, 76 Yukon First Nation businesses have gone through the verification process and are listed on the registry. Over the past year, the Yukon government has received feedback from the industry and our First Nation

partners on the “First Nation business” definition. Feedback focused on ensuring that Yukon First Nation businesses were being properly designated and that the definition of a “Yukon First Nation business” aligns with the intent of the policy.

After discussions with the technical working group, the Yukon government updated the “Yukon First Nation business” definition in February. As we learn more about the policy through implementation, we will continue to review the business definition and verification process with the technical working group and the Monitor and Review Committee that we are, in fact, meeting the intent of the policy.

With Yukon First Nation industry representatives, we co-developed the terms of reference for a monitor and review committee. The committee is responsible for monitoring outcomes of the policy and providing recommendations to the Yukon government for interventions or continuous improvement. The committee meets at minimum on a monthly basis and is working on their first annual report. Their report will be available on yukon.ca.

We have heard the concerns from industry representatives about the use of bid value reductions. Should major market impacts be observed in a particular sector, the government will work with its Yukon First Nation partners to quickly adjust the parameters around bid value reductions. The Monitor and Review Committee is provided with monthly reporting on the impact of bid value reductions. Bid value reductions are an important way to meet the policy’s objectives. They will allow benefits to flow to the entire Yukon economy, which is a win-win for all businesses in the territory. All businesses can earn bid value reductions for Yukon First Nation participation in contracts.

I can advise with somewhat up-to-the-minute statistics as to how the First Nation procurement policy and the bid value reduction impacts have operated so far in the management of contracts. Up until the end of February 2022, only one tender has had a re-ranking of bids that changed the award outcome. The tender in question was the Macaulay Lodge demolition project, which was awarded to a Yukon First Nation-owned business. Since bid value reductions went into effect at the end of February, six percent of tenders have had bid value reductions for Yukon First Nation ownership applied and seven percent of tenders have had the bid value reduction for Yukon First Nation labour applied.

It is still early days with respect to the administration of these contracts. As you can hear from the stats that I’m providing to the House today, it’s still a relatively small number of tenders that are being considered that have qualified for bid value reduction for Yukon First Nation ownership or for bid value reduction for a Yukon First Nation labour component.

I can advise, with respect to the Monitor and Review Committee, that, generally speaking, the Yukon First Nation Chamber of Commerce has been tasked with the role of identifying First Nation businesses, but, once again, in Committee of the Whole with respect to the main estimates, I can very likely provide some additional information with respect to how that is operating.

Over the past year, the Yukon government has received feedback from industry and our Yukon First Nation partners on the “Yukon First Nation business” definition. The feedback has focused on ensuring that Yukon First Nation businesses were being properly designated and that the definition of a “Yukon First Nation business” aligns with the intent of the policy. After discussions with the technical working group, the Yukon government updated the “Yukon First Nation business” definition in February.

As we learn more about the policy through implementation, we will continue to review the business definition and verification process with the technical working group and the Monitor and Review Committee to ensure that we are, in fact, meeting the intent of the policy.

As I said in Committee of the Whole in the fall of 2021, it is certainly in Yukon First Nation businesses’ interests and in all Yukoners’ interests that the Yukon First Nation procurement policy is a success. There are a number of safeguards in place so that there is monitoring that is occurring on a monthly basis with the review committee. There very well may be bumps in the road, but the initial indicators are positive.

I can also provide the member opposite in future debates with some updated numbers on how many Yukon First Nation businesses have been verified, but, as I said, certainly all Yukoners — if I were to be so presumptive — do want this policy to be effective. We want to ensure that the Yukon First Nation businesses that are verified are bona fide Yukon First Nation businesses and that the filters are in place to determine if there are any concerns with respect to the representations that have been made by the applicant.

Deputy Chair, seeing the time, I move that you report progress.

Deputy Chair: It has been moved by the Member for Riverdale North that the Chair report progress.

Motion agreed to

Hon. Mr. Streicker: I move that the Speaker do now resume the Chair.

Deputy Chair: It has been moved by the Member for Mount Lorne-Southern Lakes 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 Deputy Chair of Committee of the Whole?

Chair’s report

Ms. Tredger: Mr. Speaker, Committee of the Whole has considered Bill No. 203, entitled *Third Appropriation Act 2021-22*, and directed me to report progress.

Speaker: You have heard the report from the Deputy Chair of Committee of the Whole.

Are you agreed?

Some Hon. Members: Agreed.

Speaker: I declare the report carried.

Hon. Mr. Streicker: 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.