# HANSARD

### NOVA SCOTIA HOUSE OF ASSEMBLY

## COMMITTEE

## ON

## **HUMAN RESOURCES**

Thursday, December 17, 2020

**Video Conference** 

**Recruiting Continuing Care Assistants Appointments to Agencies, Boards and Commissions** 

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#### HUMAN RESOURCES COMMITTEE

Brendan Maguire, Chair Hon. Margaret Miller Bill Horne Ben Jessome Rafah DiCostanzo Brad Johns Larry Harrison Claudia Chender Kendra Coombes

[Barbara Adams replaced Larry Harrison] [Keith Irving replaced Rafah DiCostanzo for a portion of the meeting]

In Attendance:

Judy Kavanagh Legislative Committee Clerk

> Gordon Hebb Chief Legislative Counsel

#### WITNESSES

#### Department of Health and Wellness

Dr. Kevin Orrell, Deputy Minister Vicki Elliott-Lopez, Senior Executive Director of Continuing Care Cindy Cruickshank, Director, Health Workforce Policies and Programs

Nova Scotia Office of Immigration

Kelliann Dean, Chief Executive Officer Shelley Bent James, Executive Director



#### HALIFAX, THURSDAY, DECEMBER 17, 2020

#### STANDING COMMITTEE ON HUMAN RESOURCES

#### 10:00 A.M.

#### CHAIR Brendan Maguire

#### VICE-CHAIR Bill Horne

THE CHAIR: Welcome everyone to the Standing Committee on Human Resources. It's Thursday, December 17<sup>th</sup>. My name is Brendan Maguire, I am the Chair of the committee.

We'll do a quick introduction starting with the Liberal caucus.

[The committee members introduced themselves.]

THE CHAIR: Let's start with the ABCs then. Ms. Miller.

HON. MARGARET MILLER: For the Department of Communities, Culture and Heritage, I move that Carol Dodds and Robbie Shaw be appointed as Honorary Governors to the Art Gallery of Nova Scotia Board of Governors.

Shall I continue and then we vote afterwards?

THE CHAIR: Yes, please. Do we have questions?

BRAD JOHNS: Yes, Mr. Chair.

THE CHAIR: Mr. Johns.

BRAD JOHNS: Just for clarification, these are not appointments to the actual board - these are appointments as honorary members. Is that correct?

THE CHAIR: That is correct.

BRAD JOHNS: Okay. I'm just curious as to why it seems it's a priority to have h Honorary Governors appointed to this board when we still have a number of vacancies on the original board. I'm confused with why we're not appointing these members to the board, particularly given the \$140 million project that is currently under way. I'm a little bit confused to that. Is there a reason we're appointing two Honorary Governors, and we're not actually filling the vacancies that are there?

THE CHAIR: These are just the appointees that have come in. I don't have the answer for that, you'd have to ask the department or the board. These are what are in front of us right now.

Would all those favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

MARGARET MILLER: Mr. Chair, I move that Victoria Hamilton and Laurie Stanley-Blackwell be appointed as members to the Nova Scotia Museum Board of Governors.

THE CHAIR: Are there any questions?

BRAD JOHNS: Mr. Chair, if I could, please?

THE CHAIR: Mr. Johns.

BRAD JOHNS: Before we do this, I just wanted to clarify. I had a motion in regard to the last one we were doing - I waved and put my hand up there. Are you doing motions on each of these now, or should we do motions on these once we have finished all the appointments?

THE CHAIR: Once the ABCs are done, we can do motions when we get to committee business.

Is there any further discussion? Would all those favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

Ms. Miller.

MARGARET MILLER: I move that Jane Arnold be appointed as member, public at large, to the Advisory Board of the Public Archives.

THE CHAIR: Any questions? Would all those favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

Are there any more ABCs?

[10:15 a.m.]

MARGARET MILLER: For the Department of Communities, Culture and Heritage, I move that Aubrey Reynolds "Rennie" Beaver and Denise Sawlor be appointed as members of the Sherbrooke Restoration Commission.

THE CHAIR: Are there any questions? Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

Are there any more ABCs? Mr. Horne.

BILL HORNE: For the Department of Education and Early Childhood Development, I move that Sheila Francis, Andrea Kingham and Spencer Wilmot be appointed as members at large of the Council on Mi'kmaq Education.

THE CHAIR: Are there any questions?

BRAD JOHNS: I don't have any concerns with regard to these particular three appointments, but I do want to point out that there are currently 13 of 15 positions. There are 13 vacancies on this council. This is a very important council and today we're appointing three people. That's still going to leave a number of vacancies on that committee. I'm curious to know whether or not they can even conduct business if they don't have a quorum with these vacancies that are in place. I'm certainly not opposed to the three who are here, but I'll be bringing a motion forward at the end on this one as well.

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

The motion is carried.

Mr. Horne.

BILL HORNE: For the Department of Finance and Treasury Board, I move that John Armstrong, Beverley Cooke, and Rick Parker be appointed as members, Credit Union Representatives of the Nova Scotia Credit Union Deposit Insurance Corporation.

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

The motion is carried.

BILL HORNE: For the Department of Finance and Treasury Board, I move that Robert Carruthers be appointed as a member of the Nova Scotia Gaming Corporation and I move that Carrie Rice be appointed as a member - Public Representative of the Public Accounting Licensing Committee.

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

The motion is carried.

Are there any more ABCs? With that, we'll jump into . . .

BRAD JOHNS: Mr. Chair, there are more appointments.

THE CHAIR: Mr. Jessome.

BEN JESSOME: For the Department of Labour and Advanced Education, I move that we appoint Valerie Bobyk and Kate Oland as members of the Cape Breton University Board of Governors.

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

The motion is carried.

Ms. Miller.

MARGARET MILLER: For the Department of Justice, I move that Savannah DeWolfe, Deepak Prasad, and Robin L. Thompson be appointed as commissioners of the Nova Scotia Human Rights Commission.

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

The motion is carried.

Ms. DiCostanzo.

RAFAH DICOSTANZO: For Service Nova Scotia and Internal Services, I move that W. Patrick Curry be appointed as a member, Funeral Director of the Board of Registration of Embalmers and Funeral Directors.

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

The motion is carried.

Ms. DiCostanzo.

RAFAH DICOSTANZO: I move that Babatunde Awoyiga be appointed as a member to the Nova Scotia Real Estate Commission.

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

The motion is carried.

Ms. DiCostanzo.

RAFAH DICOSTANZO: For the Department of Transportation and Infrastructure Renewal, I move that Brian Jessop be appointed as a member to the Halifax/Dartmouth Bridge Commission.

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

The motion is carried.

Mr. Johns.

BRAD JOHNS: Are we able to make motions on those now?

THE CHAIR: That will be toward the end after our witnesses are finished.

BRAD JOHNS: Thank you.

THE CHAIR: Today we have the Nova Scotia Office of Immigration and the Department of Health and Wellness. The topic is recruiting continuing care assistants.

I will get the witnesses to introduce themselves. We'll start with the Office of Immigration.

[The witnesses introduced themselves.]

THE CHAIR: With that, we'll open the floor to opening statements. Ms. Dean or Mr. Orrell - who would like to proceed?

DR. KEVIN ORRELL: Good morning and thank you for the opportunity to speak to you today about the recruitment of continuing care assistants and Nova Scotia's commitment to addressing the health resource requirements for quality health care assistants. You have identified our panel today from both departments, so I won't reintroduce them in the interest of time.

CCAs assist health care professionals such as nurses to provide personal care and support to individuals in their homes, long-term care facilities, and hospitals. We know that as demand increases and we invest in home care support and long-term care infrastructure and beds, there will be a greater need for CCAs within all continuing care settings.

Like other Canadian jurisdictions, planning for this assistive role is more challenging than other health care providers because they are not regulated. As a result, there's minimal data on our provincial supply of CCAs including their demographics and employment patterns. We have been working with the sector and other partners to strengthen our information on this labour force. The work is currently under way to mandate a CCA registry.

As of June, it was estimated that there were nearly 7,000 full-time equivalent CCA positions funded by the department and distributed across sectors. Here in Nova Scotia, we have a standard provincial training program for CCAs that's administered by the CCA program at Health Association of Nova Scotia. The program is currently offered at 12 Nova Scotia Community College campuses and several private career colleges across the province. We are working with these educational institutions and encouraging more people to pursue this career.

Firstly, to support this, for the last two years we've had a bursary program in place for continuing care assistants. The bursary program was a recommendation from the Minister's Expert Advisory Panel on Long Term Care recommendations from 2019. The bursary provides successful applicants \$4,000 for full-time students and \$2,000 for parttime students. The purpose of the program is to increase enrolment by removing financial barriers for students.

This year, a minimum of 115 bursaries are available through an investment of \$460,000, and this is the first year the program has been open to private career colleges. Through the bursary program, we are promoting cultural representation in continuing care by prioritizing applicants from the Indigenous and African Nova Scotian communities.

Another initiative that supports CCA training is a new pilot program we launched earlier this year called the Recognizing Prior Learning Program. The program provides

funding for people who have their skills and experience evaluated and to complete the Recognizing Prior Learning process to become certified to work as CCAs. This process can help those who may be currently working as long-term care assistants or care workers who have come to Nova Scotia and who want their credentials and experience recognized.

The Recognizing Prior Learning process has two phases. The first is in assessment, where the participant demonstrates what they know. The second phase is education, where the participant completes any outstanding training, education modules, or skills demonstration and writes the certification exam. The assistant program will support up to 200 participants by waiving the assessment phase fee or reducing the education fee by \$800.

There are other ways that we support this sector. Last year, the CCA Entry to Practice policy was amended to allow retired nurses and internationally educated nurses to be granted CCA equivalency as long as they meet certain criteria. We also launched last year a local marketing campaign to increase awareness of the CCA sector and attract Nova Scotians to enroll in the educational programs for this. That marketing campaign was relaunched this Fall to highlight the second round of bursaries that were available.

We've also supported publicly-funded not-for-profit continuing care employers with their recruitment efforts by providing them with unlimited access to Career Beacon for job postings. This represents an annual investment of \$21,000 and resulted in over 800 positions posted in a two-year span. We will continue to make strengthening of the CCA workforce a priority.

Our efforts and collaboration to recruit CCAs are far-reaching. We are working with the Department of Labour and Advanced Education to provide skill development and employment opportunities to unemployed or underemployed Nova Scotians, with the Nova Scotia Office of Immigration on international recruitment opportunities and streamlining the immigration process, and with many post-secondary institutions, including the Nova Scotia Community College and private career colleges, to support the training of CCAs.

Our focus for 2020-21 is to encourage more Nova Scotians to become CCAs by removing financial barriers in accessing education. We want to strengthen the capacity of those who may be currently working as long-term care assistants or care workers who have come to Nova Scotia and who want their credentials and experience recognized, and we want to improve retention by sustaining collaborative linkages, analyzing the occupational and labour markets, and performing research to understand developing health human resource challenges.

Work at the department is ongoing to help us better understand this important and valued work force. We are committed to collaborating with our partners, maximizing opportunities, and removing barriers to training and education so that we will continue to increase our provincial supply of CCAs. Thank you.

[10:30 a.m.]

THE CHAIR: Ms. Dean, did you have an opening statement?

KELLIANN DEAN: I do, thank you. Thank you for the invitation to discuss the Nova Scotia Office of Immigration's work to support the Department of Health and Wellness by helping employers hire continuing care assistants in the province.

Nova Scotia's focused efforts on immigration have shown strong results over the past several years. In 2019, 7,580 people immigrated to the province, becoming permanent residents. In July 2020, Nova Scotia's population reached an all-time high of 979,351.

Immigration is a shared responsibility between the federal and provincial governments. While provinces deliver economic programs that support permanent residency, the federal government retains the authority to permit people to work, study, immigrate and become citizens.

Immigration is one of the tools we have to help employers hire qualified individuals in sectors that are experiencing persistent labour shortages like health care. Our work begins when an employer in Nova Scotia has a job vacancy that cannot be filled locally. While there is no doubt that COVID-19 has impacted the mobility of our immigrants, at the Office of Immigration we've continued to focus our efforts on essential services, including health care and transportation.

As Deputy Orrell mentioned, continuing care assistants are critical members of health care teams and are also considered essential employees from both the federal and provincial immigration perspective. Since 2015, 620 CCAs have been supported through our office's immigration programs, 310 CCAs through the Nova Scotia Nominee Program, and 310 under the Atlantic Immigration Pilot Program - nine of these were under the Economic Mobility Pathways Project.

Both the Nova Scotia Nominee Program and Atlantic Immigration Pilot Program support individuals who have an existing job offer from a Nova Scotia employer. These programs enable immigrants to work in critical areas in our province while their applications to become permanent residents are being processed by the federal government.

The Economic Mobility Pathways Project is a new federal initiative. The focus is on skilled refugees and helps to match them with employers' needs. We also work closely with settlement providers who play a key role in welcoming newcomers and ensuring they have the support they need to adapt to life in Nova Scotia. Through their efforts and the efforts of employers in communities throughout the province, Nova Scotia consistently retains 71 per cent of immigrants - the highest retention rate in Atlantic Canada.

Immigration will continue to play an important role in our economy as we recover from this pandemic. While we have welcomed fewer immigrants to our province due to COVID-19 travel and federal-processing restrictions, we've continued to work diligently to ensure that we reach our full allocation of 3,292 economic immigrants for 2020.

We look forward to continuing to work with our government colleagues, employers and settlement providers to address labour force gaps and to help strengthen communities across the province through immigration.

THE CHAIR: Thank you both. We'll open the floor for questioning. How this will work is, we'll do a round each for each Party. You'll have a question and then a follow-up question. We'll go to about 11:30 a.m. I'll ask that everybody try to keep their preambles small so that we can get as many questions as possible in. Then we'll deal with committee business after 11:30 a.m.

We'll go Liberal, Progressive Conservative, NDP, so we'll start with the Liberal Party. Who would like to go first? Mr. Jessome.

BEN JESSOME: Perhaps this question is for Dr. Orrell. Dr. Orrell, you made a comment related to an actual challenge keeping track of and holding to account perhaps CCAs because they are an unregulated profession. Can you add some context to that comment as an initial answer to my preliminary question?

KEVIN ORRELL: I'm not sure I understand the specifics of the question. If I don't address it, please let me know.

Basically, in Nova Scotia we have a large number of health-related professions. Some are very small, some are medium-sized, and some are quite large. We have for years made efforts with these professions to regulate them and to bring a provincial standard across the professions.

This work was being undertaken not only for CCAs but for many other counsellors, massage therapists, optometrists - all kinds of different professions. Some have been successful, and we have now plans to proceed to regulate all of these professions, including the CCAs. This work is delayed somewhat by our attention to COVID-19 and it will proceed.

The mandatory registry of CCAs will allow us then to have a registry that will allow us to be more accurate in our evaluation of numbers, work patterns, and location.

BEN JESSOME: Just for greater certainty, (inaudible)

THE CHAIR: Mr. Jessome, we're having a hard time hearing you. Is everyone else having a difficult time hearing Mr. Jessome? Ben, we can't hear you. Your sound is broken up.

RAFAH DICOSTANZO: Mr. Chair, I'd like to go, and then he can figure it out. I have questions as well.

THE CHAIR: Mr. Jessome, are you there? It looks like he's dropped off. When Mr. Jessome comes back on, we'll allow him his follow-up.

We'll go over to the Progressive Conservative Party. Ms. Adams.

BARBARA ADAMS: Thank you for being here. I want to start off by saying that this is one of the most important topics that needs to be discussed. I am dismayed that in an entire calendar year, we're getting approximately less than one hour to talk about what is probably one of the biggest issues in our province.

I am also rather disappointed in the opening remarks, because it was really about what you are planning to do and trying to do and trying to put in place. I would call it "numbers lite." It did not in any way capture the tremendous lack of resources in the industry of CCAs. It did not talk about the actual shortages that we have and the impact that that has had on home care, long-term care, and acute care.

It didn't talk about the fact that the COVID-19 unit at the Ocean View Continuing Care Centre in my constituency, which was supposed to open, could not open because they can't recruit staff. It's the reason why beds are sitting empty and people are being moved into hotels. I'm feeling like this issue has been under-represented in terms of the seriousness by your opening comments.

I will go on the record as saying that the PC Party had been talking about the CCA Registry for years. The fact that we have no idea how many are actually working in this province, considering how important they are to the workforce, is a disgrace. It should have been fixed a long time ago.

I want to initially start, though, with the CCA bursary program. The NDP had brought that in a long time ago. It was when the Liberal government took over in 2013 that they cut it. When we asked the Minister of Labour and Advanced Education, Mr. Kousoulis, about it two or three years ago, approximately, he didn't know what the program was about. We had to give him that information.

What I want to ask you about, because when you look at the actual graph from the CCA Program Annual Report for 2018-19, which is the latest that we have, it shows a beautiful graph showing how many we trained when the bursary program was in place, around 1,000; and how many we trained when it was cut, around 500 to 600. We've been undertraining CCAs for the last seven years.

My question for the deputy minister is, how many people have been trained in the Nova Scotia Community College programs who graduated - so there were some who were admitted, there are those who quit, those who failed to complete it, and then those who graduated. My question is, how many who started finished, and how many are still working in the province after five years?

KEVIN ORRELL: My colleague, Cindy Cruickshank, will have the history of that, and I defer to her for the answer to the question about the bursary.

THE CHAIR: Ms. Cruickshank.

CINDY CRUICKSHANK: Good morning. Let me just fix my camera here. There we go.

Thank you very much for the question. I would agree, this is a critical work force. As Deputy Orrell mentioned, it is a bit more challenging to plan for, simply because we don't have the same information we have for other workforces. That doesn't mean we don't have any. We use other measures to estimate the supply and the demand for this workforce.

To answer your question specifically about the number of CCAs coming through the pipeline, if you will, over the last five years, on average about 600 CCAs have been certified. They come through various routes. They come from the standard program at the 12 campuses of NSCC, they come from some private career colleges, and they also come from the Recognition of Prior Learning Program. That's the program Deputy Orrell spoke about earlier on.

About 18 per cent of the CCAs who have been certified, about one in five, come through that route. It's because of that that we introduced this summer a pilot project that provides individuals who have some knowledge or experience working in a role similar to a continuing care assistant - this program allows the assistants program, significantly reduces the financial burden for accessing that education.

Again, about 600 annually over the last number of years have been certified as CCAs through a number of education routes.

BARBARA ADAMS: I am aware of how many were trained, but the question was, how many started in the course, how many quit, failed to complete it, or left for other reasons? My understanding is it's approximately 30 per cent - at least a couple of the programs that I talked to.

Ironically, in the Expert Advisory Panel on Long Term Care, the update that the government provided, Recommendation 2.1 to bring back the CCA bursary program to support CCA recruitment is ticked off as complete. But my understanding is that they didn't even fill the 115 that were opened, and we need 1,000.

I am disturbed when we are saying after all this time - seven years of the Liberal government being in power - that we still don't have any idea of the actual workforce and how short-staffed we are in long-term care facilities in home care.

I want to ask a specific question about staffing rates. The PC Party has already put out our position and platform on this particular issue. It's a 17-page document. We did this in consultation with all the same stakeholders and the reports that they have written. One of the recommendations that was made by the unions was to increase the staffing levels in long-term care to 4.1 hours of care per senior per day, which includes significantly increasing the workforce for CCAs.

#### [10:45 a.m.]

I'm wondering if one of you can comment on whether you are also in support of increasing the staffing rates in long-term care. Our seniors are going in there at a much more frail, disabled rate than they ever were in the past, and CCAs are disproportionately more injured than other professions.

I'm wondering if you can comment on whether you are also in support of our agreement that the staffing ratio needs to be increased to 4.1 hours of care per resident per day in long-term care.

KEVIN ORRELL: I will take this to start. Staffing rates are very complicated and they're not quite as straightforward as assigning a simple number of hours per resident. They do involve a large number of facilities with very different demographics about their patients. Many of the administrators of homes across the province have resisted a staffing ratio because it commits them to something that they may not require in their facility, or they may require in parts of their facility and not others.

It is largely based on the variety of patients that can be present in any given facility and in any different part of the facility. The acuteness of patients most certainly has escalated and their vulnerability has certainly been identified during the pandemic. There would be some wings that would have people who are extremely mobile and capable. There were would be others that would be more immobile and less capable of caring for themselves.

A simple ratio does not always address the issues that are required. We have recently invested in interRAI, an international assessment tool that will help to provide data that suggests what type of patients would require more care than others. It's not simply a ratio across the whole sector.

THE CHAIR: The NDP, please - who would like to start this? Ms. Coombes.

KENDRA COOMBES: There is a significant shortage of continuing care assistants and other skilled support workers in Nova Scotia and a significant demographic trend that means that this need will be compounded in the coming years. The challenges are significant, but not impossible. There are examples where concentrated efforts to recruit CCAs both locally and globally can be successful. For example, Glen Haven Manor in New Glasgow has done amazing work on this.

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For many long-term care administrators, the work is off the side of their desk and they don't feel supported to give it the attention it deserves. I've heard concerns about the piecemeal approach that the government seems to be taking here. What dedicated support is available to nursing homes to do focused recruitment work? What funding is available typically for this work?

KEVIN ORRELL: The administrators of the homes have been capable of hiring CCAs to meet their needs. Regrettably, there is not enough in the pool of people looking for work that would fill all of their vacancies.

The other issue is that CCAs themselves do not all work on a full-time basis. Many choose to work part-time or casually. From a survey, it was identified that most of the vacancies had to do with looking for part-time and casual workers for different facilities.

The pattern of the way in which the members of this sector like to work has something to do with the ability to fill all of the vacancies in the province. There would be no one who would be refused the opportunity to hire CCAs for vacant positions that they have in the province, based on the current direction of funding that has taken place through the pandemic.

KENDRA COOMBES: I don't know if I heard you right, that it's a preference that they want to work casual. Most I've heard from say that they want full-time positions. However, with that aside, Quebec has had a success in recruiting, and one critical piece of this success was that workers are compensated fairly.

The starting pay for positions is \$49,000 a year, and in addition, students are offered \$750 per week for the duration of their training. This is significantly higher than the starting wage for CCAs in Nova Scotia - with a diploma, it's \$17.47 per hour. I'll remind the committee that a living wage in Halifax is \$21.80 per hour.

The Nursing Homes of Nova Scotia Association has asked that a full compensation review take place and in September, Dr. Orrell, you expressed openness to the need. What are the plans to review the compensation in the long-term care sector?

KEVIN ORRELL: Currently, the salary of a CCA in Nova Scotia is somewhere between \$39,250 and \$40,000. That's compared to the Employment Insurance wage of \$26,000, and the wage for an LPN of \$59,000.

What we've done in Nova Scotia is to support CCAs to work across sectors. They've all been standardized. In many provinces, there is a discrepancy between CCAs who work in long-term care and home care or in acute care. In our province, the salary for CCAs has been the same across all the sectors in which they could be employed.

Cindy may have some further information about recruitment that you might be interested in, in her work that she does with the council.

THE CHAIR: Ms. Cruickshank.

CINDY CRUICKSHANK: Ms. Coombes, to address your question specific to Glen Haven Manor, I agree with you, that was an innovative immigration pathway partnership, and so we look to that as something that is going well. I agree with you as well - we are also hearing from the long-term care and home care administrators. They aren't one large organization. There are well over 130 long-term care facilities alone, so they don't have large human resources, or the small to medium-sized businesses don't have large human resource departments.

That's one of the reasons that we're working really closely with a group called the Health Care Human Resource Sector Council. It's one of the sector councils in Nova Scotia. Part of its role is to work with small and medium-sized long-term care, home care, disability-support facilities to help them with their recruitment and retention efforts.

As per the minister's long-term care expert panel, one of the recommendations was to develop a recruitment and retention strategy for the sector. Some of what you've described, including some assistance, either centrally or on a regional level, to assist administrators take advantage of the immigration pathways is one of the items that has been flagged for consideration. We don't expect that work will take much longer, but some of what you've described is included in that recruitment and retention strategy.

KEVIN ORRELL: If I may, to follow up on the issue about part time, casual, or full time, there was a survey done in September of the long-term care nursing homes to identify their vacancies and their needs for CCAs: 97 of the 134 facilities responded, that's 72 per cent. There were 198 vacancies identified. Those were, again, identified by the facilities as being for part-time and causal positions.

THE CHAIR: Mr. Jessome's back, so you can have your follow-up question, Mr. Jessome, and then we'll go to the Liberal Party for a question.

BEN JESSOME: Sorry, folks. I guess I was talking about the work being done to regulate the profession, and I was curious about the distinction between it potentially becoming a full-blown regulated profession and just having a record or a registry. Can you comment on the distinction, if there is one at all?

KEVIN ORRELL: Perhaps I was confusing the issue. We are going to mandate a registry, but it will not regulate the profession.

THE CHAIR: Who would like to go next for the Liberal caucus?

Ms. DiCostanzo.

RAFAH DICOSTANZO: My question is to Ms. Dean in regard to immigration. Maybe you can just give us an idea of how many CCAs came through in the last two to three years and how it's changed with COVID-19. They apply - most of them can come in, and a lot of them have nursing backgrounds - from other countries. They come here and how long does it take them to get the certification?

I know that you're giving a bursary of \$800 to help them out. How much is the cost to them in total? Is this \$800 enough for them to get their equivalency of the same profession here? Just give us an idea on what has happened in the last two to three years.

KELLIANN DEAN: Basically, as I indicated in my opening remarks, about 620 CCAs have been supported through our various programs in Nova Scotia. What I will do is ask Shelley at some point to talk a little bit more about the process for them working in the province because they don't all come with the necessary qualifications. Sometimes it takes them some time to be certified so there is a bit of a process to that as you indicated. Shelley may be able to shed some light on that.

I did want to comment about Glen Haven Manor for a moment because we work very hard to support them and other long-term care facilities. Many of them have participated in our international recruitment efforts. What we are seeing overseas when we were travelling - which obviously we've not been doing during COVID-19 and a lot of our work has gone virtual - is a significant interest in Nova Scotia and coming to our province.

We've tried to support the gaps in this important labour market through immigration efforts and many of them have come here. During COVID-19, though, what we're finding is it's a little bit slower. In our partnerships with Immigration Canada, they are prioritizing applications for health care workers, so CCAs are part of that prioritization.

While some of the immigration streams are a little bit slower, the priority areas in health care have continued to be processed. We're getting very good co-operation on that front from our federal partners.

Shelley, if you're ready, I'll ask you maybe to comment a little further on some of our efforts, specifically with the CCA process coming here.

SHELLEY BENT JAMES: All of our streams are connected, obviously, with an employer. If there is a foreign national who has been identified and the employer in Nova Scotia offers a job to that individual, the pathways then become available through our immigration programs.

The one piece that we have also done, knowing that there is a bit of a regulatory process involved in becoming certified to work as a continuing care assistant in the province - we have tried to be a bit strategic in our selection in using the federal Express Entry System. I've offered invitations to nurses from around the world knowing that when they arrive here in the province, they will not be able to necessarily immediately work in the nursing profession, but the pathway to licensure for nursing exists, and most oftentimes starts working in the continuing care sector.

[11:00 a.m.]

If there are still gaps after that and there are employers who have identified fulltime job opportunities, then our office plays a role in setting up recruitment events where those employers can look for those foreign trained individuals.

RAFAH DICOSTANZO: As you're speaking about that, I'm thinking of other provinces. How are we doing in comparison to other provinces? Do we have the same issue as we have in recruiting doctors? There is a demand across the country and we're having to fight to get our own numbers. What are the numbers and how are we attracting them - to have a competition with the other provinces? Are they doing better than us? How are we doing in that?

KELLIANN DEAN: I don't have access to the statistics from other provinces. We do recruit collaboratively so oftentimes when we're international, we're there with all of the provinces. I'll ask Shelley if she has any further information to shed light on that.

What I will say is that consistently, year over year since 2015, we are bringing more people to this province than we ever have. The allocations that we receive from the federal government are continuing to increase. I think it's clear that there is certainly an interest in Nova Scotia and consistently the numbers that we bring in the health care profession are also growing.

For our province, I think that we're continuing to see real progress and strong results. Shelley, perhaps you can comment on whether we have access for the comparators.

SHELLEY BENT JAMES: We actually don't have comparators to other jurisdictions. The one thing that is important to highlight is that Nova Scotia is the only jurisdiction that has a dedicated pathway for physicians, which we introduced in 2018. Since we have introduced that stream, we currently have 73 physicians that have been supported under that particular immigration pathway, which is a combination of both specialists and family physicians.

When we look at the impact that COVID-19 has had on individuals arriving, as Deputy Dean pointed out, we do work closely with our colleagues at the Immigration, Refugees and Citizenship Canada and they have identified those working in essential services as being individuals who are able to travel into Canada at a time where there are border restrictions in place.

Since March of this year, we have had 20 of our physicians that have been supported arrive and start practising here, which is fantastic when we think of the challenges that a number of foreign nationals are having in trying to enter the country. While we see our numbers certainly not at the levels where we saw them in 2019, we are happy to see that the numbers of physicians are remaining constant.

KEVIN ORRELL: With respect to the internationally educated nurses, there is a nursing strategy that provides targeted funding of about \$340,000 to support these internationally educated people on their pathway to licensure when they get to Nova Scotia. This has been highly successful. The money helps to pay for the assessment and the bridging programs that are required to licence them.

THE CHAIR: We'll now move on to the Progressive Conservatives. Ms. Adams.

BARBARA ADAMS: One of the things that we haven't touched on that I think is important to get to - I've heard a lot of reference to how many people may have been recruited, like the number of physicians who have come, but we don't hear about the numbers of people who have not retained in the profession or have left the province altogether. For example, the reference that there have been 73 physicians come in through the stream, but the Nova Scotia Health By the Numbers 2019-20 report shows that we have 400 fewer registered physicians in Nova Scotia in 2019-20 compared to the previous year.

It's important that we talk about how many come in and how many have left the profession. I want to specifically talk about continuing care because we know that there's a shortage of CCAs, both in home care and in long-term care - not so much in the hospital setting because they have dedicated staffing hours.

I do disagree with Dr. Orrell that dedicated staffing hours is not part of the solution. Having worked in long-term care and during the pandemic, we were always short-staffed for CCAs. If you don't have at least a model of staffing ratios, then you have a chronic shortage like we have now.

My question is about home care. The complaint that we hear about constantly, and I heard about it in my own profession, is that you have different CCAs from these private companies showing up every day. The family has to retrain the person who shows up because they don't know the family member. They either sometimes don't show up or they don't call when they're going to be late. I have had, personally, two constituents who fell on a Friday, the CCA didn't come in on the Saturday or Sunday, and the person was found on the floor on Monday.

My first question is about the number of home care clients. Given that the government wanted to keep everyone at home and not build long-term care beds, the number of home care clients last year, pre-COVID-19, dropped from 2018-19 to 2019-20. It went from 31,688 down to 30,881. I'm just wondering if somebody can comment on how much the CCA shortage has contributed to the inability to provide consistent home care for those in Nova Scotia.

THE CHAIR: Who would like to take that? Anyone?

KEVIN ORRELL: I would refer them to Vicki Elliott-Lopez for that.

THE CHAIR: Ms. Elliott-Lopez.

VICKI ELLIOTT-LOPEZ: What I can tell you is while we aren't documenting to look for direct correlation as to how many clients have opted out of a home support program in reference to CCAs, what I can tell you is that we've recently undergone a review with the home care sector.

The home support sector recognizes that changes are required. We've worked very closely with Health Association Nova Scotia and all of our sector partners to determine what changes we need to undergo to ensure that, going forward, we are very client-focused in our response.

We know that it's more than just CCAs that bring confidence to families and their loved ones. We're looking at models of care. For example, ensuring that the right person is in the right place providing the right level of care. We have supported home support agencies and pilot programs.

We've also increased investments in direct benefit programs because we do want to move toward a place where families and clients feel empowered and are able to make choices. We're trying to create more flexible opportunities for them. As an example, we've doubled the Supportive Care Program option from \$500 a month to \$1,000 a month that is available to families. That allows them to determine who comes into their home and when.

We're working with home support agencies to provide more of that consistency as well. We recognize the challenges with regard to travelling and rural areas and morning visits and night visits and recognizing that that's a challenging environment in which to work. We are working to make improvements every day with our sector.

BARBARA ADAMS: I appreciate, Ms. Elliott-Lopez, that you are working with the resources that you were given. I'm going to refer you back to the PC Party's plan because we believe that there is both a resource shortage as well as infrastructure and funding. I know you are doing your best to work with those who are there.

One of the things that I know from the statistics from the Nova Scotia Health By the Numbers report is it provides us the number of hours of care each person gets in home care per year. Two years ago, it was 141 hours of care on average per home care client per year. Then it dropped down 132 hours per person per year, and then last year it was 126. We are going in the wrong direction. Despite all of the plans and policies and things that people are looking at, we are frankly too far down the road to still be in the planning phases, and the implementation is not leading to an increase in the number of CCAs in the province.

There was a beautiful report that Susan Stevens prepared called the Nova Scotia Health Authority 2017 update on continuing care, and in it, there was a reference to the percentage of missed visits. It showed that the number of missed visits by home care was approximately 1 per cent to 1.4 per cent in Nova Scotia. I can tell you right now that it is at least 5 per cent, if not 10 per cent. We are not moving in the right direction despite all the things that we're talking about today.

One of the things that concerns me greatly relating to COVID-19 are the calls that I got from staff at Northwood, especially in the beginning in early April. I did have discussions with Northwood staff, as well as one of the physicians who worked there, as well as sent recommendations to the Department of Health and Wellness and Dr. Strang. Staff were calling and telling me and others that even though they had symptoms of COVID-19, even though they were waiting for test results, they were down to 60 per cent staffing levels at Northwood.

I'm just wondering if someone can comment on whether they were aware that staff were being mandated to come into work even when they had symptoms of COVID-19, even when they were waiting for test results, because the critical staffing shortage was so acute in that first month of April.

I'm just wondering if someone can advise me as to how many of those CCAs in particular ended up with COVID-19 and how that might have contributed to the staffing shortage we have now, and perhaps the reluctance of people to be working in long-term care at this time.

KEVIN ORRELL: As far as Northwood is concerned, we would not be in a position to comment on Northwood at this time because of the litigation and the class-action suit that has been filed with the court. So any reference to Northwood, we would not be prepared to answer today.

THE CHAIR: We'll go on to the NDP caucus. Ms. Chender.

CLAUDIA CHENDER: Welcome everyone, and thank you for being here to answer our questions today. While I recognize that there is litigation surrounding Northwood, I'm going to go back to the quality review report that was undertaken after the first wave. This was something that was undertaken and it was less than many had asked for, which was a full inquiry.

One of the outcomes of that, as has been mentioned by other colleagues in this committee, was the recommendation to, "Set and fund standard minimum care hours based on resident complexity across all facilities. Increase care hours to include previously evidenced levels." That's a direct quote.

I again would like an explanation of why, based on what I've heard today - and if I'm mistaken please do let me know - there is a resistance to setting minimum standard hours of care, whether that's a ratio or whether that's hours. I'm not a health care professional, but notwithstanding the need for flexibility, I struggle to understand why a minimum standard would not be put in place. If anyone could comment on that, I would appreciate it. KEVIN ORRELL: I'm going to refer that now to Vicki Elliott-Lopez.

#### THE CHAIR: Ms. Elliott-Lopez.

VICKI ELLIOTT-LOPEZ: We've had many conversations about minimum staffing hours with our sector partners, particularly through the long-term care panel report because as you know, the panel report does not recommend a minimum staffing ratio. So we were trying to understand what it was that the sector was calling for, and what we consistently hear - and in fact we've actually engaged with the centre of gerontology to perform some research for us to try to determine what other jurisdictions are doing in this area. What came back from them, which was validated with our sector partners, is that there is no magic bullet.

#### [11:15 a.m.]

To generally speak in terms of yes, we want increased allied health in our nursing homes and so we're working on that through the long-term care panel, we want to develop more of a model of care so it's not just about how many staff you have on board, but it's really looking at the people, the processes, the technology and the information, and ensuring that the collaboration and the leadership and the staff development is in place to support that model of care. It's about having the right team that is determined by people's needs.

The interRAI assessment tool that will be shortly launched will help us to gather the information that we need to determine the acuity levels. Some providers have higher acuity levels of residents than others. Also, for example, some are implementing technology that helps to empower residents.

Space and design is a huge contributor as to how many staff different facilities need: if you have shared rooms, if you have smaller households, if your residents are more spread out.

I want to give an example of an innovation that one of our providers is investing in - actually, a number of them, through our innovation fund – is the Paraglide. It's this great technology that helps to slide somebody up in their wheelchair. They press a button - it empowers them to determine when they need to move up in their wheelchair. They press a button, it's done, and then they're not calling on CCAs or somebody to help them. We've had incredible feedback on technology investments that empower residents and also saves workforce time and effort.

It is really working more holistically and what we've heard from our sector is that we want flexibility. Yes, we agree - increase in allied health, help us with long-term care assistance, but let us make the decisions on how we provide that model of care, and look to us to provide you with quality outcomes. Through our licensing team, we monitor against quality outcomes and are they achieving quality care through decreased pressure injury rates, for example. We'll be able to do that even more so once we get the interRAI assessment tool in place.

CLAUDIA CHENDER: I do have a follow-up, but I guess I just want to state that I think one of the things that these seniors who are among the most vulnerable elders in our community deserve is connection, love and care. That can't be replaced, with all due respect, by technology. Notwithstanding the fact that people have differing needs and that institutions and long-term care centres want to manage that on their own, I fully believe it is the role of government to help set the standards by which we care for people.

We have heard over and over again about people who don't get toileted, people who don't get fed, people who don't get attended to in any way, and quite frankly, people who are dying of loneliness. I want to make the point that I think that government has a role here and I think we've heard that. I would just urge all of you learned public servants on this call to really press this issue and investigate this issue because it is often a matter of life and death. It's something we hear about constantly and it's completely heartbreaking.

To the making of choices, my follow-up, we hear here that facilities want to make their own choices. Of course they do, but they're doing that within a very narrow band of funds. Similarly, when we've heard on this committee and other places that a lot of the vacancies for employment are part-time, I would suggest that's not because people want to work part-time, it's because their wages are so low that people need another job to make ends meet.

In B.C., we saw that during the first wave, they hired all long-term care workers and standardized the wage. For many folks, that meant a raise of maybe even \$7 an hour that they knew they needed stable staffing across the sector because there was severe shortterm staffing. That's the kind of decisive action that I think people are looking for.

I just want to ask whether anyone - maybe this is for you, Dr. Orrell, or one of your colleagues - has looked at what B.C. did during the pandemic and has contemplated other perhaps similar action. Based on what we've heard, the wages are a major, major factor in the shortages that we are experiencing. Is this something that the department is seriously looking at?

KEVIN ORRELL: There have always been discussions about what takes place in the rest of Canada. Of course, wages by themselves are very complicated in that they have to be appropriate for the standard of living that exists. It's very different in different provinces. Some wage parity is always appropriate.

As I said, the initiative to standardize the wage across all sectors did improve the salaries for people who worked in continuing care and long-term care. If you look to other provinces, we know that those sectors in the whole spectrum of elderly care, were

disadvantaged in many other provinces as they are in Newfoundland and Labrador, Manitoba, and Ontario. We have done better in that respect.

The issue about care being denied in appropriate toileting, personal care, meals that aren't done - that would be an unusual event to have that as a common occurrence in Nova Scotia. When you do hear stories for whatever reason, and the reasons can be multifaceted, they tend to be discussed and identified a lot. That's not something - we do not experience those kinds of stories on a frequent basis in licensed facilities in our province.

If you look at the COVID-19 experience - and hats off to the people that worked in long-term care like the CCAs, the nurses, the long-term care assistants. They were incredibly devoted to the facilities in which they work and to the residents for whom they cared. We did not see the stories like we viewed on the national news where care facilities in Quebec and Ontario did not have staff showing up, where residents were neglected for days on end. That simply did not occur in Nova Scotia.

We are indebted to a very loyal workforce, a very committed workforce in the longterm care sector that has done much to assist in the management of COVID-19 during the pandemic.

THE CHAIR: We'll do one quick question each - I just ask for a question and an answer, please. We'll go with the Liberal caucus first. Mr. Horne.

BILL HORNE: I must say this is a bit of an education on the CCA program. I think it sounds to me that it's a very successful one. Certainly, it's growing as time goes on. I'm just wondering if you could comment about the bursary program and how you feel it's been successful? How will it improve the health system?

KEVIN ORRELL: The program has supported 100 people last year and 115 this year. The program is very good on a number of levels. It, firstly, encourages people who might not otherwise have the funds to train as a CCA to consider it as a profession.

I think the potential for future use of the bursary program and to further augment the CCA vacancies in the workforce are great in that there are a number of people in Nova Scotia who have been affected by the pandemic and who have either lost jobs that they will return to at some point or have lost jobs that they will not return to.

The opportunity to identify the bursary and to identify the need to underemployed or unemployed Nova Scotians is very real at this point in time. I think we'll have significant interest in it given that some of the lower wage earners in the province who have not been able to work and have been unemployed during the pandemic will be able to consider this as a profession.

THE CHAIR: One quick question from the Progressive Conservatives - Ms. Adams.

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BARBARA ADAMS: Given the fact that Ocean View Manor was not able to recruit staff for its regular residents and then it had to turn around and say they couldn't be a COVID-19 unit right now because they can't recruit staff for the COVID-19 unit, I'm wondering where you got staff. You're moving 150 people from the metro hospitals into hotels. I'm wondering if someone can comment on where you happened to have found the staff to manage that.

KEVIN ORRELL: The staff have come from the NSHA on their side. We have some contribution from the other sectors. Staff can be redeployed. The RC unit at Ocean View is a unit that we will be able to redirect staff. We've asked for volunteers from the acute care side. As occurred in the first wave, if necessary, the minister can mandate a redeployment that is not voluntary and direct people to assist if it were to come to that. I'm going to refer to Vicki for further details about that.

VICKI ELLIOTT-LOPEZ: There's just over 50 beds at the Community Transition Unit at the hotel. Nova Scotia Health Authority partnered with Northwood, as you know. Northwood decreased their census by about 100 beds as a result of the Northwood review and in preparation for the second wave. They have the ability then to redivert their resources to enable staffing at the hotel.

Given their past experience with the hotel, we're a natural partner for the Nova Scotia Health Authority because, as you know, they had their recovery unit there in wave one. With the RCU at Ocean View, staffing is well under way. They have a couple of roles that are left to fill and recruitment efforts are going well there.

THE CHAIR: Final question to the NDP caucus. Ms. Coombes.

KENDRA COOMBES: It's sad that we don't compensate our CCAs fairly, considering how important they are to us. My question is, how many CCAs will have not received the Essential Health Care Workers Program bonus because they are working in privately-run facilities? Also, do you agree that they are essential?

KEVIN ORRELL: I'll refer that to Vicki again.

VICKI ELLIOTT-LOPEZ: So with the essential worker bonus, as you can imagine, it provided some funding but decisions have to be made with respect to who would be able to access that funding. The decision was made that publicly-funded facilities across Nova Scotia would have access to that funding.

It did not go to management. It did not go to civil servants. It was directed at workers who had direct care for clients in those publicly-funded, licensed institutions that fell under the Province of Nova Scotia. [11:30 a.m.]

KEVIN ORRELL: The short answer to your last comment, yes, the CCAs are essential. When you're initiating a program like the Essential Health Care Workers Program, there were guidelines - regrettably there's a line drawn, and the people immediately below the line of course take exception to it. It was designed to do the best job we could with the funds that we were provided.

THE CHAIR: Okay, we'll give both Deputy Orrell and Deputy Dean a few minutes to wrap it up. Who would like to start?

KEVIN ORRELL: I'm happy to jump in from the health point of view. We certainly recognize all of our partners in health care, all of our stakeholders - the needs of the people that we're commissioned to care for. I've had very significant clinical experience with elderly people, and one of the issues that I see is that the pandemic has helped us to identify the very fragile parts of our system and our care delivery. We have come up with plans that we'll be working on through the rest of the pandemic and post-pandemic that will help to improve the care of patients that are looked after across the continuing care spectrum.

This will most certainly involve improvement in the workforce, we will continue to support the employment of CCAs. Many of their complaints years ago were that they had to work so hard to care for patients, there was too much physical work, so the initiative to introduce long-term care assistants to make their job situation better was a very significant benefit to them.

We would then look to offset some of the ways that people are discouraged from doing the work in health care and try to open the workforce to those who may be able to take advantage of education and certification because of loss of jobs and loss of opportunity that has been created in the pandemic.

KELLIANN DEAN: I would just like to say from the perspective of the Office of Immigration that we're happy to continue to support Dr. Orrell and his team and the NSHA and others to support where there may be gaps in the labour force in Nova Scotia and to try to identify how immigrants can help us fill those gaps. We were pleased to take your questions today, and thank you very much.

THE CHAIR: I would like to say also that I know all your time is precious, but especially during these times. You're all working extra hard and extra-long hours, and we all appreciate you taking the time out today away from your very important work to answer these questions.

I'd also like to recognize Deputy Dean, who recently received an award or recognition from the Women's Executive Network's Top 100 Most Powerful Women in Canada list for all her hard work, for the career that she's had and has coming. Being recognized as one of the top 100 is a big thing, so congratulations. I think we've all known

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you for years now, and we know how hard you work, so it has been an honour and a pleasure to work with you.

KELLIANN DEAN: Thank you very much, I really appreciate the recognition.

THE CHAIR: Did they give you an actual award or plaque or anything?

KELLIANN DEAN: Yeah, I got an award!

THE CHAIR: Wow. So from now on, when you do these Zoom meetings, I think you should have that in the background.

KELLIANN DEAN: I'll bring it into the office. (Laughter)

THE CHAIR: There you go. Thank you everyone. We're just going to jump into some committee stuff now, so you're all free to log off and go about your day. I appreciate it once again.

I know Mr. Johns has some motions that he wants to put forward, but we do have some correspondence. We do have a letter from Fred Crooks, Chief Regulatory Officer in response to a request for information made at the meeting of November 26<sup>th</sup>. Any questions or discussions on that?

We also have a letter from Lori Foran from the Nova Scotia Community College in response to a request for information made at that same meeting on November 26<sup>th</sup>. Any discussion on that? Okey doke.

Also, we do have an agenda-setting meeting coming up on January 26<sup>th</sup>. The clerk has advised me to let you all know that they need to have your proposed topics to the clerk by Monday, January 11<sup>th</sup>. Please make sure that you get those in on time, just to make their job a little easier and so they can prepare for it.

Now, we do have some motions. Do the NDP have motions also? No, okay. We will start with you, Mr. Johns. The floor is all yours, sir.

BRAD JOHNS: There are a couple of motions that I'd like to put forward coming directly out of the agencies, boards, and commissions appointments that we made today. Firstly, in regard to the Art Gallery of Nova Scotia, today we added two more honorary governors to the Art Gallery board, which brings the total number of honorary members on that board to 16. However, the actual governance is not done by honorary members - it's done by board members. Full voting board members would currently be 19, and we have 11 that are actually on there.

Considering the \$140 million announcement and project that's currently being conducted with the Art Gallery, I'm concerned that that board is actually down by eight

members. With eight members, I'm curious to know how many times that board is actually meeting, whether or not they're actually able to meet quorum to be able to meet, and it's a significant amount of money and a significant expansion.

I would move that this committee write to the Minister of Communities, Culture and Heritage to ask if the board has been having any issues with meeting quorum, and to clarify when we will be expecting to see a full complement coming of that board.

THE CHAIR: Would all those in favour of the motion please raise your hand. Contrary minded, raise your hand.

The motion is carried.

Mr. Johns, the floor is yours.

BRAD JOHNS: Thank you, Mr. Chair, and thank you members. I also have one in regard to the Council on Mi'kmaq Education. I'm quite concerned that prior to today, there were actually 13 vacancies on that. We did make some appointments today - a total complement would be 15 members on that board and we've brought that complement up to 5.

I'm not 100 per cent sure what the quorum is there, but traditionally that would be  $50 \text{ per cent} - 5 \text{ out of } 15 \text{ certainly does not meet } 50 \text{ per cent. I did bring this up in the past, I'll bring this up again. If these agencies, boards and commissions are important, I think that the government has a responsibility to support them and fill them. If they're not important, then dissolve them.$ 

I do see that we brought forward the three appointments today, like I said, so obviously the government is trying to fill that, but I'd like to know what's happening.

Given the importance of that particular committee, I would move that we write to the Minister of Education and Early Childhood Development on why the Council on Mi'kmaq Education only has five members, when he will be recommending more names to our committee, and if that council currently has enough members on it to satisfy quorum of its mandate. I would move that motion as well.

THE CHAIR: Would all those in favour of the motion please raise your hand. Contrary minded, raise your hand.

The motion is carried.

Mr. Johns, anything else?

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BRAD JOHNS: Because it directly falls within the mandate of this committee, I did take the opportunity to review all of the committee memberships and committees that exist to see what the membership complements of each of those were.

I was somewhat flabbergasted when I went through all of them. I won't read them all right now because the list is relatively extensive, but I did want to highlight a couple of things for the members of this committee to ensure that it's on record and also then make a motion.

I would highlight that the Nova Scotia Arbitration Advisory Committee currently has zero of seven members. I would highlight that the Nova Scotia Youth Advisory Council currently has zero of 12 members. When I looked, I couldn't find anyone who has ever been appointed to that committee. I could be wrong, but I did look.

Of particular importance to me, I noted that the Minister's Round Table on Environment and Sustainable Prosperity currently has 12 out of 15 positions currently vacant on that board. I did address the Mi'kmaq education one here. I have concerns we run right through those. The Farm Registration Appeal Committee is down members. They're all down members. I find it somewhat frustrating when I look at these.

Specifically, to the Executive Council's Youth Advisory Council, I'm very concerned with not just the issues the youth in this province are currently facing because of COVID-19, the changes in education, the mental health of youth, the bullying and the cyberbullying, and youth vaping and all the issues that have come forward and continue to come forward that there have never been any appointments to that board.

My motion would be that the Standing Committee on Human Resources write to the Premier's Office to clarify when appointments to the Youth Advisory Council will be made. I would, as an aside, clarify that we are writing to the Premier's Office because I believe that's the office that's directly responsible for that committee. I would put that motion forward and I have one more.

RAFAH DICOSTANZO: Mr. Chair, you're on mute. I also - if I may just interrupt for a second, I need to leave and I have Mr. Keith Irving, who's replacing me for the last 15 minutes or so. Thank you so much. I do have an appointment, but I'm being replaced by Mr. Keith Irving.

THE CHAIR: Mr. Irving, are you there? There you are.

Mr. Jessome, I see you have your hand up?

[11:45 a.m.]

BEN JESSOME: I guess I'd like to offer an amendment to Mr. Johns' motion inquiring more explicitly for an update rather than when this panel will be filled in full complement. I'd just like to add, as a general statement, that the fact that these appointments are coming to the table today for appointment while there are still gaps that are available to fill, it's clear to me that there is work and effort being done to try to fill these positions.

All members, myself included, not only in government, have a responsibility to reach out to their networks to try to interest people in doing this type of work. I'm not suggesting that we're not doing that. I guess I just wanted to take on that responsibility as a Member of the Legislative Assembly to connect with people who might be interested. To the amendment, if the language could request an update rather than when the full complement will be met - I don't know that any of us would have the ability to answer that question, even if any one of us was in that particular role.

THE CHAIR: The amendment is to - can you put that in a couple of words, Mr. Jessome?

BEN JESSOME: I think Mr. Johns was explicit in saying when that board would be filled. I would move that language be amended to say - write the office to request an update on the work that's being done to fill those positions.

THE CHAIR: There is an amendment on the floor. To the clerk - how do you want to do this? Do you want to vote on the first motion and then vote on the amendment or do you just want to amend it?

JUDY KAVANAGH (Legislative Committee Clerk): You vote first on whether to accept the amendment and then whether or not it's amended, you vote on a motion.

THE CHAIR: We will vote on the amendment first. Let's get a show of hands here. Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is amended.

Let's actually vote on the motion put forward by Mr. Johns, amended by Mr. Jessome. Would all those in favour of the motion please raise your hands. Contrary minded, raise your hands.

The motion is carried.

Mr. Johns, is there anything else?

BRAD JOHNS: The other one that I raised is important to me. It is the Minister's Round Table on Environment and Sustainable Prosperity. I would move that we write to the Department of Environment to express concerns with regard to the lack of appointments to the round table and ask for clarification on when the 13 vacant positions will be filled.

THE CHAIR: Are there any questions? Ms. Chender.

CLAUDIA CHENDER: I would just like to offer a friendly amendment that we also ask in the letter how many applications the department currently has pending. My understanding is that there are many and that they have been there a long time.

THE CHAIR: Any discussion on the amendment? Mr. Jessome.

BEN JESSOME: I guess in the same vein as my previous set of comments, I appreciate the intention that we all have to try to work towards filling these positions throughout boards. Again, I think that there is a way that we can get the information without insinuating that there is a full complement that's lying in waiting. Let's ask for an update, perhaps without adding that specific line around when the board will be full.

Again, I think we're all trying to play roles to try to recruit community members and people from across the province to fill these positions, and I'm in favour of gathering that information from departments in agreement with the two colleagues of mine who just presented motions and amendments, but I just want to be mindful that we may not have a full complement lying in waiting. So if we can get information, that would be favourable in my opinion.

THE CHAIR: Ms. Chender, go ahead.

CLAUDIA CHENDER: I just want to clarify that with this particular ABC, this is not community members - these are very specified and specialized roles. We have a job. As much as it feels like this is a rubber-stamping committee, and is often referred to as such, we need to approve these appointments and we need to understand what we're approving, and it's not insinuating - my suggested amendment was to ask how many applications there are currently under consideration. I'm not insinuating anything. I'm asking how many applications are currently under consideration. The department may or may not respond to that, but it has been an extraordinarily untimely delay in this particular committee, which is very important. By all means, if folks want to vote down that amendment, that's fine, but I don't think that there's any problem in asking that question.

THE CHAIR: Ms. Adams.

BARBARA ADAMS: I just want to make a comment. I'm in agreement with the motion, of course. Just to Mr. Jessome's comment about us all having a role in recommending people. One of the things that we don't talk about enough is that there are an awful lot of people who apply for these agencies, boards, and commissions who are never accepted. In some cases, there will be 25 applicants and they'll only choose three.

They have a very serious role to play, and COVID or not, we have a responsibility to ensure that they are all full, and when there are people telling me that they applied and never heard back, and it happens over and over again, that is a concern for me. I do think that this is important for us to move forward and to ask for the specifics in terms of timelines for when these are going to be filled.

THE CHAIR: Mr. Johns.

BRAD JOHNS: As the mover of the original motion, I certainly have no issues with the amendments Ms. Chender brought forward. I think that they fit with the intent of the motion, and I have no issues with those.

I don't necessarily agree that Mr. Jessome's in this particular case fits. I do know that we had commitments that were made on the floor of the Legislature by the Minister of Environment in regard to this committee and filling of the vacancies. Today we're no further ahead really, so I do think that there is merit in moving forward the way the original motion - with Ms. Chender's amendments.

THE CHAIR: Is there any further discussion? Would all those in favour of the motion please raise your hand. Contrary minded?

Would all those in favour of the motion as amended, please raise your hand. Contrary minded?

The motion is carried.

Mr. Johns, go ahead.

BRAD JOHNS: This will be my last one. It actually follows up on the comments that Ms. Adams was just making on the previous motion. On the Nova Scotia Human Rights Commission today, we filled three vacancies. There are still a number of - the commission would actually have 12 members. They had six before today's appointments. What I would note is that there were 28 applications that did come in. Of the 28 that came in, we've appointed three. That would still leave 25 applicants. I'm just confused at how there weren't more applicants of that 25 that would have been qualified for this particular board or helped to fill some of the complement.

I move that a letter be sent to the Minister of Justice asking why none of the other 25 applicants for this commission were sent to this committee and ask when we might see some more recommendations.

THE CHAIR: Any discussion? Mr. Jessome.

BEN JESSOME: Just briefly, in trying to access that finite information that we're - for example, we don't share people's resumes and things like that that are submitted based on privacy concerns. In a public forum, we don't share that information. Is there a way that we can conduct this to get the answers to the questions while ensuring that we protect the privacy of the applicants?

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THE CHAIR: Mr. Hebb, do you want to give us a little information on that?

GORDON HEBB: That's up to the committee. The committee could certainly receive the information privately, if the committee so wishes. That's entirely up to the committee.

THE CHAIR: I think we have to be aware that if we're going to be requesting this information, we have to respect people's privacy. I don't think we should be releasing people's resumes. Some people may be applying for boards and not feel comfortable with their employer, the public or anyone knowing. I just think we should be respectful of people's resumes. I see some people rolling their eyes, but what we could be doing is we could agree - if we're looking at asking why - we could keep their resumes and their personal information out of it and we could just get some information back from the department and back from the minister stating why overall these people were not accepted. What are people's thoughts on that? Does anyone have any thoughts? Mr. Johns.

BRAD JOHNS: To be clear, I wasn't asking to have people's resumes come forward and be made public. It seems unlikely to me that of 28 applicants that came forward - which is a high number in comparison to some of the other boards and commissions that we are seeing come forward - there were 28 applicants and only three people that we appointed today.

I can't see that people would make application to these types of commissions and boards without trying to meet the mandate and meet the requirements that are laid out so that they can actually be appointed. It seems funny to me that there are 25 applicants that didn't come forward. Were they even reviewed, I guess, is the clarification I want to see. Were they looked at? If they're missing certain qualifications, what qualifications in general were missing that set them apart from the other three that we appointed?

I'd just like some kind of clarification. When we see that number of applicants come forward and we only accept three of them - and then we're talking about why we can't compete before other boards and commissions.

THE CHAIR: Mr. Jessome.

BEN JESSOME: Just quickly, my intention for my comments was only to just try to be cautious. I appreciate the essence of the member's intention to get that information. I just only meant to try to be more explicit and cautious about maintaining that level of privacy.

THE CHAIR: Actually, just so everyone knows, the time has expired for the committee. There was no motion on the floor during the time allotted to extend the meeting. Therefore, time has expired. We will have to pick this up. The next meeting is Tuesday, January 26<sup>th</sup> from 10:00 a.m. to 11:00 a.m. and the topic will be agenda setting and appointments to agencies, boards and commissions.

With that, I would like to wish all of you a happy holiday season, Happy New Year, and Merry Christmas and I look forward to seeing all of you soon. Take care.

[The meeting adjourned at 12:00 noon]