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COMMITTEE

ON

HEALTH

Tuesday, January 29, 2019

LEGISLATIVE CHAMBER

Agenda Setting

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HEALTH COMMITTEE

Mr. Gordon Wilson (Chairman)
Ms. Suzanne Lohnes-Croft (Vice-Chairman)
Mr. Keith Irving
Mr. Ben Jessome
Ms. Rafah DiCostanzo
Ms. Karla MacFarlane
Ms. Barbara Adams
Ms. Susan Leblanc
Ms. Tammy Martin

[Mr. Hugh MacKay replaced Mr. Gordon Wilson]
[Hon. Lena Metlege Diab replaced Mr. Keith Irving]
[Mr. Bill Horne replaced Ms. Rafah DiCostanzo]
[Ms. Claudia Chender replaced Ms. Tammy Martin]

In Attendance:

Ms. Judy Kavanagh
Legislative Committee Clerk

Ms. Nicole Arsenault
Assistant Clerk, Office of the Speaker

Ms. Karen Kinley
Legislative Counsel



House of Assembly
Nova Scotia

HALIFAX, TUESDAY, JANUARY 29, 2019

STANDING COMMITTEE ON HEALTH

1:00 P.M.

CHAIRMAN
Mr. Gordon Wilson

VICE-CHAIRMAN
Ms. Suzanne Lohnes-Croft

MADAM CHAIRMAN: Order. I call this meeting to order for agenda-setting purposes. First, this is the Standing Committee on Health. I am Suzanne Lohnes-Croft, the MLA for Lunenburg, and the Vice-Chairman of the Health Committee.

I would like to remind members to please turn off their phones - put them on silent. Please note the location of the emergency exits and the washrooms. Also, there is a current seating arrangement required for Legislative Television broadcasts, so be sure you're in the seat that you're assigned to.

I ask that members of the committee introduce themselves.

[The committee members introduced themselves.]

MADAM CHAIRMAN: We have our clerk, Judy Kavanagh, and I think from the Legislative Counsel Office, we have Nicole Arsenault sitting in for Mr. Gordon Hebb. I am going to ask the clerk to speak to clarification of motions at the committee.

MS. JUDY KAVANAGH (Legislative Committee Clerk): I just want to remind members that particularly during agenda setting, it's important that we distinguish when a motion is being made. There are suggestions, there is conversation, and then when you're ready to make a formal motion, please state it as a motion in a complete sentence for the record.

MADAM CHAIRMAN: Any questions for the clerk? You all have received in your package the proposed topics for future meetings. We will start with the Liberal caucus. You have three topics. Mr. Hugh MacKay.

MR. HUGH MACKAY: The Liberal caucus would like to propose the following topics: Cape Breton health care redevelopment with witnesses: Ms. Paula Bond, Nova Scotia Health Authority; Mr. Brett MacDougall, Executive Director, Nova Scotia Health Authority, Cape Breton Regional Hospital; and finally, Mr. Paul LaFleche, Deputy Minister of Transportation and Infrastructure Renewal.

MADAM CHAIRMAN: Mr. MacKay, there needs to be a clarification on this topic because when the librarians were perusing the list, they felt that - is this Cape Breton Island or is this Cape Breton Municipality?

MR. MACKAY: This would be Cape Breton health care redevelopment in regard to the redevelopment at the former Northside General Hospital and New Waterford.

MADAM CHAIRMAN: That would be the island.

MR. MACKAY: That would be the island? Okay, thank you.

MADAM CHAIRMAN: Thank you, continue.

MR. MACKAY: The second topic we are proposing is the QEII redevelopment with witnesses: Ms. Denise Perret, the Deputy Minister of Health and Wellness; Mr. John O'Connor, Executive Director of Major Infrastructure, Department of Transportation and Infrastructure Renewal; and Mr. Paul LaFleche, the Deputy Minister of Transportation and Infrastructure Renewal.

The third topic we bring forward is investments in orthopaedics. The proposed witness will be the newly hired head of orthopaedics. I do not have his name. He is a new hire.

MADAM CHAIRMAN: The government members have brought forward three topics. Are there any questions? Ms. MacFarlane.

MS. KARLA MACFARLANE: I just want to say, I'm actually very pleased to see these proposed topics. I think given the narrative that is across our province right now, it's absolutely imperative that we have an opportunity to share some good-news stories. Also, because we're all very aware that these are stories and topics that are forever evolving - given the situation just last weekend where we saw 200 or 300 people outside a Cape Breton MLA's office, we're hearing from a number of individuals on Cape Breton Island that they're not totally convinced yet that the redevelopment is the right thing to do.

In saying that, we're looking forward to these topics being discussed. I think they're necessary, and definitely will help relieve some of the concern around individuals in Cape Breton who are not aware of what's going on. As we know, the Premier and the Minister of Health and Wellness went to Cape Breton - no consultations, no discussion, just went in and said, by the way, we're closing your hospitals. They didn't answer any questions. I thank the Liberal members for actually putting these forward.

MADAM CHAIRMAN: Ms. Leblanc.

MS. SUSAN LEBLANC: I agree with my colleague that in particular the first two topics are really important ones to hear from the witnesses. But I would make a comment that in the second topic, which is the QEII redevelopment, given that the witnesses include the Deputy Minister of Health and Wellness and the Deputy Minister of Transportation and Infrastructure Renewal, we feel that the Deputy Minister of Health and Wellness should also be a witness in the first topic, which is the Cape Breton health redevelopment. We would love to hear from her and Mr. LaFleche on both topics.

MADAM CHAIRMAN: Mr. MacKay.

MR. MACKAY: We certainly have no objection to inviting the Deputy Minister of Health and Wellness on the first topic. I would like to say that we know that things are difficult, particularly in Cape Breton, which is why the Liberal members here wanted to have Cape Breton health care redevelopment as the first priority for this committee as our proposed topic.

I thank the colleagues from other Parties, and I'm glad we're going to move forward on something that's important to us all.

MADAM CHAIRMAN: Ms. Adams.

MS. BARBARA ADAMS: With respect to Liberal Item No. 3, investments in orthopaedics, I think we've heard a lot about the additional new beds and opening up OR times, but orthopaedics is more than just the surgery and the surgeon who does the surgery. It involves a lot of other allied health professionals. We don't hear very much from them, but they are also partners, especially in the orthopaedic surgery world.

I'm going to suggest to the Liberal members that they consider inviting not just the head of orthopaedics, but perhaps the head of some of the departments like physiotherapy and occupational therapy and social work and continuing care, as they are the ones who are responsible for getting people home and back on their feet as well, because it's not just the one thing that we need to discuss.

MADAM CHAIRMAN: Mr. Jessome.

MR. BEN JESSOME: I'd hate to see the deputy be brought in on every single subject, and I would offer that it might make sense that if there are questions to be posed to the deputy, that they could happen as part of her appearance at the meeting subsequent to the Cape Breton subject. I just offer that.

MADAM CHAIRMAN: Ms. Chender.

MS. CLAUDIA CHENDER: I'm going to have to respectfully disagree with my colleague. I think it would be wonderful to see the deputy minister brought in on every single one of these issues. I think this committee has taken a piece of the agenda that traditionally resided with the Public Accounts Committee. In that committee, it is common practice to hear from the deputy minister.

These are hugely important issues. The Liberal Government has acknowledged that these are important issues, and this is part of the rationale behind having a Health Committee. To that end, I would respectfully submit that it is the job of the Deputy Minister of the Department of Health and Wellness to be working for the citizens of Nova Scotia, and it is our job in this committee to pose questions on their behalf - all of us.

I would be dismayed if we begin this committee at this early agenda-setting stage with the notion that we ought not to bother the deputy minister.

MS. ADAMS: I want to echo what my comrade just said; however, I would also like to point out that we were preferring to meet every week, and perhaps that would be onerous for the Deputy Minister of Health and Wellness. However, since we're only allowed to meet once a month, I don't think a few meetings in the run of a year would be too much for the deputy minister. I would hope that person would want to be here, and that they should be available for questions for almost every topic that we would want to raise.

MR. MACKAY: I thank my colleagues on the committee for their input on this. I would now like to bring the motion to a vote, the motion that the proposed topics - Cape Breton health care redevelopment, QEII redevelopment, and investments in orthopaedics - be brought to the Health Committee.

MS. CHENDER: Based on my colleague's former assertion, I'd like to amend that motion that the Cape Breton health care redevelopment topic include the Deputy Minister of Health and Wellness as a witness, which is not currently listed here.

MR. MACKAY: Yes, we can amend that motion to include the Deputy Minister of Health and Wellness.

MADAM CHAIRMAN: Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

We will move on to the PC caucus for two topics. Ms. MacFarlane.

MS. MACFARLANE: Moving forward with our proposed topics, we would like to see physician working conditions, proposed witnesses being: Dr. Jeannie MacGillivray; Ms. Janet Knox, President and CEO, NSHA; Ms. Kathy Bell, Director of Primary Care Eastern Zone, NSHA; NSHA Eastern Zone Medical Executive Director - I understand the position is currently being recruited.

Second, we would like to have Dalhousie Medical School and its role in health care sustainability, with the witness being Dr. David Anderson, Dean of Medicine, Dalhousie University.

MADAM CHAIRMAN: Mr. MacKay.

MR. MACKAY: I think we all recognize the importance of physician working conditions. One of the things we look forward to with the QEII redevelopment and the Cape Breton health care redevelopment is that we're going to create working conditions that are going to be attractive in our recruitment and retention of medical professionals - doctors, nurses, and otherwise.

It's our contention that the physician working conditions will actually be covered quite well in very good discussion here at this committee through the accepted topics of the Cape Breton health care redevelopment and the QEII redevelopment. We would ask the PC members to perhaps reconsider and pick as their second topic the Accreditation Canada 2017 report.

MS. MACFARLANE: It's extremely important, given the circumstances that are taking place right now in this province with regard to the lack of recruitment and retainment of doctors, to have an opportunity to speak to Dr. Jeannie MacGillivray and probably over 100 physicians, the struggles and challenges they're facing as individuals in this province, who sincerely care about the people of this province, and they simply just want to work.

Having these witnesses come in - in particular, Dr. Jeannie MacGillivray, to give us first-hand her personal experience, would be beneficial not just to us as a committee, but perhaps to everyone else who would be paying attention to us the day we have her in as a witness. She has gone beyond exhausting all levels of health to try to maintain a work/life balance. I would have to disagree with my colleague. I think this is one of the topics that we're proposing that most people would want to hear, so I disagree with my colleague.

[1:15 p.m.]

MADAM CHAIRMAN: Ms. Metlege Diab.

HON. LENA METLEGE DIAB: I'm extremely pleased to be subbing in at this very important Standing Committee on Health to set the agenda. I've taken a look at the three proposed topics that are presented by our Progressive Conservative colleagues. I'm extremely pleased that Dalhousie Medical School and its role in health care sustainability is on that topic. I think that is of the utmost importance. I certainly would like to see that there and will definitely be in support of that.

The second item that I'm very pleased to see here - because I hear it all the time - is on the Accreditation Canada report and the role of the province and everything that we can learn from that, bearing in mind that we are here to discuss solutions in health care and the future of health care in this province and our visions for that.

Those two items that have been brought here I feel would very well be served by having all Nova Scotians hear about them. I also feel that the physician working conditions - in all fairness, part of that is certainly going to be brought on the items of Cape Breton health care redevelopment and the QEII redevelopment as well. I know the accreditation is a very important topic that is provincial, national, and it is something that I think is of the utmost importance that this committee hears about so that we can bring more awareness and find more solutions that we can work on.

MS. ADAMS: I am happy that the Liberal members are pleased with Item Nos. 2 and 3. However, as their topics are about future development and future possible solutions and not on what has been going wrong - with all due respect, the people in this province have been watching for five years for answers as to why the number of physicians in this province are going down instead of up, except for the odd bonus hiring.

The person that we have here wanted to work here and went through a harrowing experience trying to stay here as a physician. As somebody who has the only constituency without a single family doctor, I would have taken her in a heartbeat. As somebody who has employed staff, we can talk all we want about what we should be doing in the future, but this person can tell us what went wrong today.

I can only suspect why the Liberal Government would not be interested in talking to a physician who felt so disenfranchised that they ended up not being able to work here. Why would we not want this person here? I think if you ban us from having this on the committee agenda, it's going to send a message to Nova Scotians that recruitment of physicians and the issues that they're facing is done in secret, that we don't want to be transparent, and that we're not taking the possible information we could get from someone who has first-hand knowledge - not the recruiters who are doing what they're doing, but the person who has been affected the most: the very physician that we have listed here.

I think the people in this province want to hear from this person above all the other items on that agenda. They want to know why doctors are leaving, and she can provide us with an awful lot of answers. I would ask the Liberal Government to reconsider allowing this to be on the agenda for the Health Committee.

MADAM CHAIRMAN: Ms. Chender.

MS. CHENDER: I want to speak in support of this topic being put forward by the Progressive Conservative caucus for many of the reasons that they laid out. Also, the argument that - when we talk about working conditions, yes, presumably at some time in the future there will be new hospitals and some doctors will work in them, and that's great for those doctors. It's going to be great for a lot of patients who have to go into them.

There are no doctors on this proposed list of witnesses of these topics that we just approved, so the idea that any of these people could speak first-hand to physician working conditions is laughable - I'm sorry.

To that end, as my colleagues raise, but which I'll emphasize, when I speak to my constituents, the number-one conversation they want to have is about primary care and about the fact that we have a government, now in its second term, that promised a doctor for every Nova Scotian. We have 175,000 Nova Scotians without access to primary care - that we know of.

I know that my Liberal colleagues - that all of us - are concerned with finding an answer to this question, but the one group that this government has consistently refused to engage with is doctors. I think that this witness list put forward has a variety of different people who can speak to this issue from different perspectives.

If we were putting this list forward, I don't know, we may have chosen different people, but I strongly agree that not only are we losing doctors, but we are having - as we all know - a very hard time recruiting them. That's going to be one of the topics we put forward, but the reality is one of the reasons that we can't recruit doctors - and we know this because we hear this - is because other doctors tell them not to work here. Why is that happening?

If we don't understand that, we won't be able to fix it. I think we're trying to understand that; we're trying to get answers. I would strongly support this topic from my Progressive Conservative colleagues, and I would urge the Liberal members of this committee also to accept it.

MADAM CHAIRMAN: Mr. MacKay.

MR. MACKAY: I certainly thank my colleagues from the other Parties for those comments. Touching on the matter of transparency, this committee was formed by agreement between all Parties that health in Nova Scotia, health for Nova Scotians, deserved far more attention than perhaps was available through the other standing committees.

This standing committee was established to examine this because, as my colleague, the member for Dartmouth South said, all Nova Scotians and all MLAs are very concerned about these issues. This committee has been established though to give a full range of transparency, of questioning of various topics related to this, and I would say it's being held in this very Chamber so that it can be televised, and that all Nova Scotians will have access to this. This committee and the subject matter is being done in full transparency and openness with the citizens of Nova Scotia, and we thank the other Parties for doing that.

At this time, I would like to bring forward the motion to accept the excellent proposed topics brought forward by the Progressive Conservative Party: the Accreditation Canada 2017 report on NSHA; and secondly, the Dalhousie Medical School and its role in health care sustainability.

MADAM CHAIRMAN: We still have two speakers, Mr. MacKay. Can you hold your motion? We'll have Ms. MacFarlane and Ms. Leblanc, and then we'll go back to you making a motion. Ms. MacFarlane.

MS. MACFARLANE: I'd like to thank my colleagues for their comments. I think there are a lot of physicians in Nova Scotia that have a fear of speaking up and telling their truth - the truth of their experience of the working conditions they live in day out, day in, 24/7. We have an individual, Dr. Jeannie MacGillivray, who has - she's courageous, she's brave in wanting to come forward to share her story so that we can look at the gaps and challenges that have been created by all governments over decades. We're all at fault.

Having Dr. Jeannie MacGillivray, who wants to come forward and be able to speak about those conditions, enables us to look at those challenges and gaps that she's willing to share - because often we see physicians leaving this province and we do not have any type of exit interviews.

I had a family doctor in Pictou who left two years ago for Ontario and a year later receives a thank-you note from NSHA for his service. Why was there no exit interview?

Having Dr. Jeannie MacGillivray come in and having her be brave and courageous enough to come in and speak to us, is extraordinary. I hope that everyone will look at this. We came into this new committee that we're trying to ensure is non-partisan. It has to be, so that we can find out what the solutions are in moving forward.

On that note, I just hope that everyone takes a moment and thinks about how important it is to have her come in and tell her story. She's not the only witness for that day, if we're able to have that topic go forward. I just want to say, please reconsider. It's extremely important to have her in.

MADAM CHAIRMAN: Ms. Leblanc.

MS. LEBLANC: I'm not going to repeat all the excellent arguments for why this topic should be on the agenda for this committee, because people have already done that. What I would say is I'd like everyone on the committee to think back to our first organizational meeting for this committee, when we discussed the importance of this Health Committee. We discussed the history, the steps with the Public Accounts Committee that actually brought this committee into existence. Think about how passionately both the Progressive Conservative Party and we in the NDP argued that there should be equal opportunity for agenda-setting topics.

All of this could be solved, Madam Chairman, if the PCs were allowed to have three topics for this agenda-setting and if the NDP were allowed to have three topics and if we could have a truly bipartisan or cross-partisan committee, because we all truly care about health care and the crisis that we have in health care in Nova Scotia. I'm just going to propose that perhaps we could take a new look at the decisions that went into place so that we could actually have Dr. MacGillivray and all the other topics that the Liberals think are valid for the PCs to put forward.

MADAM CHAIRMAN: Mr. MacKay.

MR. MACKAY: I appreciate all of the comments from the colleagues. As far as the matter of the agenda setting and number of topics, this has already been dealt with. We are not going to go back and revisit that. It was decided under vote at the last committee meeting what this would be, and we will proceed on that basis.

At this time, I would like to bring forward a motion that the committee accept the Progressive Conservatives' topics: the Accreditation Canada 2017 report on the Nova Scotia Health Authority; and second topic, Dalhousie Medical School and its role in health care sustainability.

MADAM CHAIRMAN: You have a question, Ms. Adams?

MS. ADAMS: This is the first time our committee has met, and these are our agenda items. Would it not be appropriate for our committee to put these forward and to move the topics one at a time?

MADAM CHAIRMAN: I'll ask for legal counsel on that. It would be appropriate that I ask Legislative Counsel for consultations, so we'll have a short recess.

[1:28 p.m. The committee recessed.]

[1:29 p.m. The committee reconvened.]

MADAM CHAIRMAN: On advice from Legislative Counsel, we'll allow the PC caucus to bring each topic forward separately. Ms. MacFarlane.

MS. MACFARLANE: I really appreciate that. In going forward, our first proposed topic is physician working conditions. I will put a motion on the floor to have that approved by this committee.

MADAM CHAIRMAN: Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is defeated.

[1:30 p.m.]

MS. MACFARLANE: Am I allowed to propose a motion for one of the proposed topics that were brought forward by the Liberal Government - an amendment?

MADAM CHAIRMAN: We've already voted on their agenda item. You could have done it before, but now we're at the PC caucus.

MS. MACFARLANE: Our second proposed topic would be Dalhousie Medical School and its role in health care sustainability. I put that motion forward.

MADAM CHAIRMAN: Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

MS. MACFARLANE: Lastly, I would like to move that we accept Accreditation Canada's 2017 report on NSHA.

MADAM CHAIRMAN: Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

We will move to the NDP caucus - Ms. Leblanc.

MS. LEBLANC: I'm going to say all our proposals and then tell you which one is the one that I want to put forward.

We have on the agenda that we would like to propose emergency room overcrowding and off-load delays, and the witnesses would be: Mr. Jeff Fraser, who is the Operations Manager at EHS; Mr. Mike Nickerson and Mr. Donald Dixon from IUOE 727; and the Deputy Minister of Health and Wellness.

We would also like to put forward staffing and human resources in long-term care. The witnesses for that one would be the Deputy Minister of Health and Wellness, but also the expert panel members from the Long-term Care Expert Advisory Panel.

Lastly, we would like to put forward collaborative practice terms and doctor recruitment. We would like to invite the NSHA recruiters, someone in charge of physician resource planning in the Department of Health and Wellness, and the Deputy Minister of Health and Wellness.

Our number-one topic would be emergency room overcrowding and off-load delays. Of course, we would like to have all three on the agenda, but that is the one that we will shoot for first.

MADAM CHAIRMAN: Would you like to put that as a motion?

MS. LEBLANC: Yes. I move that the NDP agenda item be emergency room overcrowding and off-load delays.

MADAM CHAIRMAN: Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is defeated.

Would you like to put another topic forward, Ms. Leblanc?

MS. LEBLANC: I would like to put forward collaborative practice teams - I said "terms" earlier - and doctor recruitment.

MADAM CHAIRMAN: That's a motion? A clear motion.

MS. LEBLANC: I would like to move that we have as our agenda item, collaborative practice teams and doctor recruitment.

MADAM CHAIRMAN: Ms. Adams.

MS. ADAMS: I'm wondering, given that the PCs and the NDP are extremely worried about doctor recruitment, perhaps the NDP might consider amending their motion to include as a witness Dr. Jeannie MacGillivray. I'm going to leave that as a suggestion.

MS. LEBLANC: I would like to talk for a couple of minutes about this topic or item. As my colleague said earlier, we know the number-one issue that we hear from our constituents is the worry around family practice physicians or doctor recruitment.

In Dartmouth, the community that I represent, we are one of the jurisdictions in the province where we have the highest amount of people on the 811 registry. We know that many people who don't have a family doctor aren't even on that 811 registry, and we are in a really serious crisis.

My colleague and I have had a chance to speak with current family doctors in Dartmouth and also had a chance to be part of larger community discussions around doctor recruitment. We're very concerned, and the whole province needs to be concerned about this. We really do need to have a chance to ask some questions about the process that is happening.

As my colleague suggested, we are hearing accounts of doctors not coming to Nova Scotia or not practising here because their colleagues who are on the ground practising are saying it's not a good place to work right now. We need to get to the heart of those issues, and the only way we're really going to do that is if we are asking the questions of the people who are on the ground doing the work of bringing doctors here.

In terms of replying to my colleague's suggestion, I have to respectfully say I don't want to make the amendment, because frankly, I think the motion would get voted down if we added Dr. MacGillivray to the topic. I think that's all I'll say for now.

MADAM CHAIRMAN: We're going to vote now. Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

The next item on our agenda is correspondence from the Speaker on the meeting location. You all have a copy of that in your package. Do I need to read it? Are there any questions about this? There's permission for today to have it. The first meeting is scheduled for February 12th; that was our request. The Speaker has responded. He is going to be considering which facilities we will use. We have permission for today to meet here, but going forward, we will have to request again if we can meet here. Is that all understood?

MS. KAVANAGH: I don't interpret this as saying we have to request again. I think he's simply saying he needs to consider it further before he gives us an answer.

MADAM CHAIRMAN: Okay. Please stay tuned for notification from the clerk where the next meeting will be held. Ms. Adams.

MS. ADAMS: I'm just reading the last sentence from the Speaker of the House. It says: "Use of the Chamber and changes to the Committee Room each result in additional expenses, which I need to address so that a proper solution can be found for future committee meetings." I'm wondering, what's wrong with having it where it is now? It's working well. It doesn't state why this wouldn't be an ongoing option.

MADAM CHAIRMAN: If there is agreement, we could ask the clerk to have the Speaker expand on that.

MS. ADAMS: I would like to make that request because I think it's important that this committee be given the opportunity to reach the community in the same way that Public Accounts does. Public Accounts does not meet in a committee room. Given the urgent issues that we're facing, I think our recommendation would be that it be held here and not put off into a committee room.

MADAM CHAIRMAN: Mr. MacKay.

MR. MACKAY: I certainly look forward to the Speaker's ruling on the continued use of this, but I would certainly say that the Liberal caucus, the Liberal members of this committee, would strongly urge that we be allowed to use this room for the next meeting, I believe you said February 12th, when the topic will be the Cape Breton redevelopment.

We feel it's of great importance and of great interest to many Nova Scotians, many of course being in Cape Breton who would not be able to attend here in the public gallery and would wish to be able to view the proceedings on television, which I guess would not be available by February 12th.

We would strongly urge that the Speaker allow us to use this room for the next meeting.

MADAM CHAIRMAN: May I clarify? The clerk needs to contact witnesses to see about their availability, so we do not know who our witness will be on the 12th. We will know when she sends out the meeting notice. Ms. Leblanc.

MS. LEBLANC: I also want to put my two cents in about this. I do think that this Chamber would be the most appropriate place for this very important committee, but I do think that ultimately the most important thing is that the committee meetings be televised or accessible - however it works - by Legislative TV, because I do think that Nova Scotians all across the province are tuning into these important topics.

MADAM CHAIRMAN: No further questions? Our next meeting will be February 12, 2019, 1:00 p.m. to 3:00 p.m., with the witness and location to be determined.

I now call this meeting adjourned. Thank you.

[The committee adjourned at 1:40 p.m.]