



House of Assembly
Nova Scotia

DEBATES AND PROCEEDINGS

Speaker: Honourable Keith Bain

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First Session

TUESDAY, APRIL 4, 2023

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House of Assembly
Nova Scotia

HALIFAX, TUESDAY, APRIL 4, 2023

Sixty-fourth General Assembly

First Session

1:00 P.M.

SPEAKER

Hon. Keith Bain

DEPUTY SPEAKERS

Lisa Lachance, Kent Smith, Danielle Barkhouse, Nolan Young

THE SPEAKER: Order. We'll begin the daily routine.

PRESENTING AND READING PETITIONS

PRESENTING REPORTS OF COMMITTEES

TABLING REPORTS, REGULATIONS AND OTHER PAPERS

THE SPEAKER: The honourable member for Cape Breton Centre-Whitney Pier.

KENDRA COOMBES: Mr. Speaker, I beg leave to table a document for a member statement that I will be doing later today entitled "Whitney Pier's Lem Skeete was the last African Nova Scotian Second World War Veteran."

THE SPEAKER: The paper is tabled.

STATEMENTS BY MINISTERS**GOVERNMENT NOTICES OF MOTION**

THE SPEAKER: The honourable Minister of Community Services.

HON. KARLA MACFARLANE: Mr. Speaker, may I make an introduction before my notice?

THE SPEAKER: Please do.

KARLA MACFARLANE: Visiting us in your gallery, the Speaker's Gallery, I am pleased to recognize - and I'll ask them to stand as I read their names and a little bit of information on them - we have Shelley Curtis-Thompson. Shelley is a registered social worker who brings over 25 years experience working to end violence against women. To her role as executive director of the Pictou County Women's Resource and Sexual Assault Centre, she provides a trauma-informed approach and offers training opportunities for groups and organizations on a wide variety of issues affecting women and girls.

Next, we have Ann de Ste Croix. She accepted the position of provincial coordinator for the Transition House Association of Nova Scotia in January 2022. She is a graduate of Acadia University and Dalhousie University, as well as a former litigation paralegal who uses her skills to work collaboratively with government.

Lastly, we have Breagh MacDonald-Rahn. She has had several positions with the Transition House Association of Nova Scotia and now serves as the organization's project assistant. She is currently pursuing her Master's in Women's and Gender Studies at Mount Saint Vincent University.

Mr. Speaker, all three of these women are highly accomplished communicators and leaders. They are strong, tireless advocates for change to empower women and girls and to bring an end to gender-based violence in Nova Scotia.

I am pleased that they are here with us today, and I would ask that we provide a warm round of applause for them. (Standing ovation)

THE SPEAKER: Indeed, we welcome all visitors to the gallery today. We hope you enjoy your stay.

THE SPEAKER: The honourable Minister of Community Services.

RESOLUTION NO. 601

HON. KARLA MACFARLANE: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas we know that sexual violence and sexual assault are crimes that have negative health, social, and public safety implications that affect victims, survivors, and their families, particularly women, girls, and gender-diverse individuals; and

Whereas this month is Sexual Assault Awareness Month and the Day of Action for Sexual Assault Awareness is April 4th, providing an opportunity to raise awareness about this crime and show our support for survivors; and

Whereas we must continue and amplify conversations about rape culture, misogyny, missing and murdered Indigenous women and girls, and other important issues around sexual violence;

Therefore be it resolved that all members of this House of Assembly join me in encouraging Nova Scotians to learn more about the issue of sexual violence and resources available in their communities.

Mr. Speaker, I request waiver of notice and passage without debate.

THE SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

All those in favour? Contrary minded? Thank you.

The motion is carried.

The honourable Minister of Seniors and Long-term Care.

HON. BARBARA ADAMS: Mr. Speaker, before I read my notice of motion, I beg leave to make some introductions.

THE SPEAKER: Please do.

BARBARA ADAMS: Visiting us in the West Gallery on this National Caregiver Day, I'm honoured to welcome members of the board, staff, and caregivers of Caregivers Nova Scotia, and I'll ask them to rise as I call out their names: CNS board chair Patricia Murray; executive director Jenny Theriault; office administrator Brenda Sangster;

caregiver support coordinator JoAnne Connors; caregiver support coordinator Therese Henman-Phillips; and Lindsay Jones, Penney MacAuley, and Steven Neatt, all caregivers.

Their work is invaluable in supporting caregivers across Nova Scotia. I ask them to rise and accept a warm welcome to the Legislature, and happy National Caregiver Day. (Standing ovation)

THE SPEAKER: Once again, we welcome all visitors to the Legislature today and every day.

The honourable Minister of Seniors and Long-term Care.

RESOLUTION NO. 602

HON. BARBARA ADAMS: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas many Nova Scotians play the role of caregiver to loved ones in their homes and communities, providing physical, emotional, and mental health support day in and day out; and

Whereas the commitment, kindness, and patience of these caregivers makes a huge difference in the lives of those they care for, and often goes unseen; and

Whereas the first Tuesday in April marks National Caregiver Day and gives us all the opportunity to put a brighter spotlight on their amazing work;

Therefore be it resolved that all members of this House join me in recognizing National Caregiver Day and thank all of the caregivers in our province for all that they do.

Mr. Speaker, I request waiver of notice and passage without debate.

THE SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

All those in favour? Contrary minded? Thank you.

The motion is carried. (Applause)

The honourable Minister of Communities, Culture, Tourism and Heritage.

HON. PAT DUNN: Mr. Speaker, I beg leave to make an introduction. Joining us in the West Gallery today is a champion of equity, diversity, and inclusion, Andrew Paris.

Andrew Paris is founder and president of the Black Rock Initiative. Andrew also works at the Canadian Sport Institute Atlantic as the Coaching Lead for Equity, Diversity, Inclusion and Mentorship. You will often see him on the ice striving to change the face of curling through his Black Rock Initiative. If he isn't there, he's delivering equity, diversity, and inclusion training here in Nova Scotia in both sport and recreation sectors or taking part in EDI initiatives across Canada.

I would ask Andrew to stand and members to give him a very warm welcome. (Standing ovation)

THE SPEAKER: Once again, a warm welcome to you as well.

The honourable Minister of Communities, Culture, Tourism and Heritage.

RESOLUTION NO. 603

HON. PAT DUNN: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas April is Celebrate Diversity Month and a time to recognize and celebrate the beautiful tapestry of our unique cultures, backgrounds, and rich traditions that make Nova Scotia such a wonderful place to live; and

Whereas programs like the Black Rock Initiative and the Equity, Diversity, and Inclusion in Sport Conference Series help address barriers and create more opportunities for people of all races, backgrounds, and abilities to participate fully in all that Nova Scotia has to offer; and

Whereas we all can do more to find value in each other's experiences, cultures, abilities, and unique characteristics in order to create safe and welcoming environments free of harassment, discrimination or abuse of any kind in all walks of life;

Therefore be it resolved that all members of the House of Assembly join me in acknowledging April as Celebrate Diversity Month and thank everyone in this province working to make Nova Scotia a more inclusive and welcoming place to live, work, and play.

Mr. Speaker, I request waiver of notice and passage without debate.

THE SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

All those in favour? Contrary minded? Thank you.

The motion is carried.

The honourable Minister of Natural Resources and Renewables.

RESOLUTION NO. 604

HON. TORY RUSHTON: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Nova Scotia's provincial parks are natural treasures that attract visitors to our province and offer a wealth of health, recreation, economic, and environmental benefits to Nova Scotia; and

Whereas our parks are seeing unprecedented growth over the past 10 years, we had another record-breaking year in 2022 with 1.5 million visitors and more than 99,000 camper nights, and we're investing more than \$10 million this year to upgrade infrastructures with accessibility as a key priority; and

Whereas today we start taking reservations for camp sites in our provincial parks, rolling out the opportunities over three days to manage the high volume of interest;

Therefore be it resolved that all members of this House recognize the value of our provincial parks for a healthy environment, a healthy economy, and a healthy Nova Scotia.

Mr. Speaker, I request waiver of notice and passage without debate.

THE SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

All those in favour? Contrary minded? Thank you.

The motion is carried.

[1:15 p.m.]

INTRODUCTION OF BILLS

Bill No. 295 - Entitled an Act to Establish a Cross-border Emergency Ambulance Services Strategy. (Elizabeth Smith-McCrossin)

Bill No. 296 - Entitled an Act to Amend Chapter 385 of the Revised Statutes, 1989, the Real Property Act, to Eliminate Covenants that Restrict Access to Food or Medicine. (Suzy Hansen)

Bill No. 297 - Entitled an Act to Amend Chapter 217 of the Revised Statutes, 1989, the Income Tax Act, to Provide Investment Tax Credits for Clean Electricity and Technology. (Hon. Iain Rankin)

Bill No. 298 - Entitled an Act Respecting Energy Efficiency. (Hon. Iain Rankin)

THE SPEAKER: Ordered that these bills be read a second time on a future day.

NOTICES OF MOTION

STATEMENTS BY MEMBERS

THE SPEAKER: The honourable member for Truro-Bible Hill-Millbrook-Salmon River.

PARIS, ANDREW: CURLING DIVERSITY WORK - THANKS

DAVE RITCEY: I rise today to recognize Truro's Andrew Paris for being named the first Equity, Diversity, and Inclusion Lead with the Canadian Sport Institute Atlantic, and most recently for his role with the Canada Games mission staff in 2023 in P.E.I.

Andrew began coaching in 2006 at the Dartmouth Curling Club and quickly developed an interest in making curling accessible to everyone. He assumed the lead role of the club's junior program in 2013 and within two years, grew the program from 30 to 135 kids.

His dedication has earned him the Volunteer of the Year Award from Nova Scotia Curling in 2016 and he was named a finalist for the National Volunteer of the Year by Curling Canada. In 2020, Andrew also founded the Black Rock Initiative, a learn-to-curl program for Black and Indigenous youth.

I would like to thank Andrew for his dedication to BIPOC youth curling and his mentorship throughout the province.

THE SPEAKER: The honourable member for Yarmouth.

NAT'L CAREGIVER DAY: HONOURING CONTRIBS. - RECOG.

HON. ZACH CHURCHILL: I'd like to say hi to the caregivers and their advocates who were introduced earlier today. I want to rise today to recognize that today is National Caregiver Day.

Caregivers in Nova Scotia provide families relief and a renewed sense of hope every single day. Delivering care to patients as they deal with life-limiting illnesses requires an extraordinary level of compassion and commitment.

Joining us in the gallery today are team members from Caregivers Nova Scotia. They work to provide programming, services, and strong advocacy for a group that is far too often overlooked and underappreciated in our society. The emblem of Caregivers Nova Scotia is the hummingbird. It represents a resilient creature, often flying solo and accomplishing what for many would be impossible tasks. The impact caregivers have on patients and families is nothing short of life-changing. They are there to support families when they need it most.

I would like to invite everyone to join me in celebrating Caregivers Nova Scotia, as well as all the caregivers in the province, for keeping our communities healthy, cared-for, and loved. They certainly make our province and our communities a better place to be.

THE SPEAKER: The honourable member for Dartmouth North.

N. PRESTON SWIM PGM.: TEACHING SKILLS - THANKS

SUSAN LEBLANC: Mr. Speaker, the North Preston Swim Program is a collaboration between the Zatzman Sportsplex in Dartmouth North/Dartmouth South, the North Preston Community Centre, and Sport Nova Scotia's reSPORT program to teach fundamental swimming and water safety skills to youth from North Preston. Since 2021, almost 100 youth have participated in the program. Such a program is needed as there is no community pool or supervised beaches in the community.

A real collective effort, the North Preston Community Centre sent trusted recreation leaders as chaperones while Sportsplex lifeguards ran the lessons and, as the Sportsplex is a fair distance from North Preston, Sport Nova Scotia provided funding to support transportation costs to and from North Preston. Later the community came together to organize carpooling.

I ask that the Legislature join me in thanking the staff and volunteers at the North Preston Community Centre, the Zatzman Sportsplex, and Sport Nova Scotia for ensuring that every youth has an opportunity to learn to swim.

THE SPEAKER: The honourable member for Antigonish.

SEXUAL ASSAULT AWARE. MO.: SHOWING SUPPORT - RECOG.

HON. MICHELLE THOMPSON: Mr. Speaker, April is Sexual Assault Awareness Month and today, the first Tuesday in April, is a Day of Action. This is a day not only to raise awareness of the issue of sexual violence in our communities, but also to acknowledge the impact it has on so many and to take action to prevent sexual assault, harassment, and abuse before they happen.

As a former sexual assault nurse examiner, I have witnessed first-hand the devastating and lasting impacts of sexual violence on survivors, their families, and our communities. We all have a role to play in ending sexual violence in Nova Scotia. We must acknowledge and support survivors of sexual assault of all genders, not just today on Sexual Assault Awareness Month Day of Action, but every single day.

I ask all members of this House to join me in a commitment to action to modelling healthy relationships at home and in our communities, talking openly about boundaries and consent, and creating safe and supportive environments for survivors of sexual assault.

THE SPEAKER: The honourable member for Bedford Basin.

HUSTINS, ARTHUR JAMES: DEATH OF - TRIBUTE

HON. KELLY REGAN: Mr. Speaker, I would like to acknowledge the passing in February of a Bedford icon, Arthur James Hustins. Some people called him “Mr. Bedford.” I think Peter Kelly was quoted as calling him Mr. Bedford, but Arthur James Hustins was a passionate outdoorsman who loved to hunt and fish, and he was doing that right up until shortly before he died.

He was a community leader. In fact, I worked for him for a while at the Grace Maternity Hospital Foundation, as a matter of fact, but most of all he was a builder and a promoter of all things Bedford. A number of the iconic buildings in Bedford were built by his family, including Sun Towers, Sunnyside Mall, Esquire Motel and Restaurant, Bedford Tower, and more. I would like to acknowledge his passing and note that he is survived by his wife Valerie and his children Jane, Shelley, A.J., Jeannette, J.D., and all their families, too. He was a larger-than-life figure, and he will be missed.

THE SPEAKER: The honourable member for Halifax Citadel-Sable Island.

LISA LACHANCE: Mr. Speaker, I beg leave to make an introduction with respect to my member statement.

THE SPEAKER: Please do.

LISA LACHANCE: We are joined today by Rachel Shepherd, who is the executive director of Chebucto Links. Please give her a warm welcome. (Applause)

THE SPEAKER: Again, we welcome all visitors to the House. Enjoy your stay.

The honourable member for Halifax Citadel-Sable Island.

CHEBUCTO LINKS: SERVS. FOR SENIORS - THANKS

LISA LACHANCE: Mr. Speaker, it is no secret that most Nova Scotians are having a harder time making ends meet than ever before and many are struggling with food insecurity. Our seniors are especially vulnerable. Chebucto Links is a seniors' service organization in Halifax that makes sure that our seniors don't have to go without. They offer a range of innovative online and in-person programs. They started a very successful Valentine Veggies program where anyone could donate five dollars to give a local senior a large bundle of local produce. Volunteers delivered veggies to very happy seniors around the peninsula, and this program continues today. Today is the delivery of Easter baskets.

I ask my fellow members to join me in congratulating and thanking Rachel Shepherd and Chebucto Links for providing healthy local foods to our seniors in a time of great need.

THE SPEAKER: The honourable member for Dartmouth East.

NAT'L CAREGIVER DAY: HONOURING CONTRIBS. - RECOG.

HON. TIMOTHY HALMAN: Mr. Speaker, the first Tuesday of April marks National Caregiver Day, a time to honour those who selflessly devote their time, energy, and skill to the well-being of others. So many people in our communities form a special bond with their caregivers, and for good reason. They are so often the unsung frontline stars who day after day care for our family members who rely on their assistance.

Nova Scotians understand the important work that is done every day by caregivers in our province. They make a profound difference in the lives of others. For that, we are profoundly grateful.

I ask all members of this House to join me in recognizing the invaluable contributions of the caregivers in our province.

THE SPEAKER: The honourable member for Sydney-Membertou.

STEVENS, JERRY: RETIREMENT - CONGRATS.

HON. DEREK MOMBOURQUETTE: Mr. Speaker, I rise in my place today to recognize Jerry Stevens from Sydney, who is now officially retired from Cape Breton Beverages after a 47-year career. Jerry is well-known in the community for not only working for Cape Breton Beverages but for the work that he did with the company and the many organizations that he supported over the years. I personally want to thank Jerry and wish him and Shelley all the best as Jerry moves on to retirement. From my family to his, congratulations, Gerry. Thanks for everything that you have done for our community. I made one mistake with you before: sitting in your seat at the Cedars Club. I'll make sure it never happens again. Jerry, congratulations on your retirement - well-deserved.

THE SPEAKER: The honourable member for Halifax Chebucto.

PAID SICK LEAVE: IMPORTANCE - RECOG.

GARY BURRILL: As of January 1st this year, workers in all federally regulated workplaces in Canada have access to paid sick leave under amended provisions of the Canada Labour Code. This includes workers in a broad range of private sector settings, including interprovincial air, rail, road, and marine transportation; banks; and courier services. Federal paid sick leave began with three days of paid sick leave becoming available at the start of January.

Since then, workers are acquiring an additional day of paid sick leave each month until it reaches 10 paid sick leave days later this year. Paid sick leave for federally regulated workers has been achieved through the March 2022 Confidence and Supply Agreement, under which the NDP agreed to support the Liberal federal government until 2025 in exchange for action on certain issues, including paid sick leave. The Progressive Conservative government of Nova Scotia, regrettably, refuses to make paid sick leave a part of our province's legislated labour standards.

THE SPEAKER: The honourable member for Glace Bay-Dominion.

GORDON, SGT. BARRY: 49 YRS. OF POLICE SERV. - RECOG.

JOHN WHITE: Mr. Speaker, approaching five decades of police service, Sgt. Barry Gordon is an inspiration to all police officers and to all Nova Scotians. Motivated by his father, Officer Gordon knew his life dream early, and it began at 20 years old at the Glace Bay police department.

Eight police chiefs later, he has never forgotten the words of his first chief, Mark Gardiner, who said, "Work with the community." I witnessed Barry's dedication with the

police Boys Club when he ran the police youth division. He has served major crime and traffic, and he is now head of Membertou Division, where he continues to enjoy this dynamic community.

At 49 years of service, Barry is the longest-serving active police officer in Nova Scotia. He was recognized with an award from the Canadian Cancer Society. He received the Medal of Bravery. In January, he received the Queen Elizabeth II's Platinum Jubilee medal. Barry represents traits of bravery. He is diligent, honourable, kind, caring, and passionate, an inspiration to all of us. Barry is an example not only to police officers but to all residents of Nova Scotia.

THE SPEAKER: If I can comment as well, after 50 years' service, Barry is still going strong.

The honourable member for Halifax Atlantic.

U12 DOUCETTE RINGETTE TEAM: CH'SHIP WIN - CONGRATS.

HON. BRENDAN MAGUIRE: Mr. Speaker, I would like to take a moment to recognize the U12 Doucette ringette team, which recently won silver in the provincials. Congratulations to Mairyn Doucette, Kendall Gray, Maryn Bettle, Fiona Fawcett, Johanna Lobban, Catherine Shea, Aubrey Little, Kylie Murphy, Peter Shea, Rayan El-Bitar, Isla Saweczko, and Mahlia Calnen. Great job done by all. We are all so very proud of you.

THE SPEAKER: The honourable member for Halifax Needham.

HAMILTON, WAYN: QPJ MEDAL RECIP. - CONGRATS.

SUZY HANSEN: Mr. Speaker, I rise today to recognize Mr. Wayne Hamilton, a recipient of the Queen Elizabeth II's Platinum Jubilee Medal, which was presented in December 2022 in Halifax Needham.

Mr. Wayne Hamilton is an educator, historian, an activist, and a motivator. Wayne has worked tirelessly in our communities to make sure that our youth and future are educated in the history of our ancestors. Mr. Hamilton is truly a blessing, and he continues to make connections with the Motherland to create opportunities for our youth to connect, knowing that these interactions with our youth and the Motherland are integral to our future.

I would like all members of this House to help me in congratulating Mr. Wayne Hamilton on his receiving of the Queen's Jubilee Medal.

THE SPEAKER: The honourable member for Lunenburg West.

[1:30 p.m.]

BRIDGEWATER GUARDIAN PHARMACY: COM. SERV. - CONGRATS.

HON. BECKY DRUHAN: Mr. Speaker, community pharmacies are important health care providers, and we value their support and care. I want to take a moment to recognize one of our local pharmacy teams.

This February, the Bridgewater Guardian Pharmacy was one of 12 pharmacies in Nova Scotia selected to take part in the Community Pharmacy Primary Care Clinics Program. It was created in partnership with our government, Nova Scotia Health Authority, and the Pharmacy Association of Nova Scotia.

Pharmacist and owner Pam Kennedy and her staff were named the 2022 Pharmacy Team of the Year by the Pharmacy Association of Nova Scotia for their exceptional teamwork and commitment to the advancement of pharmacy services and the profession of pharmacy. This team went above and beyond to serve our community during the height of COVID-19, providing much-needed health care services, including administering over 26,000 COVID-19 vaccinations.

Pam and her team are prime examples of pharmacy excellence in the province, says Allison Bodnar, CEO of the Pharmacy Association of Nova Scotia. She and her team continue to inspire her community and colleagues every day.

I ask all members of the Nova Scotia House of Assembly to join me in congratulating the Bridgewater Guardian Pharmacy's dedicated team, and thanking all Nova Scotia pharmacists for their care and their service.

THE SPEAKER: The honourable member for Annapolis.

POWER, PAT: DEATH OF - TRIBUTE

CARMAN KERR: Our community of Annapolis Royal is in mourning as we lost one of our greatest community champions this past Friday. Pat Power was our deputy mayor and member of town council for nearly 15 years. She served on the Annapolis West Health Foundation, the Annapolis Valley Regional Library Board, Valley Waste, Kings Transit, and the Annapolis Royal United Baptist Church, among several other groups that I don't have time to mention.

Pat enjoyed crosswords, scrabble, and crib, yet family was what she loved more than anything else and made her most proud. I respected Pat very much. She was intelligent, thoughtful, and direct. I could rely on her for solid advice on health care issues, and as a compass on where our constituents stand on most issues. I want to extend my

condolences to her children Rhonda and Stephen, her extended family, her friends, and colleagues.

THE SPEAKER: The honourable member for Cape Breton Centre-Whitney Pier.

SKEETE, LEM: DEATH OF - TRIBUTE

KENDRA COOMBES: Mr. Speaker, I rise today to pay tribute to Lem Skeete of Whitney Pier. On November 6, Lem Skeete passed away at 100 hundred years old, surrounded by family and friends. He was also the last surviving African Nova Scotian Second World War veteran. Lem served as a mechanic while stationed overseas. When speaking to the *Cape Breton Post*, Lem stated he was thankful to have never been shot at, but that didn't stop him from going throughout his service with immediate threat and danger of violence from Allied forces members.

Lem left behind an incredible legacy, a 72-year marriage, and a family. In Whitney Pier, he owned his own business, and founded the not-for-profit Whitney Pier Day Care Centre. He served as the executive director of the United Mission, a vital community space which held health clinics, marriages, baptisms, employment services, youth events, and after-school programs. Lem helped to create the Whitney Pier not-for-profit housing society and was a recipient of the Tom Miller Human Rights Award.

THE SPEAKER: The honourable member for Cumberland North.

ELIZABETH SMITH-MCCROSSIN: Mr. Speaker, I beg leave to make an introduction.

THE SPEAKER: Please do.

ELIZABETH SMITH-MCCROSSIN: I'd like to introduce someone who is no stranger to this place, my husband, Dr. Murray McCrossin, who is visiting today. I'd like to thank him. Sometimes, as the members here know, this work that we do is harder on our family - or just as hard on our family - as it can be for us. I want to thank him for coming today, and for being such an incredible partner, friend, and husband. (Applause)

THE SPEAKER: Again, we make everyone welcome. Glad to see you.

The honourable member for Cumberland North.

CUMB. ACAD. SOC.: INCORPORATION - RECOG.

ELIZABETH SMITH-MCCROSSIN: Mr. Speaker, I'm pleased to rise today to recognize the recent incorporation of the Cumberland Acadian Society. On February 15th, a group of interested citizens gathered for the founding meeting of the new society,

following which the society received its certification of incorporation under the Societies Act of Nova Scotia. The initiative was initially promoted by Amherst Deputy Mayor Leon Landry, retired Member of Parliament Bill Casey, and retired lawyer Morris Haugg, who were elected as president, treasurer, and secretary, respectively.

The idea of having an organization that promotes the rich Acadian ancestry, history, and culture, as well as the historic Acadian sites in the area, has quickly found widespread support. Amherst and surrounding communities have a much larger segment of its population with Acadian roots than one would think, despite the fact that many have non-French names, and very few are fluent in the French language. The new society will give a voice to those people in the Cumberland area who are proud of their Acadian roots and assist others in learning more about our area's Acadian history.

THE SPEAKER: The honourable member for Lunenburg.

COCHRAN, MAXINE: TRAILBLAZING MLA - RECOG.

HON. SUSAN CORKUM-GREEK: Mr. Speaker, I rise today to bring recognition to a trailblazing Nova Scotian, the late Maxine Cochran. Maxine was elected in Lunenburg Centre in June 1984, and became our province's first female Cabinet Minister in November 1985, when she was appointed the Minister of Transportation by Premier John Buchanan.

Today marks the anniversary of Minister Cochran's maiden speech in this Legislative Assembly. I am proud to be standing in this Legislature 37 years later, also representing Lunenburg, because of strong women like Maxine Cochran, for whom my late mom campaigned tirelessly.

I ask all members of this Legislature to join me in celebrating Maxine Cochran and all of the women MLAs who went before us, who blazed a trail so that we can be a powerful voice for our communities.

THE SPEAKER: The honourable member for Fairview-Clayton Park.

HON. PATRICIA ARAB: Mr. Speaker, I beg leave to make an introduction. In the West Gallery is Robin Grant, Strategic Coordinator for Digitally Lit Atlantic Canadian Youth Read. I ask that she stand and receive the warm welcome of the House. (Applause)

THE SPEAKER: Welcome to today's sitting.

The honourable member for Fairview-Clayton Park.

GRANT, ROBIN: SUPPORT OF PUBLISHING SECTOR - RECOG.

HON. PATRICIA ARAB: Mr. Speaker, in honour of National Reading and Small Press Month, I would like to celebrate community member Robin Grant and her efforts to support Nova Scotia's publishing sector.

The co-author of Nimbus Publishing's upcoming title *Amazing L'nu'k: A Celebration of the People of Mi'kma'ki*, Robin and Epekwitken Mi'kmaw poet laureate Julie Pellissier-Lush highlight the accomplishments of Kjjipuktuk Mi'kmaw alongside Mi'kmaw from across Mi'kma'ki.

Robin is also the founder of the youth-led organization Digitally Lit Atlantic Canadian Youth Read. Through this organization, Nova Scotia book publisher Nimbus works to empower youth to take tremendous pride in sharing their local stories.

I speak for many when I say that all of our prosperity is deeply connected to the past, present, and future stories we tell. I ask all members to join both Robin and me in celebrating these and all authentic local stories as we pledge our continued commitment to creating great stories together.

THE SPEAKER: The honourable member for Dartmouth North.

BANGLADESHI ASSOC.: FAMILY SUPPER - THANKS

SUSAN LEBLANC: My family and I have been attending Family Suppers at The North Grove for years, and we were especially pleased to attend the family supper on March 6th.

That night's supper featured a meal cooked by members of the Bangladesh Community Association of Nova Scotia. The yummy, hot food included a halal curried beef dish called beef rezela with rice - with a chicken and vegetarian option as well.

Dartmouth North residents Golam Kibria and Lenufer Yeasmin brought their knowledge of Bangladeshi cuisine to the staff and volunteers at The North Grove, and the result was truly delicious. Family supper was packed that evening with folks who have been attending for years and many Bangladeshi newcomers who live in Dartmouth North. Everyone left with full bellies and feeling a little more connected to their neighbours.

I ask the House to join me in thanking the Bangladesh Community Association of Nova Scotia for sharing its culture so wonderfully through the universal language of food.

THE SPEAKER: The honourable member for Sackville-Uniacke.

MILLWOOD HS: AFRICAN HERITAGE MURAL - RECOG.

HON. BRAD JOHNS: Mr. Speaker, today I would like to recognize a group of students and staff at Millwood High School who recently worked together to design, paint, and unveil a mural that represents the heritage of our African Nova Scotian communities.

With the help of staff, Millwood students Novah McIntyre Lepage, Alvyn Kyalo, Damarion Downey, Zach Campbell, Denayjah White, and Keenan Oliver painted a mural of the map of Nova Scotia, and incorporated colours of the African Nova Scotian flag - red, gold, green and black. Included in the mural are the 47 different African Nova Scotian communities across our province.

The work that these students have done to help keep the legacy of our African Nova Scotian communities alive through the form of art demonstrates the continued support of Millwood community towards African Nova Scotia Month each year.

THE SPEAKER: The honourable member for Bedford South.

MURRAY, PATRICIA: 88TH BIRTHDAY - CONGRATS.

BRAEDON CLARK: Mr. Speaker, today I'd like to wish a happy 88th birthday to my constituent Patricia Murray.

Patricia was born on April 4, 1935 in Sydney, Cape Breton. She has spent her life living between Cape Breton and the HRM. She had four children, and as a single mother she put herself through university to get her Bachelor of Business Administration degree. For many years, she worked for the provincial Department of the Environment, and in 1977, she opened the department's office in Sydney.

Patricia enjoyed a wonderful birthday over the past weekend with her family and friends. I ask all members of the House to join me in wishing Patricia Murray a happy 88th birthday.

THE SPEAKER: The honourable member for Halifax Citadel-Sable Island.

PYESMANY, DR. ALLAN: DEATH OF - TRIBUTE

LISA LACHANCE: Mr. Speaker, I rise today to mark the passing of Dr. Allan Pyesmany, a long-time Halifax Citadel-Sable Island resident.

Allan began his career at the IWK Children's Hospital in 1968. He very quickly earned a reputation as an oncology specialist, who supported families with hope, dignity, and empathy. He would not accept the high rate of death from childhood cancers at the time, and worked to ensure the best available evidence was adopted quickly here in Nova

Scotia. His legacy includes thousands of people throughout the world as long-term cancer survivors.

Among other roles, Allan was a founding member of the Halifax Ronald McDonald House, served on the Canadian and international boards of Ronald McDonald House Charities, and was a member of the Board of Governors of the Canadian Cancer Society. Perhaps most importantly, Allan was a devoted husband and wonderful father and papa, every present for his girls and their friends with a listening ear. We remember him as always smiling, gentle, and kind.

I ask all members to join me in sharing their sympathies with the family and friends of Dr. Allan Pyesmany.

THE SPEAKER: The honourable member for Guysborough-Tracadie.

U13 WHITECAPS: CH'SHIP MEDAL WIN - CONGRATS.

HON. GREG MORROW: Mr. Speaker, I rise today as a proud hockey dad and coach to recognize the U13-AAA Quad Country Whitecaps on a fantastic hockey season. Among the highlights, the Whitecaps earned a silver medal at the Sobeys Cup in November, after a hard-fought shoot-out loss in the championship game. They followed that up with a SEDMHA championship later that same month.

These Whitecaps played four one-goal games at Provincials here in Halifax last month. Although they didn't make it to the final, their season was not over. They hosted the first-ever U13 Female Atlantic Hockey Championship at the Port Hawkesbury Civic Centre this past weekend, and came away with a silver medal after a memorable and thrilling championship game against the Metro West Force Warriors - who the member for Bedford South congratulated yesterday so eloquently. I will leave it at that because it still stings a little bit over on this side - but they should all be extremely proud.

I'd like the House to join me in recognizing the following players on their accomplishments. Izzy Sponagle, Carrie Doiron, Ali Chisholm, Carly Landry, Flora Murphy, Fyfe Francis-MacDonald, Gracie Kenny, Joanna Cleary, Julia MacLellan, Kathryn MacKinnon, Krista Beaton, Maddie MacEachern, Olivia Morrell, Ruby Brophy, Shawnn Richards, Tessa MacKinnon and Lucy Morrow.

THE SPEAKER: The honourable member for Hammonds Plains-Lucasville.

FATHER - BIRTHDAY WISHES

HON. BEN JESSOME: Today I'd like to rise to wish my father a happy 64th birthday. Dad, you've got a full year until you turn 65, but only a few more months to

figure out what our little one's going to call you - so you're going to have to figure that out a little more promptly. My brothers and I love you. Our families love you. Happy Birthday.

THE SPEAKER: The honourable member for Halifax Needham.

BUNDY, DEVON, QPJ MEDAL RECIP. - CONGRATS.

SUZY HANSEN: I rise today to recognize Mr. Devon Bundy, the recipient of the Queen Elizabeth II's Platinum Jubilee Medal, which was presented in December of 2022 in Halifax Needham.

Mr. Devon Bundy received the medal for his contributions in health care services and social services. It's hard to call him Mr. Devon Bundy, because I've known Devon since he was six-years old, as a tutor in the Grade 1 program - and Devon would give you a run for your money. I'm so proud to see where he has expanded his life, even now - and he's still pretty young to me - but I'm so proud of him.

He's always been about community, whether it's on the board in the community in which he grew up, or in the health care or social work realm, where Devon shares his expertise and lots of laughs. Even working within community volunteering his time, he's helped our communities thrive.

I'm honoured and privileged today to stand and recognize this young man, Devon Bundy.

THE SPEAKER: The honourable member for Cumberland North.

CUMB. ACAD. SOC.: ACAD. ROOTS - RECOG.

ELIZABETH SMITH-MCCROSSIN: Mr. Speaker, I'd like to continue my comments about the Acadian Society that's been recently formed in Cumberland County. The Acadian Society already has over 200 followers on its Facebook page, and that number is certainly going to continue to grow.

I'm very proud to say that I have Acadian roots. My maternal grandfather, Leon Melanson, was a descendant of Charles Melanson, who was deported from Nova Scotia during the Expulsion of the Acadians. My grandfather, who worked overseas during World War II and worked as a coal miner in Springhill, was actually in both bumps. In the second bump, he lost his leg and a kidney.

My grandfather was certainly proud of his Acadian heritage and culture, and passed that along to his family. In that spirit, three of our children know the language. They went through French immersion. I've studied the language myself, but I'm not quite competent to speak it here in this Legislature yet, thank you.

I ask my colleagues to join me in congratulating the Cumberland Acadian Society and wish them well in this new endeavour.

[1:45 p.m.]

THE SPEAKER: The honourable member for Colchester-Musquodoboit Valley.

HUMPHREY, BRENDA: QPJ MEDAL RECIP. - RECOG.

LARRY HARRISON: Mr. Speaker, I rise to honour the outstanding contributions of Brenda Humphrey, a recent and deserving recipient of Queen Elizabeth II's Platinum Jubilee Medal. During a time of worldwide turmoil and upheaval, Brenda, utilizing her own time, money, and space, established Musquodoboit Valley Square Roots, which provides locally grown fresh produce at a discounted price, and also holds Feminine Friday, which provides feminine hygiene products, condoms, and diapers to use in need.

She also manages a website where she takes in catalogues, photographs, and donations to distribute free of charge to community members in need. Members of the Musquodoboit Valley are grateful for the foresight, dedication, and support that Brenda has provided over the last two and a half years. An outstanding volunteer, she addressed issues around parenting, food security, and access to hygiene products.

I wish to express my utmost gratitude to Brenda for her compassion and commitment to her community.

THE SPEAKER: The honourable member for Clayton Park West.

RAFAH DICOSTANZO: Mr. Speaker, I beg leave to make an introduction.

THE SPEAKER: Please do.

RAFAH DICOSTANZO: We have with us in the gallery two young gentlemen who have done so much work for Halifax West. They are both staffers with the office of our MP, Lena Diab. We have Chris Abraham and Sam Gruchy, I believe. Sam looks after all the immigration files. He is bombarded by my office and every office around here. He is doing an amazing job at sifting through hundreds of immigration situations that we keep sending to him.

Chris is going out with the MP to every event. Lena is known to go to three or four events every night. He is an amazing guy who can do it. I am grateful that sometimes I beg him to take pictures for me as well.

THE SPEAKER: I welcome you both to the Legislature today.

The honourable member for Clayton Park West.

BIRDLAND REC: HOSTING EVENTS - THANKS

RAFAH DICOSTANZO: Mr. Speaker, I recently had the pleasure of attending an event at D.J. Butler Park with a group of community members who volunteer their time to turn a tennis court at the park on Flamingo Drive into an outdoor skating rink for the Winter months.

On March 5th the community group known as Birdland Rec organized a free event, inviting members of the community to skate and toboggan. There was hot chocolate, cookies, and great conversations.

On April 2nd the group also hosted a community Easter egg hunt, where over 80 children participated. Children searched for eggs and their faces were painted and they enjoyed drinks and snacks.

I would especially like to thank Alesha Baker, Wendy Holly, Sara Cleveland, Eari McLean, and Jlenia Marchi for planning events like these. I would also like to thank Nick Barker, Nathan Guy, Jason Bond, and Ron Burke for all their hard work building the rink, preparing the ice and clearing snow. The rink would not be there without all their hard work and effort. It is great to have a group like this in my constituency and we need more community events like this. I applaud Birdland Rec for all their hard work and bringing the community together.

THE SPEAKER: Just a reminder that member statements are one minute, not two.

The honourable member for Cape Breton Centre-Whitney Pier.

FRIENDS OF COLLIERY LANDS PARK: CLEANUP - THANKS

KENDRA COOMBES: Mr. Speaker, I rise today to recognize and thank the Friends of Colliery Lands Park in New Waterford. Residents Ray Timmons, Darlene Darroch, Gwen Gouthro, and Joey Lever have stepped up to breathe life back into the park on the former No. 12 and No. 16 Collieries. In the members' words, it was neglected, and I can attest to that.

The Friends of Colliery Lands have been hard at work getting the overgrown brush cleared and cleaning up the neglected areas of the park. The once-wooden ramp and deck overlooking the pond had fallen into disrepair. Today a beautiful deck and ramp have been built thanks to the hard work of these residents. They are continuing their fundraising efforts and plan to create more accessible green space for all to enjoy.

THE SPEAKER: The honourable member for Waverley-Fall River-Beaver Bank.

ARCHIBALD, EMMA: CAN. GAMES MEDAL WINS - CONGRATS.

HON. BRIAN WONG: Mr. Speaker, today I stand to congratulate Fall River's Emma Archibald, who attained three medals, including two gold, for Nova Scotia at the 2023 Canada Games in P.E.I. The 19-year-old decorated cross-country skier won gold in the 5 km Free (Interval Start) Para-Nordic Standing Female event. Emma also won gold in the 2.5 km Classic and silver in the sprint race.

Emma has been a superstar from Day 1, constantly putting her sport and her hometown first. Emma's drive, passion, and pride put her at a huge advantage, and we could not be more proud of her accomplishments. She has represented herself and Nova Scotia exceptionally well on the national stage. Emma was also asked to be the flagbearer for the closing ceremonies at the Canada Games.

Please assist me in congratulating Emma Archibald and wish her the best of luck in her studies in Ottawa.

THE SPEAKER: The honourable member for Northside-Westmount.

DONORS: EASTER TREATS FOR KIDS - RECOG.

FRED TILLEY: Today I would like to recognize a couple of groups within Northside-Westmount. First of all, I would like to thank a restaurant in North Sydney, the Lobster Pound and Moore, who this weekend will deliver treats to the first 150 kids who come down to their restaurant in co-operation with some local donations. Congratulations and thanks to the Lobster Pound and Moore for their contributions to our community.

I would also like to thank the Sydney Mines & District Little League organization, which will do an egg hunt this weekend for the children who are involved in Little League.

Thank you all for your contributions to our community and for making it a fun place for our kids.

THE SPEAKER: The honourable member for Richmond.

BERTHIER, MURIEL: DEATH OF - TRIBUTE

TREVOR BOUDREAU: I would like to recognize the life and career of Muriel Berthier.

Muriel left her home in Petit-de-Grat at the age of 17 and attended an 18-month lab and X-ray training program in St. John's, Newfoundland. She returned home to Arichat and worked for more than 40 years as the X-ray technician for St. Anne Centre. During her

first 15 years, she also worked as a well-loved lab tech who was known for her gentle touch with patients.

Muriel was the mother of four children and grandmother of one. She was well-respected in her community for her dedication to her family, friends, and neighbours. She was known for her cooking, baking, and her card-playing skills. Muriel passed away on February 12, 2023, and will truly be missed by all who knew her.

I ask the members of this House to please join me in honoring the life of Muriel Berthier. May she rest in peace.

THE SPEAKER: The honourable member for Clare.

LANDRY, RICHARD: 100 BLOOD DONATIONS - THANKS

RONNIE LEBLANC: I rise today to acknowledge Richard Landry, who has donated blood for the 100th time at the Saulnierville blood donor clinic.

Richard has been a devoted donor, having also donated stem cells twice. His selfless contribution has benefited numerous individuals who depend on blood transfusions to recover or maintain their health. Although he may never learn the identities of those he has helped, he does know that his donations have had a positive impact on their lives.

Canadian Blood Services appreciates donors like Richard and has presented him with a certificate to commemorate this significant achievement. On behalf of all members, I would like to extend our heartfelt gratitude to Richard for his generosity and encourage all Nova Scotians who are able to follow his example to donate blood.

THE SPEAKER: The honourable member for Digby-Annapolis.

FRANK & DORA'S DINER: REOPENING - RECOG.

HON. JILL BALSER: In today's fast-paced world, it is nice to know that it is still possible to find a restaurant that allows patrons to slow down and step back in time.

Frank & Dora's, located in Cornwallis Park, is just the place. It has the atmosphere of a 1950s roadside diner: great food, large servings, and reasonable prices, with ice cream and old-style milk shakes too. As their signage says, it's a touch of Route 66 on Nova Scotia's Route No. 1.

Since first opening in 2018, Frank & Dora's has worked to create a true vintage dining experience. They feature outdoor picnic tables and fun activities for the entire family. If you decide to take a trip down Memory Lane, be sure to bring your camera. In the tradition of a 1950s family drive Sunday outing, a stop at Frank & Dora's for a burger,

fries, and a shake will create a family memory that will last forever. They also offer some of the best seafood in the area.

Please join me in celebrating the April 13, 2023 grand reopening of Frank & Dora's diner. On behalf of all their past customers and those yet to come, welcome back.

THE SPEAKER: The honourable member for Timberlea-Prospect.

MARIN, SANNA: FIRST FEMALE PM OF FINLAND - RECOG.

HON. IAIN RANKIN: Mr. Speaker, I want to take a moment to bring recognition to the outgoing prime minister of Finland, Sanna Marin, for her service as an impactful, progressive, and environmental world leader.

At 34, she became the world's youngest-serving prime minister and the youngest ever in Finland. She headed a groundbreaking centre-left coalition which included four other female party leaders, only one of whom was over the age of 35. The prime minister approved groundbreaking parental leave policies, and her government set an ambitious goal to make Finland carbon neutral and fossil free by 2035, which was heavily criticized during the recent parliamentary election campaign.

When she became leader, it was a difficult time for Finland, first with COVID-19 and then with neighbouring Russia's invasion of Ukraine.

A big crowning achievement, just finalized this week, was her country entering into the ranks of NATO membership.

I'd ask my colleagues in the Nova Scotia House of Assembly to join me in commending the Prime Minister for sticking to her convictions and making a real difference not only in her own country but throughout the world.

THE SPEAKER: The honourable member for Cumberland South.

THOMPSON, ALEXA: SCHOLARSHIP RECIP. - CONGRATS.

HON. TORY RUSHTON: Mr. Speaker, I rise today to congratulate Alexa Thompson, who is the proud recipient of an esteemed prize for her accomplishment in post-secondary education.

Oxford native Alexa Thompson is one of the privileged few people working in the health field to win a Vanier Canada Graduate Scholarship through the Canadian Institutes of Health Research.

The Vanier Scholarship is the most prestigious scholarship that you can be awarded at the doctoral level in Canada and comes with a monetary prize of \$150,000 spread over three years.

Alexa, in her fourth year in the Department of Laboratory Medicine and Pathology, has two more years to go, and I am confident that she will be an amazing asset to the health field wherever she works, but we'd love that to be in Nova Scotia.

Please join me in congratulating Alexa Thompson on receiving this prestigious award and wishing her continued success in her field.

THE SPEAKER: The honourable member for Halifax Atlantic.

LANGLEY, RUBY: POSTER & LITERACY CONTEST WINNER - CONGRATS.

HON. BRENDAN MAGUIRE: Mr. Speaker, each year, the Royal Canadian Legion sponsors a nationwide poster and literacy contest as part of its youth education program. The contest is based on the theme of remembrance. Student contestants are challenged to exercise their creativity to submit a poster, an essay, or a poem.

The most recent contest saw Ruby Langley, a Grade 6 student at Cunard Junior High, win. At a recent presentation ceremony at the school, Ruby was awarded certificates from Legion Provincial Command and the Spryfield Legion, along with monetary awards from both groups. Her poster is being forwarded to Ottawa to be judged at the national level.

Congratulations to Ruby, and thanks to all the students who participated in this year's contest.

THE SPEAKER: The honourable member for Pictou East.

BURTON, KATHRYN: PUBLIC SERVICE CAREER - CONGRATS.

HON. TIM HOUSTON (The Premier): Mr. Speaker, I'm pleased to rise today to acknowledge one of our own in Kathryn Burton. Raised in Eskasoni, Kathryn has made us proud abroad.

She served as chief of staff to the City of Boston, the first Indigenous person to hold a cabinet position in the city, during the height of the COVID-19 pandemic, coordinating over 18,000 employees and a \$3.6 billion operating budget during a major public health crisis.

She also served as chief of staff for the State Treasurer for the Commonwealth of Massachusetts. Kathryn handled major statewide initiatives and designed and oversaw

complex public debt and public finance structures, while ensuring that small business owners, women, minorities, immigrants, and veterans had access to the pioneering Small Business Banking partnership.

Most recently, Kathryn will be honoured by the University of King's College for her achievements, for being a leader in her field, and for her significant commitment to public service throughout her career.

Between her influential leadership roles in public administration and her community-focused foundations and volunteerism, Kathryn has seamlessly woven together private ventures and public service to the benefit of communities close to her heart.

She currently works as a partner at Sparks Street Capital in Boston.

I ask all members to congratulate Kathryn on her successful career and this wonderful honour.

THE SPEAKER: The honourable member for Fairview-Clayton Park.

FAIRVIEW HTS. ELEM. SCHOOL: NEW PLAYGROUND - RECOG.

HON. PATRICIA ARAB: Mr. Speaker, after years of dedicated fundraising and advocacy work, Fairview Heights Elementary School was finally able to hold a ribbon-cutting ceremony for their new playground. The students at Fairview Heights now have a large play structure, new sodding, improved substrates, and rerouted drainage so that the new structures and students won't float away on a rainy day.

I want to congratulate both the current and former SAC and PTA members who remained committed to this project over the last few years, as well as the many parents and community members who contributed long hours fundraising, planning events, and supporting this addition.

I also want to thank the Kin Club of Halifax, who have been a great supporter of community initiatives in Fairview-Clayton Park, for their significant donation toward the overall cost of the project.

This playground not only serves the students during the school day but is a welcome addition for the entire community to ensure that our little ones have safe and fun equipment to play on.

THE SPEAKER: Order, please. The time for Statements by Members has expired.

The honourable member for Kings South on an introduction.

[2:00 p.m.]

HON. KEITH IRVING: I direct the members to the West Gallery, where today we are joined by Haley Brown, the executive director of the Wine Growers Nova Scotia. Haley has come to watch the proceedings today and I am also happy to announce that she will be taking possession of a house in New Minas and will become a constituent of Kings South.

I ask all members to welcome her to the House. (Applause)

THE SPEAKER: Once again, we welcome all visitors to the House and you will have the opportunity to see what kind of work your MLA does for you, too.

The time for Oral Questions Put by Members to Ministers has arrived. The time is 2:01 p.m. We will go until 2:51 p.m.

ORDERS OF THE DAY

ORAL QUESTIONS PUT BY MEMBERS TO MINISTERS

THE SPEAKER: The honourable Leader of the Official Opposition.

HON. ZACH CHURCHILL: Mr. Speaker, the Minister of the Advisory Council on the Status of Women and former Interim Leader of the Progressive Conservative Caucus said in 2018 on an issue related to a sexual harassment accusation brought forward by staff, that she would never foster a culture of silence, and I will table that. However, that same minister, on the advice of the Premier's office, has brought a resolution to this Chamber to expel a member for advocating on behalf of a friend and an alleged victim.

I would like to ask the Premier: Does he not worry that expelling a member because of what they say in advocating can actually create a culture of silence here in this Chamber?

THE SPEAKER: Order, please. After consulting with the Clerk, we are going to rule that question out of order. If the Leader of the Official Opposition wants to ask a new question, he can.

The honourable Leader of the Official Opposition.

ZACH CHURCHILL: Can we get clarification on that ruling, please, Mr. Speaker?

THE SPEAKER: Just for the information of the member and for all members, member's questions are supposed to be put to ministers relating to the portfolio. This is an internal governance issue of the House that is going to be dealt with in sufficient time.

The honourable Leader of the Official Opposition.

ZACH CHURCHILL: Thank you, Mr. Speaker. We are talking about the actions of the Minister of the Advisory Council on the Status of Women on an issue that is obviously related to that portfolio involving issues of sexual harassment and censorship around these issues in the Chamber. I would ask you to reconsider that ruling.

THE SPEAKER: Just again, debates about the workings of the House are not to become public - not to come through on Question Period. I sometimes wonder the purpose of pushing it, because at this point, I have made a ruling that there will be sufficient time in future days to deal with the issue that is before us - my ruling will stand.

Again, I am going to ask the Leader of the Official Opposition.

ZACH CHURCHILL: Mr. Speaker, on the issue related to legislation that has been brought forward to the House on non-disclosure agreements, considering all the events of this past week, can the Premier please inform the House if he intends on moving forward with that piece of legislation or to protect victims of sexual assault and harassment?

THE SPEAKER: Maybe the Leader might want to rephrase that question. You can't talk about a bill that is on the Order Paper before the House. I will give you one more opportunity.

The honourable Leader of the Official Opposition.

PREM.: NDA LEGISLATION - ENACT

HON. ZACH CHURCHILL: Mr. Speaker, certainly we have had revelations come forward this week from the parents of an alleged victim of sexual harassment where they indicated that their daughter was treated as a pariah, was coerced into signing a non-disclosure agreement, and ghosted by her colleagues. I'm wondering, considering these revelations, if the government is considering any legislation that can restrict the use of non-disclosure agreements whose intent is to protect perpetrators and not victims of sexual assault and harassment.

THE PREMIER: As we have stated, we agree that non-disclosure agreements should not be used to silence victims of sexual assault. We absolutely agree with that. What I would say, Mr. Speaker, as the issue is discussed, we're now hearing from two sides. This is a very complex issue. I have had a number of people now reach out from the other side, talking about why they may have entered into one of these - we have to honour those victims as well.

What I would tell the member is that we're doing the research. We're listening to both sides. We take this issue very seriously. I would just say what was at the centre of this

discussion is an absolute tragedy, and we want to be respectful for the family and the friends, for sure. We should never lose sight of those people impacted.

ZACH CHURCHILL: I am happy to finally hear some empathy from that side on this issue. It is important that we do hear from all sides, yet the government is still going to move forward with a resolution to censor a member who is speaking one side of this equation. I also believe that this government has dragged their heels when it comes to providing a jurisdictional review on this issue. We have over 1,600 staff in the Department of Justice. We have one province that has moved forward with this. Yet it has taken almost two years to conduct a judicial review of the use of non-disclosure agreements.

I would like to ask the Premier: What is taking so long to conduct that environmental scan on this issue?

THE PREMIER: Mr. Speaker, I think the reason for the time is so we can - it's quite obvious, I think, but I'll say it for the benefit of the House - so we can hear from all sides. We certainly know the position of the Opposition members, but we're also hearing from other Nova Scotians and beyond talking about how the outright banning of the NDAs can have negative consequences on the people we want to help. I could table some of the literature on that, but I just want to remind the member this is a complex issue. There are actual human beings who have suffered tragedy at the centre of it. Those are the people whom we're mindful of, and we want to make sure we do the research and we listen to those individuals to make sure we get this right.

ZACH CHURCHILL: Indeed, that is what we want to avoid, another one of these tragedies. We do have to foster a culture where silence is not forced in this Chamber, and where it's not forced outside of this Chamber. I believe that the actions around this issue have been very one-sided on behalf of this government. I think they can remedy that by actually bringing in legislation that doesn't get rid of the ability to use these. The legislation, as I understand it, that has been brought forward by the NDP is to restrict the use and ensure that victims are provided with legal counsel on this. I think it's a very reasonable step to take, and we could actually deal with this issue in this House sitting.

I would ask the Premier if he could commit to doing that today.

THE PREMIER: Mr. Speaker, I would just say to the member, as has been stated before, as representatives of the people, we hear from people in many situations. Certainly, I hear from people directly, and have heard from a number just even in the past days, urging me to tread carefully on this very complex, sensitive issue. We will take our time. We will listen to those voices and make sure we get it right. This is not something to be displayed in the way it has been in this Chamber. Nobody wanted that. I certainly didn't want that. We're doing the work. We have to remember to keep the victims close to our heart, and that's what we're doing.

THE SPEAKER: The honourable Leader of the New Democratic Party.

PREM.: PRIM. HEALTH CARE - CHANGE

CLAUDIA CHENDER: Mr. Speaker, the primary care situation in this province is becoming desperate. Nova Scotia Health says that of the 12 family doctors in the province who have resigned in the last 14 months, with a combined caseload of 13,600, one vacancy has been filled. Last week, when asked about the shortage of family doctors, the Premier said, “As the world changes, the health care system has to change.”

Mr. Speaker, people need primary care that they can count on. This government has left them waiting. Is this the kind of change that the Premier had in mind?

THE PREMIER: I certainly don’t know about the number of statistics. I do know that we’ve recruited 148 doctors this year. That’s a net gain in the range of 74.

We know that there are issues with retirements. We know we have to be respectful of those who have been providing care to their communities and who want to retire. They should be allowed to retire without making them feel guilty about retiring.

What I would say to the member is that the change that we’re talking about is the evolving world of how people access care. We’re talking about virtual care now. That’s something new that wouldn’t have been talked about, certainly not under the prior government, five or - this is the way the world is changing. Mobile clinics, pharmacy clinics - these are all positive changes. There’s a lot of work to be done . . .

CLAUDIA CHENDER: Last week the Premier also said, “The old days where you had a doctor when you were born and that was the doctor through your life who delivered your own children are over. We need to move forward and accept that the world is changing.”

We agree. We believe that all Nova Scotians should have a family practice: a place that they can call for an appointment or for medical advice, where their file lives and is followed and updated - a collaborative health team. But investment in these teams in this budget is paltry compared to the need.

Mr. Speaker, will the Premier commit to ensuring that all Nova Scotians without consistent care get access to a family health team that they can count on?

THE PREMIER: That’s certainly the goal in Nova Scotia, Mr. Speaker. It was the goal I heard on the campaign trail in P.E.I. It’s the goal of all Canadians.

We know that the evolution is away from that family doctor you had your entire life. The world is changing, and we have to accept that. We can’t fight that. It is evolving

toward a health home - yes, absolutely, where you are part of a health home and you get the care that you need at that time. It might be a doctor. It might be a nurse practitioner. It could be a physician's assistant. It could be a registered nurse. It could be a family practice. It could be a psychologist.

But yes, absolutely, we want Nova Scotians to have care. That's why we're in this position. It's to make sure that we fix health care.

CLAUDIA CHENDER: And yet we don't hear this government talk about these health homes.

Mr. Speaker, last week the Premier also said, "Virtual care is not for everything, but it is just what the doctor ordered for a number of things."

Virtual care has a place in health care, but it is not what the doctor ordered for someone who needs their medication adjusted, someone with a cancer diagnosis, or someone with a complicated pregnancy. These people - all people - need a family health team that can follow their condition. This government has not invested in making that happen and barely mentions it.

Mr. Speaker, will the Premier commit to having access to a family health team for all Nova Scotians by 2025?

THE PREMIER: I don't know if we're now debating the merits of the role of virtual care or not, but I will stand very firmly in my place and say that there is a role for virtual care. There is a role for pharmacy clinics. There is a role for mobile clinics. There is a role for the spectrum of allied health care professionals.

That's why we want to expand their scope. That's why we want to work with them and give them an opportunity to be here.

If the member didn't hear talk about a health home - I think that the Minister of Health and Wellness stood in this Chamber for 20 hours answering questions. If they didn't hear about it, it's because they didn't ask, Mr. Speaker.

THE SPEAKER: The honourable member for Bedford Basin.

HON. KELLY REGAN: Mr. Speaker, the minister responsible for the Advisory Council on the Status of Women Act yesterday accused the member for Cumberland North of slander in a media scrum.

Every arm and operation of the Progressive Conservative party swore up and down that they had nothing to do with the process. The victim's parents say that the victim was coerced into signing an NDA. The member for Cumberland North tabled an NDA.

Mr. Speaker, is the minister responsible for the Advisory Council on the Status of Women Act saying that the member for Cumberland North has tabled a forged document, and is she accusing their former staffer's parents, who have lost their daughter and who have nothing to gain . . .

[2:15 p.m.]

THE SPEAKER: Order, please. Once again, I'm going to rule that the question has nothing to do with the minister's portfolio. Order, please.

I want you to pay attention to the ruling, if possible. This has nothing to do with the minister's portfolio. I'm going to rule the question out of order once again.

The honourable member for Bedford Basin.

DOJ: NDA LEGISLATION - CONSULT

HON. KELLY REGAN: In the last few days we have heard from all kinds of people around this province too. I want to assure the Premier of that. We are hearing from many people.

I would like to know: Which women's organizations have this government consulted with about NDAs?

HON. BRAD JOHNS: We're consulting with a variety of groups, as well as in-house. We'll continue to research and look around. I will table, just for the House, an article that was written with regard to NDAs as well. I'll just put that on the record.

KELLY REGAN: Now that we know it's going to be the Minister of Justice answering the questions, perhaps he could just name one women's group that they've actually consulted.

It was not that long ago when we were on that side and they were over here. The members who were sitting over on this side of this House were not happy with the speed at which the government of the day was dealing with an issue of historical sexual assault. What was their response? They decided they were going to call for the resignation of Lena Metlege Diab, the then-Attorney General of the day.

My question is: Bearing that in mind, are they prepared to have the same sauce delivered to their goose as they wanted to ours?

BRAD JOHNS: I certainly recognize that the answer that I continue to give is not what members in the Opposition would like to hear at this moment, but I reiterate that we'll continue to do research. It is a matter we're looking into.

THE SPEAKER: The honourable member for Bedford South.

MAH: AFFORDABLE HOUSING - ACT

BRAEDON CLARK: Young people in Nova Scotia are falling behind under this government - in particular when it comes to cost of living. Just last Fall, Atlantic Canada saw the largest rent increases in the country year-over-year. I'll table that.

How can we expect our province to grow and thrive if young people can't afford to stay here - if they can't afford to live here? They contribute to our province in countless ways, but under this government, they are being priced out. We need young people in order to address major issues that we're facing such as labour shortages, staffing our health care system, and more.

Will the government take action to ensure that young people have access to affordable housing, or any housing at all - or should they expect to be forced out of our province because they can't afford to live here?

HON. JOHN LOHR: I'd like to say there's a lot that we're doing on multiple fronts. As the member knows, we have the More Opportunities for Skilled Trades for young people coming here to help them get a start in a skilled trade, which we've made a very large group.

On the housing front, we've made historic increases in the housing budget in the last 18 months - almost \$200 million. Unfortunately, some of what we're doing - it just takes time to build. If you'd asked me when the right time was to start some of this, it would have been three or four years ago. It takes time. We're working on multiple fronts to make that move quicker.

We're working through rent supplements, which I've been getting questions about. We added \$21 million in the budget this year, currently, going forward, for rent supplements.

BRAEDON CLARK: I'm glad that the minister raised the issue of rent supplements, because in the Budget Address that the Minister of Finance and Treasury Board gave a couple of weeks ago, they talked about a thousand new rent supplements as a crowning achievement for this budget - 8,000 rent supplements. We find out that under cover of darkness on January 27th, a website was updated - true. How many people look at that website on a daily basis? I would imagine it's a very small number.

The threshold for rent supplements has moved from 30 per cent of your income to 50 per cent of your income to be eligible. Imagine people in the province of Nova Scotia who are paying 49.9 per cent of their income on housing who are no longer eligible for rent supplements.

Will the minister commit to removing that back down to 30 per cent, as it should be?

JOHN LOHR: I will compare our rent supplement program to any rent supplement program in the country for accessibility and generosity right off the bat. It is true that we made the change. (Interruptions)

THE SPEAKER: Order, please. The honourable Minister of Municipal Affairs and Housing has the floor.

JOHN LOHR: Mr. Speaker, we are in a housing crisis. We've seen the demand for rent supplements increasing to a point where we were realizing in the late Fall of last year that we were going to run out of money, frankly. So we asked, how are we going to address this? We wanted to prioritize those most in need. (Interruptions)

THE SPEAKER: Order, please. The honourable minister has the floor. I ask that the members respect the person who is speaking - on both sides of the House.

The honourable Minister of Municipal Affairs and Housing.

JOHN LOHR: I am very pleased to say that the people who applied the day before we made the change were brought in under the old rules. They continue to be treated that way. The new people - we're trying to prioritize those who are most in need. We realize the need is great across the province.

THE SPEAKER: The honourable member for Clayton Park West.

DCS: PLAN FOR PERMANENT HOUSING - PROVIDE

RAFAH DICOSTANZO: Mr. Speaker, we know that the number of unhoused people in HRM is growing steadily. I have recently found out that unhoused people are living in the hotel in my riding - the Holiday Inn Express - and I know that many other hotels are being used.

My question to the Minister of Community Services is: How many people is the government housing in hotels in HRM, and what is the monthly cost of this?

HON. KARLA MACFARLANE: Right now, we are making large investments in supportive housing right across this province. What I do know is that I have a document here. The question was asked the other day from the member, and I have broken down the numbers for her. I will table that right now.

RAFAH DICOSTANZO: I thank the minister and look forward to those numbers.

Mr. Speaker, this government's plan for tackling homelessness seems to be to hide them away in hotel rooms. We have heard from constituents like Amber, who is living in a hotel room in my constituency. Amber is struggling to pay for groceries because she has only a small fridge and cannot cook in that place. This is not a home for people. A hotel is not a home for people.

My question to the minister is: What is the plan to provide permanent housing for people like Amber?

KARLA MACFARLANE: The member is absolutely right - it is not a home. That's why we continue to make investments in building affordable housing. We continue to make sure that in the interim, we provide the resources to individuals who do find themselves homeless. If they want our services, we are more than happy to work with them and ensure that they have a safe place to stay. A hotel isn't ideal, but at least it is keeping them warm. It's providing food to them. Then to bond with a caseworker who can help them and look at their specific needs as they move forward.

We'll continue making those investments and making sure that we're there for the most vulnerable in Nova Scotia.

THE SPEAKER: I would ask the minister to table the paper that she said she would table.

The honourable member for Halifax Needham.

DOJ: LEVEL OF POLICING - EXPLAIN

SUZY HANSEN: My question is for the Minister of Justice. After he was elected, the minister paused previous work on a policing review and has stalled any progress for almost two years. In 2021, the minister stated that he was very comfortable with the level of policing in this province, but last week the Mass Casualty Commission made clear how dire the state of our province's policing structure is and has been.

My question is: Is the minister still comfortable with the level of policing? Why was he comfortable with delaying this important work?

HON. BRAD JOHNS: Mr. Speaker, I do believe that what I said was that I was comfortable in the safety of Nova Scotians. I am still comfortable in the safety of Nova Scotians.

What I will say is that obviously there are a number of recommendations - some of them very weighty - that came out of the commission's report. My staff and I are reviewing those as we move forward to see how we are going to implement those.

SUZY HANSEN: I just tabled a document that specifically said that he was very comfortable with the level of policing in this province.

My second part of this question is that the report clearly asked the government for a review of the structure of policing by a multi-sectoral council. This was not a surprising inclusion in the report. It is something that many Nova Scotians have been independently calling for since April 2020. Despite this, the Premier's response has been lukewarm, stating that his government would take the time to figure out how to do the review, and nothing is off the table. I'll table that.

Nova Scotians have been waiting and asking for this for three years. Will the minister clearly commit that work on a policing review will begin immediately?

BRAD JOHNS: I believe the Premier said in scrum yesterday, or the day before, we are committed to looking at doing a police review. We will do that. There are a number of items there that are required to happen before we do that. So we'll continue to review and absorb the recommendations.

THE SPEAKER: The honourable member for Timberlea-Prospect.

MAH: ADVICE OF DEPUTY MINISTER - FOLLOW

HON. IAIN RANKIN: My question is for the Minister of Municipal Affairs and Housing. At a committee appearance on January 25th this year, the Deputy Minister of Housing stated, and I quote, "We probably need some new public housing." I'll table that.

Fast forward two months, and we have a budget before this House with 6.5 billion commitments, the government ministers like to say - but zero new public housing. To the minister: Why couldn't the minister ensure that the advice of his deputy minister was followed in preparation for this budget session?

HON. JOHN LOHR: I'd like to thank the member for the question, and I advise him to go back and review the deputy minister's comments. I believe what he said was that when we discuss things, everything is discussed. I look forward to bringing in a housing plan. We're doing a strategic plan for housing, which we're almost ready to release. I look forward to that.

I will say, on public housing units, Nova Scotia has nothing to be ashamed of. We're in the top four in Canada per capita in public housing. We have 11.6 public housing units per thousand people, which is far above the national average of eight. For instance, the province of B.C. has five per thousand people. So we have a very large component of public housing.

We've been told by the Auditor General, do a better job on what you have. That message has been sent to us very clearly by three different reports. We're trying to do that.

IAIN RANKIN: That was a quote from the deputy minister. He was very clear that we needed units across the full spectrum of housing, including public housing. He also said, relative to taking care of our own units, "You can renovate an old unit but, fundamentally, the structure doesn't take the renovations well. It's taking way too long...it's just not good. It's very expensive, it's very slow and it's blocking units from getting online." Those are the words of his deputy minister.

To the Minister of Municipal Affairs and Housing: Does he agree with the expertise that his own department is giving and that rent supplements just aren't enough?

JOHN LOHR: I will say that the rent supplement program is incredibly important to us. We realize the need for that. That's why we're making a \$21 million increase in rent supplements to address that need for another thousand people.

The public housing portfolio, again, is something that is incredibly important to us. We're working very hard to address - clean it up, frankly - on multiple levels as the Auditor General gave us instruction to. We're working very hard on both fronts, Mr. Speaker.

THE SPEAKER: The honourable member for Kings South.

FTB: CLARITY TO WINE SECTOR - PROVIDE

HON. KEITH IRVING: As of this past Saturday, April 1st, the NSLC will mark up Nova Scotia wines from 43 per cent to 143 per cent. This increase stems from a World Trade Organization ruling that ended Nova Scotia's Emerging Wine Regions Policy, a very important policy for unlocking the growth of the industry.

The elimination of the EWRP means that Nova Scotia wineries will lose 25 to 50 per cent of their revenues while NSLC profits grow. The department for years has known April 1, 2023 was coming, but there has been no mechanism announced to overcome the devastating revenue loss. Wine Growers Nova Scotia has suggested multiple alternatives.

I'd like to ask the Minister of Agriculture: Does he have ready today a replacement policy to support wineries in this province?

HON. ALLAN MACMASTER: Mr. Speaker, as Minister responsible for the NSLC, I will reply to this. There was a trade challenge. Australia made the trade challenge. We are required to take that seriously. We have been working with industry. I know there was communication as recently as a few days ago. April 1st is - the date is actually in June, as I understand, that we're looking at.

I would say this as well. I know the member is probably trying to give an edge to Nova Scotia producers, but we must be aware that there are countries that are always watching, and trying to lobby for some improvement on the floor of the Legislature in the public eye is probably not helpful. (Interruption)

[2:30 p.m.]

THE SPEAKER: Order, please. The honourable member for Kings South has the floor.

KEITH IRVING: Wine Growers Nova Scotia wrote the Premier, the Minister of Finance and Treasury Board, the Minister of Communities, Culture, Tourism and Heritage, and the Minister of Agriculture nine months ago and warned, and I quote: With no comparable replacement, the Nova Scotia grape-growing and wine industry faces devastation.

This is a rural industry that has direct economic value of \$245 million. I will table the letter from the grape industry. After reviewing both the minister's budget and department business plan, there is no replacement program. Will the Minister of Agriculture commit to announcing an alternative mechanism by the end of this week to provide clarity to the wine sector in the face of so much uncertainty?

HON. GREG MORROW: As my colleague, the Minister of Finance and Treasury Board, mentioned, there was an international trade ruling here. We have to comply, and we will. We've agreed to start winding down the Emerging Wine Regions Policy.

We understand the sector is concerned. We get it. I get it. I hear it. We know they need a plan. I know that. We are working as quickly as we can on a solution to such a complex issue that involves three departments: the Department of Finance and Treasury Board, the Department of Intergovernmental Affairs, and the Department of Agriculture. It involves a World Trade Organization ruling.

We've listened to industry. They've asked us to put the wine authority on hold while we work through this, and we have done that. If the industry is concerned about support, they have 15 million reasons to understand how this government will support them with our announcement of support, following the polar vortex, that was made in Wolfville in Kings South last month.

THE SPEAKER: The honourable member of Kings South on a new question.

AGRIC.: LETTERS FROM WINERIES - RESPOND

HON. KEITH IRVING: The minister has known for 20 months of last weekend's deadline. The industry has written him and his staff three times in 2022. Two of these

letters have gone to the Premier, four others to his ministerial colleagues. I will table the other two that I have not already tabled.

The industry is getting unreturned texts. Many wineries have written the department and the minister with no response. Staff are telling the industry that the minister is too busy to meet. Nova Scotians must wonder if there's not one minister in this government who wants to support the rural economy.

Has the minister even taken this issue to the Premier's Office and the Treasury Board yet to ensure this urgent issue is resolved?

HON. GREG MORROW: Look, we've met with industry. We meet them at their places of business. We met them in Wolfville last month when we announced \$15 million in support for their industry. The message to them at the time is the same as it is now. We are working toward a solution on a very complex issue that we have until the end of June to get to.

KEITH IRVING: There is nothing in the budget. The minister's Estimates speech didn't even mention this issue. There's nothing in the business plan. What is the minister's inaction doing? Potentially putting dozens of businesses out of business in rural Nova Scotia after millions of dollars of investment. Over 1,000 jobs are at risk and potential long-term damage to our tourism product.

The Spring is a critical time for these businesses. Cash flow is extremely difficult, yet the industry has nothing they can take to the bank. The inaction by this minister is taking \$13 million revenue from 20 businesses and increasing the NSLC profits, which will flow \$13 million to the government.

THE SPEAKER: Question, please.

KEITH IRVING: This is the biggest threat in agriculture. Again, will the minister commit to at least meeting with the industry this week to inform them what is going on?

GREG MORROW: I met with industry staff; I met with industry. We will meet with industry. We'll work with them to find a solution on what is a very complex trade ruling. In terms of nothing being in the budget for this, as the member would know from his time on Treasury Board, we can always go to Treasury Board once we reach that solution and ask for support. We have in the past in other areas of agriculture: \$19 million following Hurricane Fiona; \$15 million following the polar vortex; in-year spending of \$5 million for season extension; \$4 million for advancement of value-added food processing; institutional procurement. Mr. Speaker, industry has a government that is listening and willing to invest in them.

THE SPEAKER: The honourable member for Dartmouth North.

DOJ - PRISON HEALTH CARE - FUND

SUSAN LEBLANC: My question is for the Minister of Health and Wellness. Mi'kmaw mother of two Sarah Rose Denny recently died of pneumonia after becoming sick while in custody at the Central Nova Scotia Correctional Facility. Family and friends say Sarah Rose Denny was full of life - that not only was she charismatic, she was naturally beautiful and so strong. She overcame so many obstacles. This should not have been her end.

The Elizabeth Fry Society of Mainland Nova Scotia has explained again and again that it is difficult to access proper health care inside correctional facilities, where inmates are the responsibility of the government.

Mr. Speaker, these are ongoing issues. Why has the government tabled a budget with no new funding for health care in prisons?

HON. BRAD JOHNS: It's very sad news and my thoughts certainly go out to the family of Ms. Denny. I will say that this is currently under review by the Medical Examiner Service and we're hoping to have a report soon.

SUSAN LEBLANC: Mr. Speaker, Indigenous people are overrepresented in Nova Scotia's justice system. In order to be certain that this will never happen again, we need to understand what happened to Sarah. A review is one thing, but her family is calling for a public inquiry into her death.

Emma Halpern, the executive director of the Elizabeth Fry Society of Mainland Nova Scotia, explains that many other provinces do have mandatory reviews. We do not and, as a result, we don't know exactly what happened. The family doesn't know exactly what happened and if we don't know what happened, how can we learn from it? I will table those comments.

Will the Minister of Justice conduct a public review of Sarah Rose Denny's death, as her family has called for?

BRAD JOHNS: The DOJ is very committed to ensuring that we have a fair justice system and a system that meets the needs of Indigenous persons across this province.

We know that Indigenous and African Nova Scotians are overly represented in the system, and we are reviewing that. I will not commit at this time, but I am waiting to see what comes back from the review of the medical examiner's initial review and then we'll see from there.

THE SPEAKER: The honourable member for Sydney-Membertou.

MAH: EXPERT ADVICE IGNORED - EXPLAIN

HON. DEREK MOMBOURQUETTE: Mr. Speaker, the government ignores experts on important issues regularly and housing is no different. In the Fall, Timothy Crooks of Phoenix Youth told the Standing Committee on Community Services with regards to housing that we haven't seen the worst of it and the magnitude of how we need to respond is going to be huge. I will table that.

Unfortunately, the magnitude of response in this budget is anything but huge. The housing crisis needs to be approached with ferocity but the response from the government has been anything but. Why does this government continue to push aside expert advice?

HON. JOHN LOHR: I'd like to say, first of all, that we have invested almost \$200 million in 18 months since becoming government in housing. Had that money been invested three or four years ago that would have made a huge difference, but it wasn't.

This year's budget has a \$153 million increase in the housing budget, which is a historic increase in reality for us. It's just indicative of our commitment. Our number one commitment is undoubtedly to health, but our number two commitment is to solving the housing crisis. We realize there is no one solution, and we are working across the housing spectrum to solve the housing crisis.

DEREK MOMBOURQUETTE: Mr. Speaker, this government doesn't know better than the experts and any suggestion otherwise would be a stunning admission of arrogance. In spite of the writing on the wall, they refused to meaningfully address affordable housing in two consecutive budgets.

When will this government stop acting like it knows best and start acting on the calls to action from the experts?

JOHN LOHR: Mr. Speaker, I don't know where the member is coming from, because if we look at the previous budgets to our budgets then there was no meaningful address. If spending money isn't addressing it meaningfully, then I don't know what is, but they weren't doing that. We are doing that, and I am very proud of our actions.

THE SPEAKER: The honourable member for Bedford South.

SNSIS: FIXED-TERM LEASES LOOPHOLE - CLOSE

BRAEDON CLARK: Second-year Dalhousie University student Claire Pontefract was in the middle of her school year when she found out, like so many other students, that her landlord was refusing to renew her fixed-term lease, leaving her and her roommate stuck for the upcoming school year. Shortly after this, as has happened in many other cases, she saw her unit listed online with a massive increase in the rent.

Mr. Speaker, we heard this week at Law Amendments from many students, many tenants, who are dealing with this issue. Hundreds and hundreds, if not thousands, of people in this city and across this province are finding themselves out of a home and scrambling because of this loophole with fixed-term leases.

I would like to ask the minister responsible for the Residential Tenancies Act: Why will he not commit to closing this obvious loophole?

HON. COLTON LEBLANC: I did take the time to watch Law Amendments yesterday. I think the presentations that were made show the complexity of that file and I believe there was balanced representation from both tenants and landlords, bringing to the table and to the committee different perspectives and different positions on how to address different issues.

When it comes to fixed-term leases, we will continue to engage with our partners on ways of strengthening the Residential Tenancies Program. I indicated earlier this week that I am not in a position to eliminate them, but I am certainly willing to engage with our partners on how we can improve the parameters around them. (Applause)

BRAEDON CLARK: No one doubts that the issue is complex. No one doubts that the issue needs balance but that is not an excuse for inaction and that is what we continue to see on this issue and many others. Students Nova Scotia says that the student housing situation in this province is getting very, very bad across the province - hundreds of students who cannot find housing and graduates who want to stay in the province but are priced out and I will table that, Mr. Speaker.

Reverend Dr. Albert Maroun put out a plea to Nova Scotians recently to take in university students who are currently homeless, and I will table his words. University students who are currently homeless with nowhere to live - what will this government do to ensure that all of our post-secondary students have a place to study and also a place to live?

HON. BRIAN WONG: Thank you to the member opposite for that important follow-up question. Students are absolutely at the centre of everything we do at the Department of Advanced Education. We look at students as a mechanism, as a vehicle in order to grow Nova Scotia, to become part of the economy, to stay here in Nova Scotia, and to start businesses and raise families. We have already committed almost \$100 million to three NSCC student housing projects. We continue to work with the post-secondary sector, listen to the private sector, talk to students on a continual basis, and we are always willing to be at the table to do more.

THE SPEAKER: The honourable member for Bedford South on a new question.

MAH: HOUSING SUPPLY - INCREASE

BRAEDON CLARK: Thankfully, we have some municipalities in this province that are willing to think creatively and put forward solutions to address the lack of affordable housing. For example, the Town of Amherst will “cover the cost of infrastructure, streets, to entice developers to proceed with residential projects,” and I will table that. What are we witnessing here from municipalities, Mr. Speaker? Recognition that supply certainly needs to be increased. I would like to ask the government then: Why didn’t they move to increase opportunities to get more housing built in this province by emulating the approach of municipalities like Amherst?

THE SPEAKER: The honourable Minister of Municipal Affairs and Housing.

HON. JOHN LOHR: Mr. Speaker, I would like to say that the municipalities are important partners to us and we work with them in a number of different funds, including one called the New Building Canada Fund for water and sewer. The lens on that this year was on housing. We just recently announced a sustainable services growth fund to help communities have more money, including Amherst, across the province, to have more funding to be able to come back and access our funding and federal government funding for housing for the infrastructure needed for housing, which is important infrastructure.

We are working very closely with our municipalities. They are important partners to us and we will do more with them. We recognize their importance to our province and we appreciate them very much.

BRAEDON CLARK: Mr. Speaker, what is critical to remember here is that increasing the supply of affordable housing is a net benefit for everyone. Building affordable housing creates jobs, generates tax revenue, and most importantly, of course, gives Nova Scotians a place to call home during a cost of living crisis, and reduces the burden on our health care system across the board.

It is alarming that we are watching this government let pressing issues fall to the wayside. It is even more alarming the gravity of the issues themselves. Nova Scotians deserve affordable housing but this government, at this point, has not taken sufficient steps at scale to meet the challenge of the issue. I would like to ask: When will this government do the right thing and make sure that all Nova Scotians have an affordable and safe place to call home?

JOHN LOHR: I’ve said this before, but I think that it bears mentioning again. We have made an unprecedented investment in housing. Had the previous government even done a small amount of that, it would have been helpful because it takes time to build housing.

[2:45 p.m.]

In terms of municipalities, I want to just acknowledge the important work municipalities are doing to help us on that front. We've asked municipalities to look at their own rules, regulations, and zoning and where we can increase density, please do that where there is water and sewer already, if the lot sizes can be made smaller, and allow granny suites - all of the things. I want to say, Mr. Speaker, we see the municipalities across the province stepping up, looking at their own rules and regulations to help address this problem.

THE SPEAKER: The honourable member for Halifax Citadel-Sable Island.

OAMH: MENTAL HEALTH CARE ACCESS - INCREASE

LISA LACHANCE: My question is for the Minister responsible for the Office of Mental Health and Addictions.

The Mass Casualty Commission found that support provided to Portapique and surrounding areas was and continues to be insufficient to meet the communities needs. Last year, Portapique resident Leon Joudrey told the commission about his challenges accessing mental health following the events of April 2020 stating, "When you're shaking every day and somebody tells you it'll be three weeks [for help], doesn't help you much." I'll table that.

Mr. Speaker, this Province failed Mr. Joudrey and failed the community of Portapique. How is the minister making sure that no Nova Scotian, especially in these communities, goes without the mental health care that they need?

HON. BRIAN COMER: My heart certainly goes out to the families and all those communities impacted. It's something that we'll certainly never forget. Unfortunately, we can't change what happened. I'm certainly committed to reviewing those recommendations in their entirety.

Right now, my senior staff and myself and a number of ministers in the government are reviewing those recommendations very, very carefully. I certainly sense the urgency in the community that needs help from this deep, deep tragedy. We will continue to monitor that report and give it a thorough evaluation. There'll be more to say in the near future.

LISA LACHANCE: The report also recommends the province, together with their federal counterparts, work to develop an action plan to deliver mental health care on an equal level as physical health care. The report notes the time sensitivity of this recommendation describing the current situation in Portapique as a public health emergency.

As one resident stated: You have to wait months to get into a psychiatrist, any mental health programs that don't cost you money at the hospital - anything like that. Recognizing the urgency of this, will the minister commit today to tabling this action plan by the May 1st deadline set in the report?

BRIAN COMER: This is a very significant report that holds a lot of weight for our province and for the country. I do have a meeting scheduled next week to meet with my federal counterpart. It will certainly be an issue that I'm bringing forward with Minister Bennett. We will carefully review these considerations. The Premier along with all of my colleagues are deeply dedicated to this very important issue.

THE SPEAKER: The honourable member for Northside-Westmount.

MAH: SPECIAL PLANNING AREAS - UPDATE

FRED TILLEY: A move that this government made last year was to designate a number of special planning areas in order to fast-track the development of new housing units. This was supposed to allow construction to happen faster. In a government report, four of those development zones were supposed to be shovel-ready for 2022. I'll table that.

Mr. Speaker, of these developments - Penhorn, Mount Hope, Bedford West 10, Port Wallace - how many had shovels in the ground in 2022?

HON. JOHN LOHR: Yes, the special planning areas - we have 10 of them now - were intended to help speed up the process of construction. We know that by having them in place we can speed it up by maybe 3 to 24 months. At the same time, we've said repeatedly that all of the necessary environmental and municipal permitting will need to be done.

In terms of the exact answer to that question, I would have to get back to the member. I don't have that right in front of me. I certainly will do that.

FRED TILLEY: Perhaps I can help the minister directly answer that question - it was zero, according to their own websites, Mr. Speaker.

When these zones were announced, the minister claimed that they would save years in approval time and would add over 22,000 housing units. Again, I'll table that.

To the minister, after a year, exactly how many new housing units have been added in these zones?

JOHN LOHR: Mr. Speaker, again, on special planning areas, I would say I am very proud of the work that's been done, and we had a very excellent chair on that. As you members know, a former member of your caucus was our chair. He's stepped away right

now. He's not with us anymore, but we're very proud of the work he did. I'm very proud of the work that the special planning areas are doing. I can inform the members that we continue to work on that. We're continuing to work on the Deloitte report - an important report to address the barriers to housing. I think that every Nova Scotian understands the need to make that move faster.

THE SPEAKER: Order, please. The time for Oral Questions Put by Members to Ministers has expired.

The honourable Deputy Government House Leader.

JOHN WHITE: Mr. Speaker, pursuant to rule 5C, I move that the time for adjournment for the House on Wednesday, April 5, 2023, be not 5:30 p.m. but 11:00 p.m.

THE SPEAKER: The motion is that the hours for the House for tomorrow, Wednesday, move to 11:00 p.m. from 5:30 p.m.

Is it agreed?

It is agreed.

The motion is carried.

GOVERNMENT BUSINESS

THE SPEAKER: The honourable Deputy Government House Leader.

JOHN WHITE: Mr. Speaker, would you please call the order of business, Government Motions.

GOVERNMENT MOTIONS

THE SPEAKER: The honourable Deputy Government House Leader.

JOHN WHITE: I move that you do now leave the Chair and the House resolve itself into a Committee of the Whole on Supply.

THE SPEAKER: The honourable member for Cape Breton Centre-Whitney Pier.

KENDRA COOMBES: Mr. Speaker, poverty is a political choice created by governments, policy decisions, and approach to social welfare, and the refusal to fix inadequate social programs to bring families and individuals above the poverty line. The PC budget is glaring example of this. Nova Scotia has the highest provincial poverty rate

for individuals living alone, at 19.8 per cent. Children and families are 11.4 per cent, young adults at 18.4 per cent.

Anti-poverty advocates such as Alec Stratford, Executive Director and Registrar for the Nova Scotia College of Social Work, stated, “The fact that poverty has been left to fester represents an economically and socially reckless approach to governing in the public interest.” I will table that.

The Progressive Conservative government should have looked at preventive health measures if this was truly a health care budget. Inequalities continue to rise, and more Nova Scotians will not have enough to pay for their basic needs, which causes anxiety, illness, social isolation, leading to greater need for services, including emergency room care and mental health care.

According to the Canadian Centre for Policy Alternatives Nova Scotia, the impact of minimally helping people cope with living in poverty has costs greater than what it would take to lift people out of poverty. Living in poverty harms mental and physical health and keeps people from reaching their full potential. The cost of poverty in Nova Scotia is \$2 billion dollars annually - including \$204.8 million in additional health care costs, and \$367.3 million when children live in poverty. I will table that, Mr. Speaker.

On Wednesday, March 29, 2023, the Minister of Community Services’s answer to food insecurity alarmed me when she said, “and we didn’t shy away from telling everyone that this was going to be a health care budget. When we have everyone being looked after in health care, that looks after all Nova Scotians.”

Healthy food and food security is health care. A nutritional diet provides nutrients for growth and repair, strengthening our immune system, and reducing the risk of type 2 diabetes and heart disease. As Nova Scotians see the rising cost of groceries, especially healthy food, it is becoming increasingly difficult for people to afford groceries. Instead, Nova Scotians are forced to make decisions - buying food with less nutritional value because it’s cheaper, skipping meals, and seniors becoming sick from not eating proper meals.

This is a budget. This budget does not acknowledge nor do the minister’s comments reflect food security as health care. Instead, this government’s response to food insecurity is food banks. Mr. Speaker, the government’s only response to food insecurity is relying on the non-profit sector to do the work government needs to do.

Food bank usage is growing, and more and more Nova Scotians are becoming reliant on them because they can no longer afford to buy groceries, heat their homes, and pay rent or mortgages. Food banks want to be put out of business. Every food bank I’ve visited has told me that if they knew people had enough money to live and thrive, they would close tomorrow. However, due to government inaction they are forced to stay open

because they know the only way so many of their community members will be able to eat is if they get groceries from their food bank.

Mr. Speaker, if this were an actual health care budget, we would have seen bold action, investments into poverty reduction, and a strategy for poverty elimination. We've provided them the road map. I know - I tabled the bill. This bold action took place, though, during the COVID-19 pandemic with temporary benefits, and the results proved it worked.

The Canadian Centre for Policy Alternatives released its annual report card on child and family poverty this March. It says that the poverty rate decreased by 24.3 per cent from 2019, the biggest single drop on record. The report also stated that almost all the funding that decreased the child poverty rate in Nova Scotia in 2020 came from the federal government. The report also shows how little the Nova Scotia government contributed to this unprecedented lowering of child poverty, and I'll table it.

Instead, this government's response was to freeze income assistance. I'm sorry, it's not frozen; it's been cut. With the cost of living rising and purchasing power diminishing, by not raising income assistance, this government has cut it. People living on income assistance receive - a single person, \$687 per month. One person and one child receive \$982 per month. And one parent and two children or more receive \$1,013 per month. I'd like to see some of us live on that.

The enhanced income assistance rate for a single recipient, for those who are disabled, over 55, or fleeing abuse, is \$950 per month. The standard essential rate for people in a homeless shelter is \$380 per month. Mr. Speaker, how can we expect people to live and thrive when most rents would cut into all or most of their monthly income? How can we expect people in homeless shelters who receive \$380 per month to be able to seek long-term accommodation, especially when this government is not providing any affordable housing?

People with disabilities are disproportionately living in poverty and low-income housing. They are forced to struggle with the constant denial of their human rights and with being infantilized.

Disability poverty is often connected to discrimination. Employment opportunities are often limited because employers see only the disability and not the ability. Furthermore, if an individual on supported employment makes over \$350, they begin to see a clawback in their income support. This clawback keeps people in poverty.

Many assume that people working full-time is a pathway out of poverty, but many Nova Scotians who work at or around the minimum wage face a different reality. Finally, after a long wait, Nova Scotians will finally reach \$15 an hour in October. However, research has shown that the lowest living wage in the province should be \$20, and the highest is around \$22 or \$23 per hour.

[3:00 p.m.]

So many Nova Scotians identify as working poor. They go to work, but do not make enough money to live. They struggle to pay their bills, put food on the table, heat their homes, pay their rent or mortgages. I know Nova Scotians who work, yet they live in their cars. I know Nova Scotians who work but cannot afford their medications. Nova Scotians are struggling. They can barely afford to live.

Mr. Speaker, a living wage is health care. If Nova Scotians had enough income, they would not be forced to choose between heat, food, medication, housing, and the list goes on. People need to be able to afford healthy food, heat their homes, have power, take their medications regularly without skipping them, and have housing - adequate, safe, appropriate, affordable housing - to be healthy. To afford these things, people need a living wage.

Housing is health care. Everyone deserves a safe, affordable roof over their heads. No one should be waking up with frost on them in Nova Scotia. No one should live in a tent, in their cars or on the streets.

Like the last government, this government likes to praise rent supplements, but they only work if there are places to rent. In Nova Scotia, the number of people who are homeless continues to grow. I have a growing list in my office, and I am angry and sickened by this government's inaction. Are we ashamed yet? Are we appalled enough? How many more deaths do we need before government reacts decisively and builds more safe, appropriate, affordable housing?

Again, housing is health care. If this were an actual health care budget, it would have met the needs of Nova Scotians - and yet so many have been left out. The social determinants of health have been left out of this health care budget. This health care budget falls flat on what is needed. With that, I'll take my seat.

THE SPEAKER: The honourable member for Halifax Atlantic.

HON. BRENDAN MAGUIRE: Kind of on the theme of the member for Cape Breton Centre-Whitney Pier, I want to talk about the social determinants of health.

We know now - after two years of this majority Progressive Conservative government - that they don't understand health care. They don't understand what causes people to have issues with their health care. They don't understand poverty. They don't understand housing. Quite frankly, they don't understand the economy.

We heard today that the Minister of Agriculture - and there were members from the wine industry in this gallery who reacted with disgust to the response from that minister.

We have a Minister of Finance and Treasury Board who has said to us in the past, there are all kinds of jobs out there. If you're not making ends meet, get a better job.

We have a Minister of Community Services who has said that health care causes poverty - that it trickles down. The people the Minister of Community Services was appointed to represent and be the voice of, for the second year in a row - let's be honest - had a cut to their income. By staying flat with inflation, they have seen a massive reduction in their buying power - what little buying power they already had. The minister's response was, talk to the Department of Health and Wellness, talk to Justice, talk to Municipal Affairs and Housing.

This government does not understand Nova Scotians. It's clear. It's a government that's out of touch. It's a government that brags about the amount of money they spend. Last budget, it was \$13 billion; this one, it's \$14 billion, plus all the money they're spending on the side without us having the ability to look at. They're over here in the corner spending billions. We'll call it an even \$30 billion to \$35 billion of taxpayers' dollars.

Health care has gotten worse. It has gotten worse. There's this blindness that happens when we come into this Legislature on government's behalf - all sides - where they act like everything is okay. I can tell you for a fact, it's not.

I can tell you for a fact that a lot of your constituents are reaching out to this side of the aisle. Some of yours, too. I'm telling you - because they're not getting a response. They're not hearing their voice in this government. They're not seeing themselves in the people they elected. They learned very quickly that the people they elected - some of them - do not represent them. They represent their party. That's shameful.

We see government after government - but in particular this government - made some bold promises. They won on their promises. They talked about a Better Pay Cheque Guarantee. You just have to go back and look at the YouTube video where the Premier of Nova Scotia - then the Opposition Leader - said on CBC: Day 1, a Better Pay Cheque Guarantee. I don't know what day we're up to now, but it's certainly past Day 1.

The response from the Minister of Finance and Treasury Board is, we can't chew gum and walk at the same time. We're solely focused on one thing, so housing be damned, better paycheque be damned. We heard the Minister of Finance and Treasury Board say today - in his response to the member for Kings South when he talked about the wine industry - that it was giving Nova Scotian producers an unfair advantage in the marketplace here in Nova Scotia. You know what that sounds like, Mr. Speaker? Buy Local. Buy Local was one of your biggest promises.

As far as we can tell, it's the members on the government side who get to drive around in a parade in rural Nova Scotia - in a \$100,000 truck. There are two of them,

apparently. Who knows where they are parked - I'm sure at one of their houses. That is their buy local program. I was shocked to hear the Minister of Finance and Treasury Board say that it gives our wine industry unfair advantage in Nova Scotia.

There has been no economic development coming from that side - none. None. Their idea of economic development was a wink-wink, nudge-nudge, we'll buy a shipyard. Oh, we got caught - we're going to pull it out now. We're not going to buy it anymore. Well, I shouldn't say that. I apologize. They have done some economic development. If you own a piece of land that they want, you're going to get 30 to 70 per cent over asking price. Don't believe me? Look at the hotel in Bedford. Look at the land in Dartmouth right now. If you own a piece of land in Dartmouth - anyone watching - call the Premier.

THE SPEAKER: Order, please. The member should not direct his comments to people who might be watching at home.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: Mr. Speaker, if anyone in Dartmouth, Nova Scotia owns a piece of land anywhere near the hospital, you just got yourself a lottery ticket from this government. My advice to them is: If it's worth \$500,000, ask for \$10 million. They will probably get it. There are no tenders going out on this stuff.

For a government that when in Opposition talked about accountability and protecting the public purse, the only thing they are doing is protecting their own interests. They're protecting their friends who own shipyards, protecting their friends who own land, appointing their buddies to boards, commissions and associations, and making sure that they load the deck. It reminds me of what Donald Trump did as soon as he got in. He got rid of everybody and put his buddies in.

This budget does nothing - nothing for a better paycheque, nothing for universal mental health care. It's another big promise from them. Their idea of universal mental health care is one hour, Mr. Speaker. They did a poor job of advertising it on purpose because, as we heard today from the Minister of Municipal Affairs and Housing, we don't want to go anywhere near the budget - because if you spend too much money in an area that is not health care, they are going to change the game.

Nobody on this side of the House - I will guarantee you - spends 50 per cent of their paycheque on housing. Not a single one of them does - but they expect others to do that in order to get help. It is a gross, paternal situation that happens. We know better than you. Not a single person over there spends 50 per cent.

A lot of them got a little bit of a pay bump and a little raise from the job - and the Cabinet minister position, the great pension, the benefits, and everything that goes along with it. Then like I said, you sit in the chair and the blindness happens. It's defend, defend,

defend - defend the shield, defend the PC caucus brand. Like, be damned with the people you're supposed to represent. I guarantee you that those individuals on that side are hearing about the change in rent subsidy, the food program - which they have now downloaded onto the federal government - the lunch program, because again, they can't chew gum and walk at the same time.

[3:15 p.m.]

The Better Pay Cheque Guarantee - at this point they can't speak and walk at the same time. They can't breathe and walk at the same time. It's getting difficult.

Universal mental health, which is non-existent; one hour is shameful. To get out there and brag about it and splash it all over social media - promise kept, you get to sign up for universal mental health. You get to sign up. Take the first 45 minutes. Sign up. Go through the process and then they say, oh, you are done, the hour is up, you can now give us \$300 an hour, \$200 an hour. You know what? You get to check the little box that says "universal mental health." We did it.

They did nothing to protect ratepayers in Nova Scotia. They passed a bill that prevented an extra 1 per cent power increase, but it went up 14 per cent and we had the Minister of Natural Resources and Renewables who - as far as I could tell - understands his file explicitly - knows it inside and out - and sat here in the Legislature and said: wait a second, there's a difference between this bill and the power rate increase that Nova Scotians are going to see. Thank you, minister.

Then you turn to the left and you see the Premier who said, whoa, whoa, there will be no increases under this government, we are going to protect them from any sizable increases. We said: You're off-centre with your own minister - which is it? He ran out, hopped, skipped, jumped all the way out to the media and said: Look at me, I protected ratepayers. There will be no large increases under my government. Literally a week later, this large increase.

What happens? He sits here, blinders, they act like it's not happening because he can afford it, he can afford that 14 per cent.

The cost of food is going through the roof. I'll give you an example of when you know that the price of food is out of control - a 79-cent hamburger at McDonald's is now \$3. It's out of control. They've done nothing but point fingers and blame. They blame the feds. They say: The feds aren't doing enough, we need more money from the feds.

The feds gave them buckets of money; they have rained down cash on them for health care. And what did they do? They turned around and bought a hotel they were told not to buy, by an independent consultant they hired, and spent probably hundreds of thousands of taxpayers' dollars to get their advice. They were told don't buy this, it doesn't

suit health care needs, you are going to have to spend tens of millions of dollars more and they did it anyway - faster, better, more; harder, sloppier is what it actually should be.

This has been a boondoggle from the start. It actually puts the bureaucrats in a tough situation, too. Imagine working in the Department of Community Services right now, imagine working in housing right now, imagine working in health right now and knowing that you don't have income assistance rate increases, that you now have to deal with people who have to have 50 per cent of their income.

Mr. Speaker, they can smile, they can laugh, they can sit over there, they can ignore us all they want, but in two years' time they are going to get a rude awakening at the polls for everything they have done to Nova Scotians and every single promise they have broken. Shame on them for not realizing it and correcting course and doing what is right for Nova Scotians.

THE SPEAKER: I'd like to ask the honourable member for Halifax Atlantic to table three documents, please. The member quoted the Minister of Finance and Treasury Board three times - relating to jobs, relating to walking and chewing gum, and relating to the wine industry. I'd request that those documents be tabled, please and thank you.

Seeing no other speaker, the motion (Interruption) the honourable member for Cumberland North.

ELIZABETH SMITH-MCCROSSIN: When you walk down the streets here in Halifax or back home in the town of Amherst, most people are oblivious to the work that we're doing here in the Nova Scotia Legislature. Most people are just trying to survive day to day, week to week, and month to month, dealing with their anxieties from not having enough money to pay their bills, dealing with worries about their children and/or their grandchildren. One common thing that we all have is trying to make sure that we balance our chequebooks or bank accounts at the end of each month.

I worry a lot about the people whom I represent right now. There are a lot of people who are really suffering and struggling. I'm sure a lot of it is related to the pandemic. I believe, Mr. Speaker, that we need a period of healing.

When we have children going into schools with guns, when we hear teachers say that their biggest problem is violence and disruptive behaviour in the classroom, we know that that is a reflection of a much larger problem, which is the pain that they are experiencing in their own homes and communities.

When we walk down the streets here in Halifax and even in my own hometown of Amherst and witness so many of our young adults living unsheltered, so many resorting to illegal drugs to mask the pain that they're going through, as elected representatives, we hear from grandmothers and grandparents who are raising their grandchildren because

their adult children are unable to care for them. We hear from people who are going through family violence and are living in fear, failings of law enforcement and our justice system, as perpetrators go free and are left to continue hurting those most vulnerable in our communities.

The findings of the Mass Casualty Commission reinforced this and highlighted these things that we need to make improvements to here in the province of Nova Scotia - improvements in law enforcement, in justice, and in mental health.

Those working in those areas of law enforcement, justice, and mental health are hurting, too. Many of them are working in conditions of understaffing and are dealing with people who are struggling, just like we do, and our staff in our constituency offices.

These people working in law enforcement, justice, and mental health are facing criticism every day from people who believe that they're not doing enough, not making the right decisions, and preventing some of these problems to treat and address these issues in our society - similar to what we go through here as legislators and elected professionals. I believe that we have a responsibility as leaders to listen, to always be striving to make improvements for the people whom we represent.

Certainly, in Cumberland North, the main thing that I hear about that I was pleased to see in this budget, was the focus on making improvements to health care. There's no question that changes are needed and are needed now.

I was concerned about the continued lack of government to make commitments to change or end bracket creep. I believe poverty is one of the underlying issues that is causing many of the problems that we're seeing in our communities. Bracket creep and the inability or unwillingness to increase our income tax brackets in line with inflation only continues to keep people in poverty.

Also, basic personal tax exemption - we have the lowest basic personal tax exemption in the entire country of around \$8,400, whereas Alberta's is \$19,000. Here in Nova Scotia people are paying the second-highest marginal tax rate in the country.

When we look at health and how we can actually improve health, one of the most significant ways we can help people improve their health holistically is through making sure that they have enough money to live. Income is the number one determinant of health.

I wanted to make those few comments about poverty and health. Today in my reply to the budget, I want to focus on some other issues that I'm hearing from the people that I represent. One of the issues that I was disappointed not to see in this budget is a financial commitment to build the dikes higher in the Chignecto Isthmus, and we hear about this year after year. There's a plan that's been put forth, a study that's been done, yet we continue to see no commitment.

Just last week we saw the minister from Westmorland County in New Brunswick plead to our Premier of Nova Scotia and the Premier of New Brunswick to make a commitment to make the improvements to the Chignecto Isthmus that are needed. It is much cheaper to prevent than to deal with the catastrophic damage that would happen if and when those dikes flood.

Not only would the town of Amherst be impacted by part of the town being flooded, we would also lose critical infrastructure of transportation through the Trans-Canada Highway, as well as CN Rail, which, as the Minister for Public Works has already indicated, is \$50 million on average per day. I'm assuming with inflation that's much higher now, because those numbers are what was quoted about three or four years ago. That equates to over \$35 billion a year in goods that travel across the Chignecto Isthmus, the gateway from Nova Scotia to the rest of the country.

The Chignecto Isthmus also holds critical telecommunications and utility infrastructure. It's vital, not just to Cumberland County but to the entire province of Nova Scotia.

The federal government has made their financial commitment to the Chignecto Isthmus, and I believe that our province should also be making that financial commitment and we should have seen at least the beginning of that in this budget.

Some of the work could start now. We don't have to wait to continue to study and design. Some of the work - there's one place, with the LaPlanche River, that the water from the Bay of Fundy goes right up to the dike. Sometimes, if you've seen pictures - there's actually a picture from one storm where the water is almost breaching the dike and there's a train going across.

So the work should be starting now. On behalf of all Nova Scotians and all Maritimers, I plead with the government to make the Chignecto Isthmus, the building of the dikes higher, a priority for this government.

Housing: We hear a lot about housing, and I want to just emphasize the need for improvements in housing, in particular public housing access for people. In the Amherst area and throughout Cumberland County there's approximately a two-year wait period for people who are waiting for public housing.

Education is something we haven't heard a great deal about here in the Chamber. On Sunday I held a public town hall meeting, and I want today, in this reply to the budget, to bring up some of the things that I heard from the community around education.

The number one theme that I was hearing from both teachers, as well as parents and grandparents, is the concern about violence in the classroom, as well as disruptive

behaviours in the classroom, and the lack of ability of teachers to manage those behaviours, or at least manage them well and consistently.

Teachers are concerned about class composition. They have a great deal of paperwork and there's a great deal of time and effort that they need to spend doing the PowerSchool.

Workplace conditions: We hear a lot about the workplace culture and the challenges in health care. I want to make sure that it is on the record that our teachers and those working in our education system are saying the same thing, but they're not speaking as loudly, possibly.

Mr. Speaker, I believe that our teachers and our families need this government to make education a priority, to take a closer look at what teachers are dealing with right now. The fact that many schools do not have enough teachers to staff every classroom and the fact that administrators - formerly known as principals - are having to take resource staff out of their positions to provide that important support, resource support, into classrooms because they simply don't have enough teachers.

In response to that, some of the solutions and ideas to address that were to bring back the teachers' college, the two-year program, so that we can educate more teachers and faster and have more hands-on with our new teachers.

Another consideration, Mr. Speaker, is Mount Allison, right next door in Cumberland County. They used to have an education program, and it no longer does. In fact, we have no education of teachers or nurses in the northern area. Pictou, Cumberland, or Colchester are not able to educate their own educational staff as well as nursing staff. We believe that there should be satellite sites and/or university programs made available in the northern area of Nova Scotia, just like they are in every other area.

So a teacher shortage is something that was identified. A suggestion was to look at why there are so many teachers off, or why we have a teacher shortage, and to look at the numbers of how many teachers are off on disability - what the underlying reasons are for teachers being off on disability, and how many are taking early retirement due to working conditions.

Then from a governance structure, there was a lot of discussion around local school boards, and parents who attended the meeting felt that there is no formal organization where they can have their voices heard other than coming to their MLA, to formalize and discuss issues within the school. They were looking for when local school boards are going to be brought back. That was the discussion in the last election, and they're waiting for that to happen.

There was a discussion around SACs in schools and trying to make them be more effective. There was a discussion around what their mandate is, what the intention of a SAC is. Has there been an evaluation of that model? Is it effective? Through evaluation, we can look at whether there is maybe possibly a better model for parents and for teachers to bring concerns forward.

[3:30 p.m.]

Many parents have asked me why children do not have access to laptops or Chromebooks in the classroom. Certainly, in these days of technology, that is something that is needed, and that comes up quite regularly as well.

Many new teachers are concerned with being isolated. Years ago, I had some teachers who are more mature share that they used to have mentors. When teachers came out, that first year of teaching, they always had a mentor, and they no longer have that in place. They believe that would possibly help retain more teachers in the profession - if new teachers had mentors.

Teachers are feeling overwhelmed. Students are stressed. Families are under a great deal of stress. We're seeing that in the classroom. We're seeing that in our schools.

Something that I am hearing from parents, and have consistently, is the lack of access to assessment, some waiting up to three or four years to get a psych/ed assessment for their child. That was also discussed at our town hall meeting. Then we heard from some teachers who said even once the assessments are done and a plan has been prepared for the student, there is simply not enough resource staff to implement the plans, the adaptations, that have been brought forward for that student. I did bring that up in Estimates with the Minister responsible for the Office of Mental Health and Addictions. Can we look at a model like what's happening in New Brunswick, where they have really reduced the waiting time for people to get their psych/ed assessment?

Mr. Speaker, these are just a few of the comments that are bringing forth the voices from the people whom I represent in Cumberland North who I think are relevant to this budget that was tabled this session. I have much more content and look forward to sharing that at a future time in reply to the budget.

THE SPEAKER: The motion is carried.

We will now take a brief recess to set up with the Minister of Municipal Affairs and Housing.

[3:35 p.m. The House resolved into CW on Supply with Deputy Speaker Kent Smith in the Chair.]

[7:48 p.m. CW on Supply rose and the House reconvened. The Speaker, Hon. Keith Bain, resumed the Chair.]

THE SPEAKER: Order, please.

The honourable Deputy Government House Leader.

JOHN WHITE: Mr. Speaker, would you please call the order of business, Public Bills for Third Reading.

PUBLIC BILLS FOR THIRD READING

THE SPEAKER: The honourable Deputy Government House Leader.

JOHN WHITE: Mr. Speaker, would you please call Bill No. 256.

Bill No. 256 - Patient Access to Care Act.

THE SPEAKER: The honourable member for Halifax Atlantic.

HON. BRENDAN MAGUIRE: Thank you, Mr. Speaker. It's great to see you tonight. It's great to see all of you here. Tonight, we're going to talk about health care and let me get my thoughts here for a second because I was on a roll last time and I've just got to get some information here.

THE SPEAKER: Order, please. We jumped the gun here a little bit. Probably trying to get you to speak so much that we were looking forward to it.

The Chair of the Committee of the Whole on Supply reports:

THE CLERK: That the Committee of the Whole on Supply has met and made considerable progress and begs leave to sit again.

THE SPEAKER: The honourable Deputy Government House Leader.

JOHN WHITE: Mr. Speaker, would you please call order of business, Public Bills for Third Reading.

PUBLIC BILLS FOR THIRD READING

THE SPEAKER: The honourable Government House Leader.

JOHN WHITE: Mr. Speaker, would you please call Bill No. 256.

Bill No. 256 - Patient Access to Care Act.

THE SPEAKER: The honourable member for Halifax Atlantic.

HON. BRENDAN MAGUIRE: Thank you, Mr. Speaker. Thank you, everyone, for being here tonight. I want to go through some of these Acts that we have here that are being impacted by this new change.

First we have the Medical Imaging and Radiation Therapy Professionals Act - we'll get into that one in a minute. The Medical Laboratory Technology Act - that's a good one. The Psychologists Act. This is a thick one - the Physiotherapy Act. The Respiratory Therapists Act. All these Acts are impacted by this bill.

THE SPEAKER: Order, please. The honourable member can read the title, but you don't hold them up as a prop.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: We have the Pharmacy Act, we have the Nursing Act, we had the Midwifery Act - I will say, in this current budget, I don't think there was a single mention of midwifery. We have the Occupational Therapists Act, the Optometry Act, the Paramedics Act, the Pharmacy Act, the Counselling Therapists Act, the Dental Act, the Dispensing Opticians Act - I'm going to start with that one, I think. The Medical Act, which you would think would be thicker, Mr. Speaker. It's not that thick. The Dietitians Act, the Denturists Act - did I say that right? The Dental Technicians Act. The Dental Hygienists Act. The Chiropractic Act - I think I could use some of that right now. The Audiologists and Speech-Language Pathologists Act. (Interruption)

THE SPEAKER: I would ask the honourable member to table that multitude of Acts.

BRENDAN MAGUIRE: I will definitely table them. I just want to make sure that I can reference them.

Mr. Speaker, I'm going to start with the Dispensing Opticians Act. I don't know what that is, but what I can tell you is that this Act is being impacted. I guarantee you that the vast majority of people over there do not know what is in this Act, nor do they understand what this Act is, yet they are voting on it. They are voting on making changes to this Act.

This Act - if we go to the interpretation, it is about contact lenses. "Contact lens provisional permit' means a permit issued to a specialty student optician to allow the student to engage in the measuring, fitting or adjusting of contact lenses to the extent required to gain eligibility for registration on the specialty register."

I am wondering, because this bill is so open, will that change? For anyone who is following along here and at home, that's 2(f).

I joke a bit about this, but the truth of the matter is that there are life-saving clauses in this. There's a way that individuals who go to school, who come to this country, who come to this province, who decide to be a dietitian, who decide to be a dentist, who decide to be a therapist - there are ways they are expected to behave, there are things they are expected to do, there are ways they are expected to treat their Nova Scotians, and there are very strict and stringent rules they have to follow.

My issue here, Mr. Speaker, is I will guarantee you that nobody over there has read these Acts. Nobody. They might have read one - they might have perused through one - but nobody has read this. Nobody has read these Acts.

THE SPEAKER: Order, please. No props.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: Nobody has read these Acts, and yet they can't tell you - the bill they are voting on, they won't and can't tell us what is about to change in these Acts, or what level of service is about to change.

This is one of the broadest bills this government has ever brought forward, yet it's a health care bill. I don't know about you, Mr. Speaker, but if I go see a psychiatrist, I want to make sure that that psychiatrist is following the Act and didn't get bumped up a bit or get moved around because the Premier wants to look good on reducing lists in this province.

That is what is happening here. This isn't about better health care. It's about better public relations messaging. This isn't about faster health care. This is about reducing those lists faster so they can get more votes and then go back to the public and they can say, look what we did. They're doing it everywhere. It's not just in health care.

The reducing, when it comes to lists, Mr. Chair, Mr. Speaker, Mr. Cape Bretoner. (Interruption) Don't call him late for dinner.

They are increasing the percentage that Nova Scotians have to have to spend on rent in order to get a rent supplement - from 30 per cent to 50 per cent. How does this all tie in? I'll tell you how. When you go from 30 per cent to 50 per cent, that means fewer Nova Scotians are going to be eligible for this credit. Guess what happens? The list magically decreases without them doing a thing. They'll come back next year, and they'll say, there aren't 2,000 people on the wait-list - it's much more than that, by the way - it's only 500 now.

We have heard the Minister of Health and Wellness and others say that they're

looking at making changes to the Need a Family Practice Registry because they don't feel like it's giving accurate information. Well, it's pretty straightforward - I need a doctor, I'm on the list. That's it. Are they going to remove me because I have brown hair? Do you get removed because you have a beard? Do you get removed because you live over here? Do you get removed because you're a grey-haired, middle-aged man from Cape Breton? Are these things that . . .

THE SPEAKER: Order, please. (Laughter) No props. When you point to the Speaker, that's a point of order.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: Again, this is not about providing better health care. This is not about providing easier access to health care. I was just on my social media before I stood up, and one out of every three posts on Facebook of the 8,000 or 9,000 or 10,000 people that I have on my social media - one out of every three, I counted it - was health care-related. People are saying, I'm sitting in the emergency room, been here for 20 hours. People are saying, mom can't get this, or dad can't get that. That's what's happening in this health care system.

This government has not brought a tangible piece of legislation forward to fix it. This is the lightest session in history - excluding the FMA, six pieces of legislation. One's on a church, or one's on this, and one's on that. We're talking a full session. We're not talking an emergency session. We're talking a full session. This is the lightest we have ever seen. For a government that says more, harder, faster, stronger, bigger - all those words they want to use, it's like being part of the WWE - for a government that uses all these adjectives to describe what they're doing, this session has been nothing, hot air, very little, unsympathetic, tone-deaf. Those are the words we are using to describe it.

Again, I would challenge anyone here, this bill will do nothing - nothing - to fix health care. They did absolutely zero consultation. We heard from the professionals. No one was spoken to, but they'll stand here in this Legislature, and they'll say, we're consulting; we're talking to everyone - because they can get away with bending the truth here in this Legislature. We hear it time and time and time again - how they say, we've talked to so-and-so. We've asked so-and-so. They're on our side. This person supports us. These people believe in us. Then when you walk outside the Chamber and you talk to those groups, they don't. The same people who are making these comments in the Chamber won't sit in Law Amendments and face the fire. They won't face the fire.

Again, it's pretty insulting when these professional bodies who have spent an entire lifetime of education and service for Nova Scotians are being told by somebody who has no experience in the field - there might be one health care professional on that side of the House - is telling them, you're not listening. We know what we're talking about.

I've said it before and I'll say it again, there's something about this place, that when you walk in and you're on that side of the House, the blinders come on and the fingers go in the ears. Nobody wants to listen. They have their own agenda and they're the experts on everything.

[8:00 p.m.]

We keep hearing: We're spending all this money to fix health care, so we don't need to pass substantial legislation. You know what we're going to do? We're going to get in and out as quick as we can, so that we can do things in the middle of night, in the cloak of darkness. Like they did with the rent supps.

You know how we found out? When someone walked into my office who was desperately in need of housing, and we looked at the new form. That's how we found out. This government talks about health care, but you know what they don't talk about? The social determinants of health care. All they do is point fingers at the other departments. They don't talk about how they're driving people more and more into poverty.

Yet they're spending hundreds of millions of dollars on hotels they don't need, that they were told not to buy. But they're the expert, Mr. Speaker. They're spending way over market value on pieces of property. I said it before, and I'll say it again: If you own a hotel in Nova Scotia, if you own a piece of land in Dartmouth, you won the lottery. Call the minister. Call the Premier. Call your buddy who knows them, and they'll cut you a cheque.

But what they won't do is listen to the health care professionals. It's galling to me that they talk about being elected on health care and listening. We're going to listen to the health care professionals. They haven't listened. They don't even listen to themselves. They don't even listen to each other. Yet we expect them to listen. They don't listen to the professionals. They hire professionals to give them opinions and when it's an opinion they don't want, they don't listen. Why do they care? It's not their money.

Tax dollars are paying for hundreds of thousands of dollars for consultants, hoping they'll get what they want. When they don't, they ignore it - because somebody who has absolutely no experience in health care infrastructure knows more than those consultants. It's insulting.

They won't pump the brakes and say, we've made so many mistakes along the way. They've made so many mistakes along the way. They're not listening to anyone. They stood there in this Legislature, and when there were 30,000 people looking for a family doctor, they said the sky is falling and we're in the middle of a crisis; 100,000 more people later, and everything's fine. Everything's fine. It's all fixed.

All surgical wait times are going up. People are leaving the province to get surgery. The absolute disregard for life when it came to this government and their policies on

COVID is absolutely shameful. More people have passed from COVID in their first 18 months than the three years combined - not a mention.

That will be the legacy of this government. It will be a government that drove this problem into crumbling debt. Imagine this. This is a health care bill. We talk about health care in this province. They said, we'll spend anything to fix health care. I just saw one of those members post online, criticizing the federal government for spending money. They showed the debt that the federal government was spending and said, good Lord, look what they're spending. They're running the biggest deficit in this province's history.

The irony of someone posting that online is shocking. But I will say this: At least the federal government is doing something for Nova Scotians. At least they're doing something for Canadians - groceries and tax credits. They're doing all kinds of stuff. This government is doing nothing. Income assistance - driving poor people poorer. Driving people out of their homes by raising the rent cap. Throwing money hand over fist at universities that didn't even ask for it. Maybe it's just because they had Brian Mulroney on the side of it. I don't know.

THE SPEAKER: Order, please. I'm going to ask that the member come back to the bill that we're discussing now. It's the Patient Access to Care Act.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: All this comes back around when you underfund community services, when you underfund mental health, and you underfund the core programs that individuals need. They touted what they were doing for seniors. They haven't done anything for seniors. Nothing. What happens there? What happens when you refuse to help anyone but yourself and your friends?

More and more people access the health care system, and it makes the problem worse. There's no new money for seniors. There's nothing. There's nothing in this budget for seniors. There's no new money for income assistance. There's no new money for single parents.

It does go back to access to health care. When those individuals can't afford food, and they can't afford a safe and warm environment, they end up accessing our health care system. The Minister of Community Services tried to loop it around the other way. She said that poor health leads to poverty. It's the other way around. When you live in poverty, you're more likely to access the health care system. That's the truth.

Again, the blinders came on. They ignore the facts - make up their own facts, and head to the Law Amendments Committee with a piece of bill that is not going to improve access to patient care. What they'll say is what they've said about every piece of legislation and every investment they've done: Right around 2025 or 2026 is when it's just going to

bloom, and everything's going to be perfect.

Well, Mr. Speaker, what is 2025 and 2026? What is that to you? You'll be retired, on your deck, probably having a beer or a coffee, or whatever you do for your free time.

THE SPEAKER: Order, please. When you say "you," I'm sure you're not referencing me. (Laughter) Honourable member, please come back to the topic.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: What I'm trying to say is that these promises that are being made around health care and access to health care are to magically come to fruition in 2025. So the slogan will be "Re-elect us and this will all go good. It will all happen, but you've got to re-elect us." Well, what did you do in the last four or five years? You know what? We changed Clause 2(a) - Board means the Board of Directors of the College. We changed that.

We went to the Audiologists and Speech-Language Pathologists Act, and we made some changes. Well, what changes did you make? They don't know. They have no idea what is being changed in here. I guarantee most of them didn't even know these Acts existed. So again, I will say: Why - in the least productive session of the House in the history of this province - is one of your six pieces of legislation this?

I'll give them some. You want to help access to health care? Put more money in the pockets of Nova Scotians. Get rid of bracket creep. There you go. Get rid of it. Well, we can't, because we've got to spend your money, and we know how to spend your money better than you know how to spend your money. You certainly don't. You bought a hotel at 150 per cent of market value. You bought a piece of land in Dartmouth at 200 per cent value.

If you want people to have better access to health care, put the resources in their pockets. Give them their hard-earned money. We sit here and I hear MLAs complain all the time. Oh God, I have to work a six-hour shift in the Legislature - it's going to be a long day. This isn't the real world. You get to sit in a cozy chair while others struggle. They work in the weather and put in their 12 hours or 10 hours - and you are telling them that you know better.

THE SPEAKER: Order, please. We will come back to the bill.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: You are telling them that you know better than they know how to spend their hard-earned money to access the health care system. Well, you don't, because the proof is in the pudding. After two years and \$40 billion, everything is worse.

Everything is worse. I am actually surprised. I am shocked. Listen, you could have made a way better investment. The Washington Commanders just sold for \$6 billion. You could have bought them five times. (Interruption) The minister could stand up and talk instead of chirping.

[8:15 p.m.]

THE SPEAKER: Order, please. Instead of buying stadiums, we'll get back to the bill.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: There is lots of time to talk, so if the member for Eastern Passage wants to get up and speak, speak - she certainly spoke a lot in Opposition. One of the biggest things that was said in Opposition from the members opposite when they were in government was, my community does not have a family doctor. It was one of the things they said.

THE SPEAKER: Order, please. I just want to go back to a reference that was made. You do not make reference to a member being either in or out of the House. If there is a problem with the rules of the House, that is a point of order.

The honourable member for Halifax Atlantic.

BRENDAN MAGUIRE: Mr. Speaker, one of the things I will say is that when the member for Eastern Passage stood on this side of the House, every day stood up in Question Period and said, where's my doctor? My community is the only community without a doctor. Where's my doctor? Guess what? Still doesn't have a doctor - not saying a word. How's that for access to health care? How's that for blinders when you come in this House? What changed? Because they certainly didn't get a family doctor.

What changed is you got to protect the shield now. That's what changed, and that's what Nova Scotians are fed up with. When you come into this House, when you go to get elected you say, I'm going to make sure we get access to health care. I am going to fight tooth and nail. I'm going to do everything I can. You sound good. Then you get elected, you get into government, and you don't say a word - not a peep.

How frustrating is that? No wonder people are losing faith in their public institutions. No wonder they are losing faith. We are going to be here for at least a couple more weeks, Mr. Speaker. I would love to see members on the government side stand up and defend this bill, defend their track record on health care.

Tell me why, in Spryfield and Herring Cove, we had 700 people on the wait-list for a family doctor, and since they have taken over, 4,000. We have doctors leaving left and

right and they are told, we'll get you the resources you need, but only if you do more, only if you will work harder. Imagine that.

It must be easy to sit in our comfy chairs and tell people who are burnt out in health care and say: Work harder, you can do more. Look at me, I'm going more, I'm here until 8:16 p.m. Do you know how hard that is?

Yes, I am a little frustrated, I am a little tired of it. I did have high hopes. You spent \$40 billion. I remember, Mr. Speaker, when we were in government, there was an issue over the *Bluenose II*, and I'll tie this all back, I promise.

THE SPEAKER: Quickly, please.

BRENDAN MAGUIRE: There was some issue over the *Bluenose II* and members of the government who were in Opposition just stood up and destroyed us on what was going on with the *Bluenose II* - oh my God, the price has ballooned, there's this, that, and the other thing. They called it a boondoggle; it was a boondoggle. Well, Mr. Speaker, that has been no bigger boondoggle in the last 10 years than the \$40 billion this government spent on health care, only to get goose eggs. It's actually negative. If the PC Party of Nova Scotia was a stock, we'd all be broke. If they were in charge of our pensions, and our investments, and our household budgets, we'd all be living on the streets or in hotels.

Mr. Speaker, this has been one of the biggest embarrassments in the last 10 years that I have been doing this, to watch a government spend money hand over fist and smile about it, and say that everything is getting better, and everything is getting worse. They can't point to anything.

When things get bad, what do they do? They call a public meeting; we're going to run out in front of the cameras and come up with a new slogan. Nova Scotians are tired of that. Instead of sitting here and doing nothing with their money, at least give it back to them and let them spend it, because we know for sure that they can spend it a hell of a lot better than they can.

THE SPEAKER: Before I recognize the member for Dartmouth North I'm going to once again ask the member for Halifax Atlantic to table the bills that he spoke about. I just asked that at the end of the debate that it be settled, and, on a lighter note, I just want to let you know that with reference to the Speaker sitting with a can, BOOST comes in bottles.

The honourable member for Dartmouth North.

SUSAN LEBLANC: I like a good performance, I really do. I like funny, I like serious, I like comedy, I like tragedy, but I just don't think that this is the time. I think that we've got an extremely serious issue (Interruptions) - my microphone just went off - I'm going to start again if that's okay.

I love theatre, but now's not the time for theatre, Mr. Speaker. I rise with some deep concerns about this bill in its current form. The first thing I want to do is be very clear that our caucus supports the intent of the bill - absolutely, 100 per cent, supports the intent of the bill . . . (Interruption) I don't know what's happening there.

We support the best and the highest use of health care professionals to their scope of practice wherever it is safe for this to be the case. We know that streamlining regulatory processes and expanding scopes of practice can enable more access to health care and more collaborative care. We want this in Nova Scotia. We need this in Nova Scotia, but it has to be done safely.

We hear from this government that we have to do more, faster, but faster health care is not necessarily better health care. Faster health care is not necessarily safer health care. More health care is not necessarily better or safer health care. Good governance requires regular critical reflection and evaluation of systems and organizations. To ensure growth and renewal, it's important to have a rigorous, collaborative, and democratic process at the centre of this.

This bill is definitely not collaborative. It in fact calls democratic processes into question. Over the years, professional health care regulation has seen significant change. Understanding the history of self-regulation can provide valuable insights into policy and implementation. One of the most critical perspectives is the necessity of transparency and accountability. It's essential to ensure quality health care to build trust with the public.

It's concerning, irritating, and even offensive that the Progressive Conservative government has failed to consult in any meaningful way on Bill No. 256. Its unwillingness to accept amendments to the bill from the experts on regulation points to a government that's more interested in partisanship and politics than good public policy. The fact that they didn't consult or engage with any core stakeholders is a clear indicator that this government is not interested in being transparent or accountable in any way. When asked about this, the minister will say, of course we're going to consult. Of course, we're going to go to the regulators. That's fine, great. Why didn't you do it before the bill came to us? Why not? If it's so important that you consult and that you speak to the regulators - or if it's so important that we believe that you will - then do it before.

Research on regulatory systems has shown us that collaboration amongst stakeholders is crucial for successful regulation, particularly with health care professional regulatory policy. It must consider the concerns and feedback of all the stakeholders and develop solutions that work for everyone, while maintaining accountability and oversight. Failure to consult has led to ineffective policy, eroding trust, and worse outcomes for patients and patient safety.

To be clear, collaboration is vital for successful regulation. Collaboration can look like a lot of things. It can look like listening. It can look like sitting down at a table together,

exchanging ideas, exchanging knowledge. It can look like actually working together, writing up a document, marking it up, passing it across the table, marking it up, passing it back - that is collaboration. We didn't see, and we know that none of that has happened in this case. Failure to collaborate results in bad stuff. I will tell you again - I have said this before - I come from the theatre world. I love theatre. In theatre when you don't collaborate, you make bad theatre. In health care policy, when you don't collaborate, you make bad health care policy. It's as simple as that.

We in this room are politicians. Most of us represent a political party. We at least represent political ideas. We are partisan by nature. Those folks over there have similar ideas about the way things should go. We over here have similar ideas about the way things should go. Those folks over there have similar ideas.

Not everyone thinks exactly the same. There's always going to be a little push and pull in any political party but, by and large, we sit around with our like-mindedness and we talk about the best way to make things happen. And that's important.

I am a partisan politician. I'm a proud member of the NDP caucus and lots of things that the NDP caucus stands for, I believe in very strongly. But there are times when partisanship and politicizing issues can actually be bad for what we're trying to do in here. We have seen when parties are able to come together on an issue and how that can work really well.

Again, I'm going to backtrack because I want everyone to be really clear about this point. I am a partisan politician. I really am. But sometimes when we overpoliticize things or if we use important issues for our own political gain, those issues can suffer.

The government was elected on a platform of fixing health care. The Premier has said he'll do anything it takes to fix health care. More faster, better faster. But when we come to this bill, we are seeing that we're actually potentially putting patients in danger because of better faster, more faster - anything we have to do to fix health care and speed up the process. It's actually quite dangerous.

The powers that this bill grants Cabinet are nothing short of alarming, particularly in their potential to determine scopes of a profession and authorize unregulated practices. By politicizing regulation and exposing it to partisan agendas, this bill threatens the safety of health care.

We must resist any attempt to allow unchecked authority to dictate what is and what is not acceptable in our delivery of health care. It is experts, practitioners, and patients who have to be able to inform the political decisions. And by the way, Mr. Speaker, boy, did they try at Law Amendments Committee. They tried.

I want to share some of the concerns that we heard at Law Amendments

Committee, but before I do that, I want to talk for a couple of minutes about the Law Amendments Committee. In Nova Scotia, the Law Amendments Committee is the only mechanism by which the public - and in this case, professionals, who are also members of the public - can offer input into a given bill. It's an essential part of the democratic process in Nova Scotia.

In fact, in some places the Law Amendments Committee doesn't really work the way ours works here. Over the years since I've been elected - I attended Law Amendments Committee before I was elected, as a public person, as someone who wanted to speak about a lot of bad decisions that were being made by the Liberal party at the time - the film tax credit.

Anyway, I've presented at Law Amendments as a public person, as a member of the public. I have been sitting at the Law Amendments table since 2017, and I have to say that I've been deeply concerned about the way Law Amendments has been curtailed in some ways. At times we've seen governments try to limit the number of presenters. At times we've seen the government trying to limit the length of time a presenter can speak for. Thank goodness now we have the ability to appear virtually, so that makes it a little bit more democratic.

But in any case, the Law Amendments Committee is an essential part of the democratic process. It is where we as legislators hear from the public and have a moment of what we hear about in the federal system as a sober second thought, in a way.

So we can take a look at the bill; we can hear from people; we can go, oh yes, I never really thought of that. Oh, yes, actually that makes a lot of sense. Oh, whoops, there's a spelling error. Oh my God, that line is grammatically incorrect, let's fix this. Let's fix this before we turn it into law.

It's also a place - don't get me wrong - for people to talk about what is great about the bill, and we often hear that when we hear people - a lot of this is not about just crapping all over - excuse my language, Mr. Speaker - the bill, it's also for us to hear from members of the public about what's good about the bill.

Here's the thing: It's really terrible when we have that process in place to hear a premier of a province, or a government minister, tell the public that they will not be amending a bill before the next part of the process, which is Committee of the Whole House on Bills, where we get to take what we heard at Law Amendments Committee and propose amendments. It is an offence in my opinion to the democratic process, the way we make laws in this province.

People take their time, they take time off work, they travel down to Province House, they sit in a room that is hot and stuffy, they wait their turn, they share their deep concerns or, again, in the case of this bill, their deep professional knowledge, hoping that

what they say might contribute to some change to making a piece of legislation a better law. Then they leave and then they hear the leader of the Province say, nah, we're not changing it. It's brutal; it's offensive.

[8:30 p.m.]

I'll get to this a bit later - we actually heard from government members at Law Amendments Committee saying, oh, I just want to make sure that the witness knows that we are listening very carefully, and we are really looking at bringing amendments. I'll get to that in a minute.

Anyway, back to sharing some of the concerns we heard at Law Amendments Committee. We had about a dozen or so regulatory bodies that came to sound a note of significant concern in the drafting of this bill. The purpose of the Act refers to making it so people are able to practise to the full extent of their training. This was criticized by the College of Physicians and Surgeons of Nova Scotia - Dr. Gus Grant, when he explained that training is very different from an individual scope of practice. People are trained in a wide range of things, but this does not mean they are competent to practise in them. The example Dr. Grant gave was that he was trained in obstetrics. When he went to medical school, he learned how to deliver babies. But since he went to medical school, he hasn't delivered any babies, so currently he does not feel like he is competent to deliver a baby.

It's pretty clear, as this bill is drafted, this bill does not articulate a difference between these things, leaving the details up to regulations, where Cabinet, a group of people who may or may not be experts in health regulation - those folks get to decide how it works, how the wording works in the regulations.

Another example is Section 5(2) that says, "An authority shall waive any requirement for registration, licensing or renewal of registration or licensing for any applicant who is registered or licensed and who is in good standing in any jurisdiction prescribed by the regulations."

Good standing is not defined anywhere in the bill. Regulators point out that this is going to be widely different from jurisdiction to jurisdiction. In one jurisdiction good standing might be that you have paid your dues to your regulatory body or to your professional association. In another place good standing might mean that you have no criminal offences against you or that you have had no complaints against your professional practice. Those are very different things.

Again, we are leaving it up to regulation. And all respect to my colleagues across the way but most of them are not experts in health regulatory practice or policy - nor should they be, by the way, right? We don't need a bunch of people in this room who are experts in everything we make laws about. We are supposed to be representing the people of the communities we live in and bringing their voices to this Legislature, but we are allowed to

depend on experts who know more than we do - God help us if we don't.

Anyhow, back to my notes. Does this mean that a regulator must license someone in good standing, whatever that means? We don't know what it means, I've just said it could mean a number of things, even if they have a criminal record or even if they are not proficient or professional. This is not clear. As Dr. Gus Grant put it, the driver licensed to drive a passenger vehicle in Ontario cannot come and drive a big rig in Nova Scotia.

He said that medical training and practice vary greatly around the world, particularly in areas where culture, law, and medicine overlap. Arriving physicians to Nova Scotia often come with different training and approaches to contraception, informed consent, human rights, mental health, abortion, opioid prescribing, and medical assistance in dying. For such reasons, these physicians need oversight and evaluation. But yet the bill as drafted could require regulators to license providers who have no knowledge of local health care practice and who are not competent to provide health services.

The health regulators explain that the bill presents an unacceptable risk to Nova Scotians - an unacceptable risk. More faster, better faster, do anything we need to do to fix health care - and yet this bill presents an unacceptable risk to Nova Scotians. More faster can actually be quite complicated, and there are already a great number of experts who are working very hard on all aspects of this. The government would do well to join forces with them rather than steamroll them with a hastily drafted rush job. We heard from the regulators at Law Amendments that many of the bodies have already been working on many of these issues and figuring out how to safely and sensibly speed up the process of getting folks working in Nova Scotia.

The health regulators network, who were not consulted or informed about the bill, had emergency meetings for multiple days after they learned of this bill's introduction to develop a number of suggested improvements. The list of concerns in this vein is long. We heard from nurses, pharmacists, dentists, dental hygienists, social workers, chiropractors, optometrists, and medical imaging professionals with similar concerns. Just ask the member for Halifax Atlantic. He tabled all of the bills that are reflected by the folks who showed up at Law Amendments.

My colleague for Kings South has made an astute point, I think in Committee of the Whole, when he asked whether the government has analyzed how the bill will impact insurance rates for regulators. I would invite one of the government members to enlighten us on that when they have a chance to get up to speak.

Regulators also pointed out that the bill is not explicit about who will cover the cancelled fees for registrants or applicants. Government has said they will cover the fees for a year, but after that, it's unclear. Many of the smaller regulatory bodies depend on these fees to do their job, which is, by the way - don't forget - to protect public safety.

These concerns are why we were very glad to hear - this is what I'm talking about, what I referenced earlier - the government's side signal that they were going to consider amending the bill after listening to the regulators. I'm sorry, but it was very clear when I was sitting at that table that the people across from me on the government side were listening. They were listening, and you could tell they were processing.

I believed the member for Richmond when he stated several times during Law Amendments that the government would be taking the suggestions from presenters into consideration very seriously. I believed him. The member for Eastern Shore also made similar comments.

Evidently they were misled or mistaken. In fact, before there was even a chance for the Committee of the Whole House on Bills to sit and entertain amendments from all sides of the House, as I mentioned, the Premier spoke publicly that his government would not be moving or accepting any amendments. In my opinion, this has created a farce of the whole political process.

We have also not heard any timeline for the regulations given by the government. Will the timeline also be harder and better and faster and stronger? Will the Cabinet consult with regulators on those? In what form? When? Where? We've only heard from the minister that the consultations will happen. Will the public have any ability to provide input? In what form? It all remains unclear.

The government has taken great pains to assure us that of course consultation will take place - of course it will - but if they're so happy to consult, then why in the world was the consultation not done before the bill was brought to the floor of the House?

I just also would like to speak to the other part of the Act that places some restrictions on the use of sick notes by employers. Again, our caucus greatly supports any movement in this direction. It's something that we have asked for a long time. Sick notes create an unnecessary burden on health care providers and enable unnecessary snooping by employers. But again, these provisions of the bill seem rushed.

We're trapped in a consultation with worker representatives - for example the Nova Scotia Federation of Labour, who presented at Law Amendments. They pointed out, or Mr. Cavanagh pointed out, that enabling employers to require sick notes for two absences less than five days each is far too restrictive, and risks undermining the purpose of the bill. The bill is also too restrictive in its provisions around who can provide the notes. The Federation pointed out that the federal guidelines are not nearly as restrictive, and we should follow suit.

I would like to point out that I have not implied implicitly, or explicitly, that the government intends to erode public safety, but despite intentions, the government is obligated to put in place these kinds of guardrails. This is the purpose of making

legislation. And so the government is obliged to look at this bill very carefully, and expand access to safe care with an eye to good outcomes, and not only to more faster. (Applause)

I'll close with noting a few things about patient safety, which is of course what this is all about. We need to think about safety more widely, and sooner, and while we make investments be as proactive in this upstream as possible. As Dr. Grant, the Registrar and CEO of the College of Physicians and Surgeons of Nova Scotia explains so clearly: As long-standing family physicians, we worry for those without primary care. Lack of access, and lack of access to primary care, in particular, is not safe. Government, public, and all, in this room, can clearly see that.

This is why we have to thoughtfully invest in primary care while we also remove the barriers together with the experts to get more health care professionals working in Nova Scotia. We must act to protect the health care system from politics and partisan agendas. The recent move by the United Conservative Party in Alberta is a clear example of how unchecked authority can be used for self-interest rather than serving the public need. We must ensure the deregulation does not disproportionately impact those who are most vulnerable in our society, as this will only lead to further exploitation and damage.

It's essential that we maintain regulatory frameworks, which prioritizes human rights, and quality assurance, if we want to safeguard quality health care services for all Nova Scotians. This government must change its approach in order to meaningfully collaborate to create policies that result in better outcomes for everyone involved. But, unfortunately, Mr. Speaker, it seems that this government's insistent focus on more, faster, is leaving better and safer behind. (Applause)

THE SPEAKER: The honourable Leader of the Official Opposition.

HON. ZACH CHURCHILL: I'm happy to stand and speak to Bill No. 256. I'd like to thank the other members for their contribution to this debate tonight as well. I will first say, in terms of the stated intention of the bill to expand the scope of practice for various health care professionals, and certainly facilitate the recruitment of foreign-trained and Canadian-trained health care professionals into our province, certainly that is the objective that we share on this side of the House.

However, as the regulators have said, there are real issues in this bill, in particular related to public safety, that I think we do need to take very seriously, and act on. As Dr. Gus Grant, the Registrar of the College of Physicians and Surgeons of Nova Scotia said, while the College supports the stated intention of this bill to expand the scope of practice and facilitate recruitment and facilitate practice here as well, this bill creates unintended consequences particularly based around public safety, which is something that we do need to take note of.

The reason for this is because medical training and practice vary greatly around the

world according to Dr. Grant, particularly when it comes to issues such as abortion, mental health, contraception, informed consent, and medical assistance in dying. There are different medical cultures around the world, involving all of these things which are becoming so important, and have been sacred in our Nova Scotian health care system, and our Canadian health care system. And not every jurisdiction around the world has the same quality training, or the same culture, or even the same secular beliefs when it comes to the practice of medicine.

[8:45 p.m.]

What the College of Physicians and Surgeons has done is create that focus on safety, with their own regulations and approval processes. As Stacy Bryan, Registrar of the College of Dental Hygienists of Nova Scotia pointed out, as written, the bill could require regulators to license applicants from other jurisdictions who are incompetent, incapacitated, lack character or have engaged in misconduct.

That sounds like a frightening prospect here. To forego the safety mechanisms that are in place to prevent incompetent, incapacitated individuals or those who lack character or have engaged in misconduct from entering into practice in Nova Scotia should be a worrisome thing.

Ms. Bryan goes on to say that the bill will also provide provisions that remove the ability for regulators to assess whether an applicant has a disciplinary history elsewhere or would require a person to be licensed if they do not have professional liability insurance. That's a problem with the current wording of this bill, Madam Speaker. It also fundamentally changes the nature of the self-regulated medical professions here in Nova Scotia. Where the final authority has been with the Act and with the regulated bodies, this government is now taking on that final authority in Cabinet, which means that these decisions that particularly involve public safety are going to be driven more by a partisan lens than a public policy lens, or a health and safety lens, the lens that the regulated professions actually bring to the table and focus on here.

Now, there have been issues. I'll say that with our occupational licence agencies - because of course they also want to protect their members - I think there have been some issues with protection of supply, but we also can't blow the doors open on this and create a risk where we are bringing more bodies in without considering what the public safety risks are. Specifically, what those are is that the government is going to be in such a rush to recruit and license medical professionals from various medical professions that the political incentive is going to be to do it so quickly that they are really going to miss the boat on some of these safety issues and let people in who don't necessarily have the right credentials, the right character or the right training to practise here in a safe way.

We have seen this partisanship kind of creep in - more than creep in. It has taken over our health care system. A doctor said to me recently that there's no more division

between church and state in our health care system. The government has actually done this before, where they've taken over the operations of our health care system, which at one time not too long ago, before this government was elected, was run by health care professionals primarily and an independent board made up of various professionals from health care and the private sector and the not-for-profit sector. It was also very diverse. They have eliminated that board and they now have a partisan in charge of operating our health care system and making management-based decisions and operational-based decisions. We are seeing how the partisanship is actually driving some of these things and it is not resulting in better outcomes for patients or for Nova Scotians.

Since these changes have happened, we've seen the number of people who need a family doctor in Nova Scotia skyrocket. It has nearly tripled in the last two years. It has never gone up that high as quickly before. We have seen ER closures double in this province. We have seen off-load wait times double at one point. I really think part of this is because we no longer have that medical lens in the management of the system, but we have a partisan lens. We have a health care system that is being managed out of the Premier's Office.

I do want to say this, and I think it's important to put on the record. I have the utmost respect for the Minister of Health and Wellness. Her approach to her portfolio is driven by passion and a true desire to make a difference in the sector. That is shown here in this House when the minister answers questions, which most of the time are not partisan in nature. She is not the one taking the partisan swipes at previous governments most of the time. The minister takes the time to answer the questions. She knows the files, and she can present facts to this House. I have watched the minister present publicly with the health care administrator, the CEO of the Health Authority. It's very clear to me who the more partisan person is in that room in how they present facts and how they level partisan attacks on other parties or the federal government, and it's not the minister. The minister is the partisan who is elected. We have a health care administrator who is more partisan than the minister.

Now we see this partisan takeover of our regulated health care professionals, which is very problematic because it can create public safety issues. Again, right now it's very clear what the government's motivations are: more, faster - not better health care, not higher quality health care, not better protection of people but more, faster. They have stated what their objective is, and that's just to get more bodies in the system here so they have a higher count, not paying attention to what the potential unintended consequences are on the outcome side or the impact on patient care. That is, I think, why we're actually seeing patient care become worse off under this government, again, in very obvious ways.

Nearly triple the amount of people without a family doctor now. It was a crisis two years ago when we were at 60,000 patients without a family doctor. That number is now nearing 140,000, Madam Speaker. Emergency room closures have doubled. Off-load wait times for paramedics have at one point doubled in the last two years. We have also had an

increase of deaths in our hospitals - over 500 more people this year died - more than the previous year.

The government is very good at communicating on health care and bragging - I will say bragging, and I don't use that term lightly, but it's absolutely bragging - about how much money they're spending on health care. There are 6.5 billion reasons the health care system is getting better, but we have not seen a return on that investment yet. More money has gone into the health care system. They received more money from the federal government. The federal government wisely has tied that funding to outcomes, but just because you're throwing more money at a problem, we're seeing evidence of the fact that that doesn't mean it's going to get better.

This is an area where Bill No. 256 can actually further degrade the quality of our health care system. If the government is only motivated to get more doctors, nurse practitioners, and other health care professionals here to practise and cares less about their qualifications and the safety ramifications of having some of these folks practise here, we are going to see more problems show up in patient care and in our hospitals.

I also don't know that this is actually going to help with recruitment, either. Particular doctors want to work in a self-regulated profession. That's something they take pride in. They have a College of Physicians and Surgeons that holds them to a high standard. The same goes for chiropractors and dental hygienists and dentists and optometrists, pharmacists, and, of course, social workers - and the list goes on of all these folks who work in our health care system. I actually think overriding these self-regulating bodies could also create an issue for recruitment. I do not believe doctors are going to want to move into a jurisdiction where the politicians have complete control or final authority over their licensing. We're actually hearing that from them, the representatives who presented to the Law Amendments Committee and who have spoken publicly about this issue.

This bill also does nothing to deal with some of the fundamental factors that are driving general practitioners out of family medicine here. It's not necessarily a matter of recruiting more. It's about keeping people in practice who are there. We have seen family physicians stop practising at alarming rates under this government, and we know some of these factors that are driving them out. The billing regime does not take into consideration co-morbidities or complex cases. There's value in that. We want family practitioners dealing with people who are sick and who have a lot of problems. They're not paid appropriately for that. There's not pay parity amongst health care professionals. There are overhead costs associated with family medicine.

On top of that, there used to be a financial incentive to keep family practitioners practising, and this government actually cut it. Not only has government not moved in the fundamental areas where we have to if we're going to incentivize doctors to remain in family practice, they axed one of the incentives that was actually keeping a lot of doctors

there. What has happened? I have heard even the numbers in the Capital Region have gone up times six for people who need a family doctor.

We have heard three primary care practices recently say they're going to shut down because they're not getting the support that they need from the government. This bill not only, I think, will be useful in recruitment of high-quality, trained professionals - because I think there's going to be some skepticism from those folks on having a group of politicians in Cabinet have the final authority over the regulations of their profession - but this government has done nothing to actually deal with some of the fundamental factors driving doctors out of family practice. That is a problem for health.

That means people are going to get sicker in this province if they don't have access to a family physician in primary care. They're not having someone keep track of their issues. They're not having someone tell them, you have to go in for your bloodwork, you have to get your cholesterol checked, let me check your blood pressure. A lot of patients, if they're not being seen by a doctor and being prodded by their doctor, aren't going to do those things.

The other factor is that this government is doing nothing to address the root problems driving costs up in our health care system, and that is sick people. We know most of the acute cases in our hospitals are folks who don't have support in community. It's people who can't put food on their table or pay for their prescriptions and food at the same time. It's folks who are dealing with major financial constraints, who can't pay their power bills.

There's been a recent survey: 50 per cent of people who aren't taking their prescription drugs indicate they need the money to pay for food. That is a direct impact on those individual lives, first and foremost, but also on the cost of our health care system. Recognizing that the majority of our acute patients in health care are actually coming from financially stressed circumstances, we have to recognize something, that there's a root cause here.

What has happened in this budget? The government has actually frozen income assistance at a point in time when inflation is shooting through the roof. They bragged about rental supplements. They just increased the threshold for that, so now you have to be paying 50 per cent of your income on rent in order to benefit from a rental supplement. There's nothing to help people deal with food security. These are upstream factors that are creating major problems in our health care system. This government is making policy decisions that are going to make people sicker and make the situation in our health care system worse, because I fundamentally believe they are being driven by partisan motives.

Everything is, how do we win this next election? What are the headlines? How do we stop these negative headlines from happening? People said there's an issue with licensing. We have to get more doctors in quick - let's make a change. Everything is

knee-jerk because the motivation is political and partisan and not good policy. That is not the way to govern, and unintended consequences happen when you're governing in that way. We're seeing it here in Bill No. 256.

[9:00 p.m.]

Doctors themselves are saying, listen, not everybody who has been trained in other countries can practise here without further training. Not everyone should be licensed here, particularly because training is so different in some key areas that are fundamental to health care outcomes: abortion, mental health, contraception, informed consent, and medical assistance in dying. These are fundamental factors that not everybody who is trained in health care in other jurisdictions has the same culture or training on.

Again, I'll return to this. I think the intent of the bill, in terms of expanding the scope of practice, is important. I also think that we do have to open the doors up more to ensure that more well-trained professionals can get here from the various health care professions that are included in this bill, but the government is potentially opening a floodgate that is going to create major unintended consequences when it comes to patient outcomes. That means that we could have more people here who are practising in unsafe ways.

We've seen the consequences of that happen. This is also life and death for people, right? We've seen the consequences of poor care in our emergency rooms, or the wrong decision being made on the operating table. There are people who should still be alive today who aren't, Madam Speaker, because of those decisions that were made by some of our health care professionals.

When that starts to happen more because this government is not paying attention to public safety and patient safety, I certainly hope that they don't think they can stand up and blame other parties, the federal government or past governments on this. I can tell you that the federal government has said that any new money going into the system in our provinces needs to be tied to improved outcomes. They care about patient safety and public health. I'll certainly state again for the record, so does this party.

We have to start putting good policy and good decision-making - which means listening to experts, doing research, and looking at the data - ahead of what makes for good politics, and what's in the partisan interest of the Progressive Conservative government.

With those few words, Madam Speaker, I'll take my seat.

THE SPEAKER: The honourable member for Cumberland North.

ELIZABETH SMITH-MCCROSSIN: It gives me pleasure to stand this evening to speak to Bill No. 256, the Patient Access to Care Act.

The purpose of this bill is to improve patient access to care by further opening the province to out-of-province health professionals. This is a good thing. We've heard the Council of Atlantic Premiers talk about this for a number of years - particularly to opening the licences up to the Atlantic Provinces, to one another. I think many people were really pleased to see this in the bill.

The Maritimes should be working together. We're a small region. We'll be stronger if we remove the interprovincial barriers between New Brunswick, P.E.I., and Nova Scotia.

We see it particularly in Cumberland North, in Cumberland County, as we border Westmorland County in New Brunswick. We have shared health care professionals between the two counties - whether it's physicians, nurses, paramedics, respiratory technicians, and more. Right now, this particular piece of the bill of opening up licences of health care professionals to out-of-province persons will be of great benefit to the northern area of the province. It's the only area of the province that doesn't have any educational training for nurses or physicians. Because of that, we're often working short and understaffed.

The second line in the purpose of this Act, "ensuring all health professionals can work to the full extent of their training," is a very important piece. As a registered nurse, it's something that I've heard nurses talk about for a long time - that they want to be able to work to their full scope of training.

However, I believe that almost every presenter who came to Law Amendments Committee shared concerns about the fact that this bill takes away their power. This bill takes away the power of the regulators and puts the power into Cabinet. The presenters at Law Amendments Committee do not believe that Cabinet have the expertise nor the knowledge to be making decisions around safety and scope of practice.

I think most health care professionals are pleased to see, when they are permitted in their workplaces, to work to their fullest scope of practice. But we must ensure that it is always done in a safe manner.

The third purpose of this Act is "continuing the reduction of administrative burdens in health care." Certainly, a couple of months ago it was in the headlines of the news talking about the administrative burdens - particularly of paperwork - on physicians. I think it really crosses all professions. On Sunday, I had a town hall meeting on education, and the teachers who were in attendance talked about how one of their biggest burdens is paperwork. Any time we can reduce the administrative tasks on health care professionals and allow them to have more time with direct patient care, it's always a good thing.

My husband and I had the opportunity to practise in the United States. We moved to Wisconsin back in 1995. We were there for two years and got to experience the American

health care system. One of the pluses of that system was how your physicians and your frontline health care workers were not as burdened with administrative tasks. For example, insurance forms were not filled out by general practitioners or internists. They were done by other health professionals such as nurses in offices. It allowed physicians to have more direct time with their patients and less time doing paperwork.

Today, I introduced my spouse, who was here in the gallery visiting with us. He was filling out insurance forms while he was being entertained by us here in the gallery. His normal day is he gets home about 7:30 p.m. or 8:00 p.m. from his family practice, has supper, and then works until midnight on paperwork. That, I believe, is probably the practice of most family physicians here in the province of Nova Scotia - at least fee-for-service physicians. There is a ton of paperwork.

EMR - electronic medical records - it was promised that it was going to reduce the administrative tasks and the amount of paperwork for health care professionals, but I think most would agree that has yet to be seen.

The reduction of administrative burdens - I think one of the ways in this bill that we see that is the reduction of the use of sick notes. That is a good thing. I think everyone is looking to see if this bill will actually produce the results of reducing administrative burdens like it suggests.

One of the common themes that we heard in Law Amendments Committee was that this bill supercedes all the other Acts that regulate health care professionals. In this bill, it states, "In the event of a conflict between this Act and any other enactment, this Act prevails."

We have heard from many other speakers here this evening, and I believe it was Friday - I was listening from home - that there are a lot of concerns around safety. This bill is in direct conflict with safety and quality care of patients. That is directly because you have people making decisions around scope of practice for health care professionals who do not have the expertise to do so. We heard that again and again throughout Law Amendments Committee.

Another theme that we heard in Law Amendments Committee was the lack of consultation. It is quite concerning. I was quite surprised to hear that none of the regulatory bodies were consulted. It's a very significant overreach, I guess, into their work. When you look at this piece of legislation, and look through all of the different health care professionals and regulatory bodies, and think about how many health care professionals they represent - and to know that our government is presenting this bill with no consultation with them at all. We have seen this as a trend, and it is a concern. I know there are several health care professionals in government, so I am surprised that they are allowing this.

We are seeing it in health care. I know the member for Kings South shared an experience about the chapel at the hospital in the Valley - that there was no consultation. We all know that spirituality is a very important part of people's overall health. When you look at people's holistic health, our health is affected by physical, mental, emotional, and social, as well as spiritual. It is important that spiritual health is considered in health care facilities like hospitals.

We've seen it at Cumberland Regional. I spoke to the minister about this in Estimates, where an entire surgical unit was changed - modified physically - and there was no consultation with any of the surgeons. It's a large surgical department, Mr. Speaker.

We have two ENT surgeons. They are both excellent. One actually used to work in Wisconsin as well, but is a Maritimer. Then we have another one, Dr. Tim Wallace. He is literally one of the best ENT surgeons in all of Atlantic Canada, if not all of Canada. We have patients coming to Cumberland Regional to see him specifically because he is one of the best. We're so proud of the quality of the work that he does. We have Dr. Nader, Dr. Colin McWilliams, Dr. Andrea Faryniuk. The surgeries that they do and the lives they save at Cumberland Regional are just phenomenal - major surgeries saving many lives.

We need a surgical unit at Cumberland Regional. We often hear in this House - not so much these days since the tolls were removed for Nova Scotians off the Cobequid Pass. On one side of our region, we have the Cobequid Mountains, and on the other side we have the Tantramar Marsh. There are many times - whether it is high winds or snowstorms where patients literally cannot go north or south, it's very important that we have a strong surgical team in our northern area. We're very thankful that we do, in fact, have them. So we have those three general surgeons.

We have two obstetricians and gynecologists - Dr. Helen Sandland and Dr. Heather Sullivan. We have Dr. Andrew Orr, who does ophthalmology surgeries in that department as well. Then of course we have four internists who work at Cumberland Regional. They are using the surgical unit as well, doing colonoscopies and endoscopies, as well as other procedures.

All of these physicians I have mentioned, Mr. Speaker, were not consulted, even though their entire surgical department was shut down. It was moved, but it dramatically impacted their patient care. The surgical nurses also were not consulted. It's a perfect example of why consultation is needed and why it's important.

What has happened as a direct result of no consultation with our surgical team is that we lost a good number of our surgical nurses. They simply said, we are trained to be surgical nurses, and we want to work in a surgical unit. If we can no longer do that here at Cumberland Regional, then we are leaving, and we're going to work in Moncton or Truro, where we can work on a surgical unit.

The leadership, the management decisions directly harmed our hospital's ability to provide the services that our people need and deserve. Quite frankly, it was disrespectful to the surgical team.

It's hard to imagine that you would make changes involving all those highly trained professionals. All of the physicians each would have had 12 or more years of educational experience, and they weren't consulted.

I am hoping that lessons were learned and that something like this would never happen again. It is very disrespectful, but it's another example of no consultation on very significant decisions.

We can ask the question, why is consultation important? (Interruption)

THE SPEAKER: We'll take a brief recess for just a couple of minutes.

[9:15 p.m. The House recessed.]

[9:21 p.m. The House reconvened.]

THE SPEAKER: Order, please. The honourable member for Cumberland North.

ELIZABETH SMITH-MCCROSSIN: One of the doctors that I referenced is an ENT. Sometimes my larynx goes into spasm and it closes, and I couldn't breathe. Anyway, my apologies. I think the cold water triggered that. I'll get back to debating Bill No. 256.

I was speaking about lack of consultation and the fact that there was no consultation with health care professionals and regulatory bodies with this Patient Access to Care Act and talking about why consultation is needed, why it's important, if we are going to have effective policies and legislation here in the province of Nova Scotia. Consultation creates effective, safe change management. Consultation should always include the people that it affects. Consultation should include the experts. Proper consultation helps to build trust and respect.

I listened very carefully to the Law Amendments Committee when the presenters were presenting on this bill, and I noticed that all of them were very respectful. They were very careful in their communication with the Law Amendments Committee. I thought that they made a real, purposeful attempt to make it clear to government that they understood the importance of bringing more health care professionals to the province, and they understood the importance of making changes quickly. However, then they shared their concerns. They did so in a very respectful way, which told me that they want to have a good, positive relationship with this government.

There's not a doubt in my mind that the people who work for our regulatory bodies

care very deeply for the professionals that they license, and they care very deeply for the people of Nova Scotia and all those visiting Nova Scotia who access our health care services here.

One of the facts that I think all of us in this Chamber know is that we're dealing with a very negative workplace culture here in the province of Nova Scotia. Some of that has been created because of a lack of consultation, lack of respect, changes made without consideration of them.

There were a lot of safety concerns brought up. Everyone here in this Chamber knows what happened with Allison Holthoff's death at our regional hospital. As a result I put forth 16 action plan items to make improvements to address emergency health services at Cumberland Regional, in Cumberland County, in particular, but it could be for all across the province. One of those action items was addressing patient safety. I have several documents here. I'll just table them all at the end to make it a little easier for our Pages. Right now, one of the documents that I have here is "What Happens to Patient and Family Feedback?" This document outlines seven steps of what happens to patient feedback.

Every MLA in this House is likely the same as me. What happens at my office is, we receive contact from patients about maybe an incident when they felt they did not receive the best care. Sometimes there are real safety concerns, and sometimes there are big legal concerns, like in the case of Gunter Holthoff and his family. This document that says, "What Happens to Patient and Family Feedback?" - what's on this document is not what really happens. What really happens in many of the cases, at least in the experiences that my office has, is that we tell the patient and/or family member to document the incident, to send it through to patient feedback, email this document, and I often recommend to copy my office as well so that I know that you've sent it.

Most of the time, Mr. Speaker, the person never receives a response - most of the time. In a few instances, where we've taken it to a few more levels, then sometimes they'll get a response, but almost every time the incident is never followed up.

When I have asked who is addressing these, who is responding, what happens to this information, I am shared that there is a database where sometimes, if there's enough staff, the incident gets input into the database and then it's tagged. The people who should respond or are involved in the incident, they are tagged and then they are supposed to respond, but that is not happening.

Patient safety is already a concern here in this province. To hear the regulating bodies that spoke at Law Amendments Committee and to know that one of their main concerns is patient safety as a result of this Act is a huge concern to me and I believe it should be to all Nova Scotians, Mr. Speaker.

Legislative changes are needed. We need to make changes, but we need to make

sure that the changes we are introducing are the right ones and that it is going to improve safety, not create more safety concerns.

What is needed in addition to some of the things that I have brought up that were brought up in the Law Amendments Committee? What is needed is to improve workplace culture. That will increase retention, because I believe one of the reasons that the government has tabled this bill is to increase the number of health care professionals here in Nova Scotia.

We need to recruit, there's no question, but we also need to retain the health care workers we already have. I know a lot of nurses were really encouraged and other health care professionals were really encouraged with their retention bonuses, especially a relative I have who is a fairly new young nurse. She was pretty excited to get this bonus. I think it was a positive thing and we've all probably received phone calls and emails from people who felt they should be getting it who are not. It is my understanding that those issues are being addressed and people are getting some responses now, so hopefully everyone will feel it was a level and fair playing field with that retention bonus.

Improving the workplace culture to help improve retention of our current health care professionals is needed. At my town hall meeting on education one of the parents asked one of the teachers, what will help your workplace? We assume that you want more money. The teacher emphatically said no, it's not about money. She said it's about improving the workplace, feeling appreciated, and being safe.

Safety in our schools is something we didn't always hear about but it's a real thing and it's also a real issue for our nurses and for our other health care professionals - safety in their workplace. If we had nurses here, they would tell you about incident after incident where patients are not properly placed, particularly in the psych unit. During Estimates I asked the minister about acute psych beds - is there a plan to increase the number of acute care psychiatric beds here in the province and, in particular, in Cumberland Regional, in the Northern Zone, because there are simply not enough beds.

We have psychiatric patients that are admitted on acute care units, and it's not safe for our nurses. Because they're not trained psychiatric nurses, and it's not safe for them. That affects retention if nurses feel that they cannot work in a safe environment. So improving the workplace culture is critical.

Another point that I wanted to address related to this bill - one thing we haven't heard a lot about from this government is finding a place for physicians who are from Nova Scotia or the Maritimes who have studied medicine abroad. We heard a little bit about increasing a few residency seats for them, but I believe that the government has a real opportunity to make a very fast impact in the number of family physicians in particular, here in the province of Nova Scotia, if we really addressed and found a home, found a place for all of these Nova Scotians who studied abroad, who were not able to get a family

residency back here and were forced to do their family medicine residency, many in the United States, or in the U.K., and they want to come back home. They want to practise here in Nova Scotia. Many of them are studying right now in medical schools in the Caribbean or over in England or Ireland.

[9:30 p.m.]

I can't remember exactly what year - it might be 2028, 2027 - the Canadian College of Family Physicians will be increasing the family medicine residency program from two years to three. So instead of it taking two years to become a family physician, it's going to take three years after medical school, and especially during that one year, that's going to further create a shortage in our communities for family doctors.

Years ago, probably 25 years ago, maybe 35 years ago now, there used to be a rotating internship of one year. Many physicians finished their medical school and then they did a one-year rotating internship, and then they practised - they were general practitioners. And many physicians did that between 5 and 10 years, they practised as a general practitioner, and then they chose what specialty they wanted to go into, whether it was anaesthesia, general surgery, obstetrics, and then stayed in that profession for the remainder.

So there are all kinds of options and ways to work with both Dalhousie University as well as our College of Physicians and Surgeons, and the Canadian College of Family Physicians, to look for ways of increasing the family physicians here in Nova Scotia.

Another point that I wanted to bring up that's been brought up that affects the regulatory body for nurses is many nurses who left the profession - it could be for many reasons, a lot of the time it's to raise a family - and they want to be able to stay home to raise their children. To come back into the profession is very expensive and it takes a long time for the retraining, and that is an area that could be looked at where here, as a province, we could lower the fee to come back. These nurses already have the training and education. They just need a refresher. Right now, many nurses believe that the refresher, the retraining is too long and the fee to complete the course is also too high.

So those are three areas, Mr. Speaker, that we're looking at - access to care and increasing the number of health care professionals here in the province. Those are three areas that we could be looking at.

I want to refer to this document here, and it's an article, and it was written after Law Amendments Committee. I just want to highlight some of the comments from this. This is a comment from one of our friends in government from Richmond, and in Law Amendments Committee he said: "There will be robust and thoughtful regulations coming in with this act that will make sure that safety is ensured." My question is: By whom? In health care, you don't know what you don't know, and that's one of the reasons that I've spoken, and

it's in my 16-point action plan, that our CEO for Nova Scotia Health should absolutely be someone with medical expertise and medical training because in health care, you don't know what you don't know. If you don't have the knowledge, education, and expertise, and you're making decisions and you don't understand the impact of those decisions, it's very dangerous and it is a real safety concern.

My question - response - to our friend from Richmond, the PC member for Richmond is: Who is going to make these decisions that safety is ensured? My understanding, when I read the Law Amendments submission from his college, from the chiropractic college, they did not agree with this bill and had concerns.

There's another quote here. It says, "Which effectively means it's going to be up to an individual health professional to decide what their own competence is, even if that goes outside the bounds of practice for the profession . . . Respectively, that would create significant risk to safety, because we are now engaging in unregulated services. If a health practitioner is allowed to practise outside of the scope of the profession, there is no oversight, there's no ability for the regulator to ensure that those services are being provided according to the standards of practices and ethical principles."

I wanted to highlight that, Mr. Speaker - ethical principles - because a lot of the comments in Law Amendments Committee from the regulators, they were concerned that Cabinet and Governor in Council are going to be making decisions around scope of practice. It's not just standards of practice that health care professionals are responsible for, it's also ethical principles. One of my very first years practising as a nurse - this is just an example of an ethical principle that can come up - my patient was admitted with a brain tumour. She was an elderly lady, and the physician and the family decided that she was ready to die, and we were told as nurses that we were not allowed to feed her. She had a brain tumour, so some days she was not very responsive, but then other days she was completely, fully functional, walking around, conversing, and she was hungry, but there were doctor's orders that we were not allowed to give her food because she was dying. This is not ethical. It was not an ethical thing to do. As nurses, we took it to the ethics board and the doctor's orders and the family's orders were overturned because, as nurses, we felt what we were being asked to do to that poor patient was unethical.

The question that this regulating body had asked was: Who is overseeing and who is making these decisions around standards of practice and ethical principles? It's a very valid question.

Stacy Bryan, registrar for the College of Dental Hygienists of Nova Scotia, said they support the intent of the bill, and I think we heard that it was a pretty common theme throughout Law Amendments Committee, but "We are of the view that the current wording of Sections 5.1 and 5.2 of this bill will result in unintended consequences that have the potential to jeopardize public safety." Again, public safety. It was a common, common theme, and going back to my earlier comments about the concerns that I have already about

patient safety and quality of care, are real concerns, and I didn't finish my comments when I was talking about the patient feedback process, but I believe, Mr. Speaker, that we need to do a complete overhaul of quality management here in our Department of Health and Wellness, and all health care services. There needs to be significant improvement in quality management, and public safety in our health care system, and that includes reviewing how the processes are currently managed and making improvements.

Newfoundland and Labrador is very well known for having exceptional quality care. They have a commission, a committee, that does quality review, and something like that needs to happen here in Nova Scotia as well. But the fact that we already have patient safety concerns, and that we have a bill in front of us that I believe every regulator that tabled added that they are also concerned about public safety.

Stacey goes on to say, "Bill 256 does not define good standing and this term is not consistently applied across professions or jurisdictions . . . The way good standing is used in Bill 256 may result in regulators being required to license applicants who are incompetent, incapacitated, lack character or have engaged in misconduct."

Back in 2002, I opened the Amherst Family Health Clinic, and at that time, (Interruption) Excuse me, Mr. Speaker. I'm going to wrap up my comments before I can't talk again.

At that time, Mr. Speaker, we had two physicians, before I opened the clinic, that were willing to take on - we called them CAPP physicians, and they were foreign physicians who wanted to practise here in Nova Scotia, and they practised with one of our current fully-licensed physicians here in Nova Scotia. So we had two CAPP physicians who came, Dr. Julio Bobadilla and Dr. Carlos Rubio-Reyes, and they practised with my husband, Dr. McCrossin, as well Dr. Martin Clement.

Then we opened Amherst Family Health Clinic, and we went from having those four to having 11 and then 13. That was over a six- to seven-year period, and it was because we offered a clinic that was fully turnkey, offering full management services, so the doctors who came, all they had to do was practice medicine. They didn't have to worry about hiring staff, human resource management. I bought all of their equipment for them, managed all the accounting, had two registered nurses. We had massage therapy, nutrition, dietitian, naturopath. It was incredible.

Going back to the CAPP positions, Mr. Speaker, some of the physicians who came through that CAPP program were exceptional. Especially Dr. Julio Bobadilla and Dr. Carlos Beltran and Dr. Denise Pajot. They were all from Cuba. Dr. Carlos Beltran actually jumped off a ship in Halifax Harbour and came here to Halifax, and became a refugee. That's how he got here in Nova Scotia - jumped off the ship in the harbour.

Incredible, some of the foreign physicians who are practising here in Nova Scotia -

the stories of how they came to be here in our province and in our country. Some of them have gone through incredible hardships. Civil war. We have doctors in Amherst who went through civil war and unrest from Poland, El Salvador. It's incredible.

[9:45 p.m.]

Going back to this CAPP position program, these three physicians were exceptional. Dr. Rubio-Reyes stayed from the year 2000. He just retired in the Fall of last year. He had about 2,000 patients who dearly, dearly miss him. But Mr. Speaker, we also had some physicians who were not competent, and I clearly remember working with one, and I had to go to some other physicians and say, this doctor is not safe. They are mentored - every one of the CAPP physicians was mentored by one of our fully licensed physicians.

It's really important, that there are regulations put in place to protect the safety of Nova Scotians, and this CAPP did that. This CAPP ensured that when the physician came, they were mentored properly to ensure that patient care was safe. Unless you have experienced it and seen first-hand and worked with competent and non-competent practitioners, you probably can't fully grasp the importance of what the people expressed when they came to the Law Amendments Committee.

I do hope that the minister and the government will consider not just the words that I have shared here today, but also the professionals who came to the Law Amendments Committee and respect the time and effort they took, and consider the importance of consultation, and the long impact that has on workplace culture. That is what we need to improve retention here with our health care professionals in this province.

THE SPEAKER: The honourable member for Hammonds Plains-Lucasville.

HON. BEN JESSOME: I drew the short straw for the late shift here, so I know everybody will bear with me and give me their undivided attention.

I had an opportunity to sit through the Law Amendments Committee the other day with my friend and colleague the member for Bedford South. After hearing the comments from the minister at the Law Amendments Committee as kind of a precursor and an introduction to what we might hear a response to, I did want to share a few thoughts, some of which perhaps have been shared tonight and may be reiterated over the coming hours of debate.

The primary thing that stands out to me here, and the minister brought it up in her initial remarks, was the fact that the government did not consult on this initiative. These are not our words. These are not hypotheticals. These are the minister's own words in her opening remarks to introduce this bill at second reading.

Just as a general scenario over a few years of being in this House, any time - no

matter now grand or how minor the bill or the initiative is from the government - when there is a lack of consultation that is involved, or if consultation is not involved in the initiative, it certainly generates a great deal of criticism and opposition, disputing the efficacy of what is being presented by the government.

It strikes me as immediately strange that the minister and the government would be so bold in just putting it out there as part of what, by all accounts, can be a fairly integral piece of legislation in terms of moving the health care system forward. It just seems strange to me that we wouldn't take that basic move to consult with the health care professionals out there, the regulators out there, who ensure that our health care system is made up of more competent, capable, thoughtful, intelligent people who can help us drive outcomes in a positive direction. It just seems strange, and for me it begs the question when we experience what we experienced at Law Amendments yesterday - we've got these health care professionals and representatives, lawyers representing regulatory bodies, and multiple regulatory bodies who are coming to the table to try to add value to the cause that they were not previously afforded the opportunity to add value to. As has been said tonight, I think we're all trying to move in the same direction on this.

It's been said explicitly or in a roundabout way, but all of the presenters, at least to my recollection, were supportive of the intent of this bill - but - were very thankful that the government is taking on this initiative - but - it begs the question, if the intent was to move on this in a very intentional way to address some of the systemic challenges around scope of practice and bringing in additional professionals to help support the health care system here in Nova Scotia and to make it less cumbersome for patients and physicians with respect to the elimination of doctor notes requirements, or the changing to doctor notes requirements.

We want to try to bring as many people under the hood as possible, particularly, as I said, if we're all driving in the same direction. I see no reason why this couldn't be an opportunity for ourselves as a Legislature and government, as the crusaders of health care to get a win here. We had so many people show up who really could lend a constructive voice. I speak to many of these things humbly, and I rely on the experiences and testimonial that I hear from people who are closer to the professions that we make rules and laws around, and I think that it's an inherently important thing for us to do to - most of us, I should say - approach these bills and these debates and the conventions where you're listening to the experts humbly, and appreciate that we don't always know what is best.

We don't always have a great deal of familiarity with the issue at hand, and we might not be the people who are most suitable to initiate and drive and make some of the changes, but what we can do, and what any good organization has the ability to do or the option to do, the choice to accomplish, is to approach a situation like this with humility and take the advice of those we can rely on, the professionals who we can trust, and take what they're saying to make what we're doing in the House much better.

We have in our ranks - and I'm grateful for this - because in some cases there have been opportunities for some of the people around the room who are also regulated health care professionals to participate in this particular debate, and we have heard from some of them to date. I hope that perhaps we will get a chance to hear from them over the next hours of debate.

I do appreciate some feedback and I say that genuinely, knowing that perhaps it doesn't feel like it's - perhaps we are not inspiring enough on this side of the House to provoke a response but I know that I sat at Law Amendments with a couple of members, in particular the member for Richmond, who was complimentary to one of our guests and who said that they would certainly bring this forward. He used the words "certainly bring this forward" to report back to his team. He thanked the person for the remarks and that's perhaps where it got left.

Hopefully we will hear from - you know, I think we've got - just looking around the room here - one, two, three or four anyway in here, and I do appreciate that feedback because perhaps there are things that we have yet to cover in our remarks - the minister's opening remarks - and responses to the suggestions that were made at the Law Amendments Committee that we'll hear. We will get some insight from some of these regulated health care professionals that we have in our ranks as to why we may not be considering these pieces - these suggestions for this particular piece of legislation because - I think, fundamentally, the concerns were deeply rooted in a concern about public safety and I know that whether you are a health care provider or you have worked in the system on the ground, whether you find yourself in that category or not is not necessarily paramount.

It does give you a stronger ability to know that space and I accept that, but with respect to doing things that are about enhancing public safety, something as particularly important as improving the health care system, I know that we are all here for that reason. That's why we get elected. We do things that make every inch of government, every service that government provides, every program that we offer, we make an effort to do things that are in the best interests of our constituents who elected us and to do things that will leave a lasting change that will impact not only the people around us today but will also impact people in the future. It is our responsibility to make sure that we have these types of meaningful debate and spend the right time and engage, which, frankly, I don't believe we have in a meaningful way.

We talk about the purpose of the Law Amendments Committee. My colleague from Dartmouth referenced it as essential but evidently it's not feeling very essential right now. We just listened to so many different health care professionals - the experts - provide their testimony and it fell on deaf ears.

THE SPEAKER: Order, please. The time allotted for Business of the Day has expired.

The House now stands adjourned until tomorrow, Wednesday, April 5th between the hours of 1:00 p.m. and 11:00 p.m.

[The House rose at 10:00 p.m.]