



Province of Newfoundland and Labrador

FIFTIETH GENERAL ASSEMBLY  
OF  
NEWFOUNDLAND AND LABRADOR

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Volume L

SECOND SESSION

Number 75

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HANSARD

*Speaker: Honourable Derek Bennett, MHA*

Wednesday

May 15, 2024

The House met at 10 a.m.

**SPEAKER (Bennett):** Order, please!

Admit strangers.

### Government Business

**SPEAKER:** The hon. the Government House Leader.

**J. HOGAN:** Thank you, Speaker.

I call from the Order Paper, Order 5.

**SPEAKER:** The hon. the Government House Leader.

**J. HOGAN:** I move, seconded by the Deputy Premier, that this House resolve itself into a Committee of the Whole to consider an Act to Amend the Income Tax Act, 2000, Bill 35.

**SPEAKER:** It is moved and second that I do now leave the Chair for the House to resolve itself into a Committee of the Whole to consider Bill 35.

Is it the pleasure of the House to adopt the motion?

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**SPEAKER:** All those against, 'nay.'

Motion carried.

On motion, that the House resolve itself into a Committee of the Whole, the Speaker left the Chair.

### Committee of the Whole

**CHAIR (Gambin-Walsh):** Order, please!

We're now considering Bill 35, An Act to Amend the Income Tax Act, 2000.

A bill, "An Act to Amend the Income Tax Act, 2000." (Bill 35)

**CLERK (Hawley George):** Clause 1.

**CHAIR:** Shall clause 1 carry?

The hon. the Member for Stephenville - Port au Port.

**T. WAKEHAM:** Thank you, Chair.

I just have a few questions on the bill. Obviously, those of us in the PC Party and on this side of the House are fully supportive of this bill because it, again, puts more money back into businesses and that's what we like to see. Let's get the money circulating. We will support the bill.

A couple of things I just want to put on the record for the minister that we learned in the briefing, just to have them on the public record.

The first question is that the bill is retroactive to January 1, 2024, is that correct?

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** That is correct. It's retroactive to January 1, 2024. As you can see in clause 2, there is an amendment to make it retroactive to January 1, 2024. That's the effective date of the rate reduction.

**CHAIR:** The hon. the Member for Stephenville - Port au Port.

**T. WAKEHAM:** Thank you.

The second thing is the companies that actually qualify for this have over \$500,000 of business income. Is that correct?

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** That is correct, yes.

It's not the qualification of it, that's the threshold for the tax.

**CHAIR:** The hon. the Member for Stephenville - Port au Port.

**T. WAKEHAM:** Thank you.

Again, Minister, we were told that this potentially will affect over 6,200 companies in our province. Is that correct?

**S. COADY:** Yes, that is –

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

Excuse me, Hansard needs me to identify the speakers, so that's why I'm just not letting you flow this morning. Sorry about that.

The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** Thank you very much.

It's always good to have a good discussion and debate so I appreciate the Member wanting to do that.

Yes, this is affecting 6,200 businesses and as the Member opposite knows, in the last number of years, we've really focused in our budget of lowering taxes and lowering thresholds and lowering the impact to businesses. We want to put more money back in the pockets of people in this province.

This is in addition to, you'll note, last year, we raised the threshold on HAPSET, for example, raising it from \$1.3 million to \$2 million really helped thousands of businesses and saved money in this province. That was effective January 1, 2023.

We've introduced an All-Spend Film and Video Production Tax Credit. We've introduced a 10 per cent Manufacturing and

Processing Investment Tax Credit. We've introduced a 20 per cent Green Technology Tax Credit.

So to the Member's point, we're very focused on making sure we're lowering taxes and tax burden because we think that helps to grow our economy. It helps to employ people. All that's evidenced by the strong economy that we have in the province and the low unemployment rate.

**CHAIR:** The hon. the Member for Stephenville - Port au Port.

**T. WAKEHAM:** Thank you.

I won't get into a debate with the minister this morning on the taxes but there are certainly taxes in this province which we think could be lowered that would put more money back in people's pockets.

I ask the minister: Is there a regional breakdown of where these 6,200 companies are located in terms of the entire province, in terms of targeted areas or where they might be located?

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** Thank you.

It's an estimate that it would be 6,200 based on the tax provisions last year. I can ask my team to see if there's a regional breakdown based on last year's data. It's not a targeted tax reduction. It is a small business tax reduction, which we think applies everywhere in the province. But I'll ask if we can see, you know, what regions will be most beneficial. I would imagine it breaks down as per demographics.

**CHAIR:** The hon. the Member for Stephenville - Port au Port.

**T. WAKEHAM:** Thank you.

Does the minister have any idea of exactly what the average tax savings will be for these companies?

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** I'll certainly ask my team. It is based on 6,200. But allow me to say this is costing approximately \$5 million, so quick math will tell you what it would be on average, but I'll ask my team if there's something more specific that they have.

**CHAIR:** The hon. the Member for Stephenville - Port au Port.

**T. WAKEHAM:** Yeah, based on that, Minister, that would average out around \$800 a business.

What is the current tax rate?

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** Thank you very much.

Currently, it's 3 per cent. It will decline to 2.5 per cent.

**CHAIR:** The hon. the Member for Stephenville - Port au Port.

**T. WAKEHAM:** That's all the questions I have.

Thank you.

**CHAIR:** Any further questions?

The hon. the Member for Labrador West.

**J. BROWN:** Thank you, Chair.

So, right now, how many people that are currently claiming the small business tax are just self-incorporated without any employees? How many people are currently doing that with, like, a single-director or

single-person company? How many people are collecting right now?

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** I'll certainly ask my team if they can get that information for you.

**CHAIR:** The hon. the Member for Labrador West.

**J. BROWN:** Thank you so much.

Did the department do any analysis on the amount of jobs that will be created from this move or how much money can possibly be reinvested into companies by their owners by going with this? What kind of analysis was done on this before it was implemented?

**CHAIR:** The hon. the Minister of Finance and President of Treasury Board.

**S. COADY:** Thank you, I appreciate the question.

What kind of analysis was done was, first of all, we always look at a jurisdictional review to ensure that we're competitive. We also considered the impacts to both Treasury, as well as to the businesses. As I've just said in a previous question, it's approximately a \$5-million impact to Treasury. So that \$5 million will go back to those businesses and, hopefully, help them to either remain profitable, to be profitable and to employ more Newfoundlanders and Labradorians all around the Province of Newfoundland and Labrador. So those would be the two main indicators.

Thirdly, of course, we're really focused on being competitive in Newfoundland and Labrador. That's why we've had – as I've indicated to a previous question – a myriad of things over the last number of years that we've done. Very specific things around the Manufacturing and Processing Investment Tax Credit, the Green Technology Tax

Credit, the All-Spend Film and Video Production Tax Credit to really help drive both manufacturing, drive investments in green technology, drive investments in the film and video production.

You've seen us go in the last couple of years and raise the threshold on HAPSET, which is the Health and Post-Secondary Education Tax, that applies to businesses in the province based on their payroll and now lowering this small business.

So, again, that competitiveness, helping to drive the economy. Our economy, we're going to have one of the highest growths in the country of gross domestic product this year, over 5 per cent. We want a diversified economy, we want a strong and growing economy, we want higher employment, and all of what we're doing is part of a plan that we've been working to ensure that happens. And you're seeing results.

**CHAIR:** No further questions?

Seeing no further questions, shall the motion carry?

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**CHAIR:** All those against, 'nay.'

Motion carried.

**CLERK:** Clause 2.

**SPEAKER:** Shall clause 2 carry?

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**CHAIR:** All those against, 'nay.'

Carried.

On motion, clause 2 carried.

**CLERK:** Be it enacted by the Lieutenant Governor and House of Assembly in Legislative Session convened, as follows.

**CHAIR:** Shall the enacting clause carry?

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**CHAIR:** All those against, 'nay.'

Carried.

On motion, enacting clause carried.

**CLERK:** A bill, An Act to Amend the Income Tax Act, 2000. (Bill 35)

**CHAIR:** Shall the title carry?

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**CHAIR:** All those against, 'nay.'

Carried.

On motion, title carried.

**CHAIR:** Shall I report the bill without amendment?

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**CHAIR:** All those against, 'nay.'

Carried.

On motion, that the Committee report having passed the bill without amendment, carried.

**CHAIR:** The hon. the Government House Leader.

**J. HOGAN:** Thank you, Chair.

I move that the Committee rise and report Bill 35 carried without amendment.

**CHAIR:** The motion is that the Committee rise and report Bill 35 carried without amendment.

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**CHAIR:** All those against, 'nay.'

Carried.

On motion, that the Committee rise, report progress and ask leave to sit again, the Speaker returned to the Chair.

**SPEAKER (Bennett):** Order, please!

The hon. the Member for Placentia - St. Mary's and Chair of the Committee of the Whole.

**S. GAMBIN-WALSH:** Speaker, the Committee of the Whole has considered the matters to them referred and have directed me to report Bill 35, *An Act to Amend the Income Tax Act, 2000*, carried without amendment.

**SPEAKER:** The Chair of the Committee of the Whole reports that the Committee has considered matters to them referred and have directed her to report Bill 35 carried without amendment.

When shall the report be received?

**J. HOGAN:** Now.

**SPEAKER:** Now.

When shall the bill be read a third time?

**J. HOGAN:** Tomorrow.

**SPEAKER:** Tomorrow.

On motion, report received and adopted. Bill ordered read a third time on tomorrow.

**SPEAKER:** The hon. the Government House Leader.

**J. HOGAN:** Speaker, I move, seconded by the Deputy Premier, that this House do now stand in recess.

**SPEAKER:** This House do stand recessed until 2 p.m. this afternoon.

### Recess

The House resumed at 2 p.m.

**SPEAKER (Bennett):** Order, please!

Admit strangers.

### Statements by Members

**SPEAKER:** Today we'll hear statements by the hon. Members for the Districts of Conception Bay South, Exploits, Ferryland, Fogo Island - Cape Freels and Grand Falls-Windsor - Buchans.

The hon. the Member for Conception Bay South.

**B. PETTEN:** Thank you, Speaker.

Speaker, I rise today to acknowledge a special little boy who lost his life at the tender age of six on July 17, 2022. Sammy Porter is remembered with his infectious laugh, unique personality, a natural athlete who loved climbing trees.

In honour of Sam, his family created Sammy's Climb Higher Foundation, which is a not-for-profit and dedicated to help children participate in sport or activity and help with recreational equipment upgrades in our community.

Sammy always questioned why some children were unable to play sports. In his own words: "That's not fair." As much as

Sammy loved climbing, his desire to help others climb and be included was even bigger.

Street hockey was a true passion for Sam and in honour of his memory, SAM'S JAM 2nd Memorial Street Hockey Tournament will be held July 6-7 at Admiral's Academy school in CBS. The youth tournament will host male, female and inclusive divisions of all skills and abilities. All proceeds from this tournament will go to Sammy's Climb Higher Foundation.

Congratulations to the families, organizing committee and the community as a whole. I applaud them for their ongoing efforts in assisting families in Sam's memory. Best wishes to make SAM'S JAM 2024 an even bigger success.

Thank you.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Exploits.

**P. FORSEY:** Speaker, today I would like to acknowledge Mrs. Elsie Keats of Phillips Head. Since 2006, Elsie has held multiple positions on council in her community. She also serves with the Ladies Auxiliary providing assistance to the local fire department.

During her time on council, she has been instrumental in acquiring funding through grants and programs to enhance her community. One of the well-known projects was to enhance the gun battery in the town.

In her spare time, Elsie finds ways to help others in the town in various ways, especially finding supports to assist in their needs.

Speaker, I would like for all Members to join me in acknowledging Mrs. Elsie Keats of Phillips Head and to thank her for her service.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Ferryland.

**L. O'DRISCOLL:** Thank you, Speaker.

I rise in this hon. House today to recognize the Town of Renew-Cappahayden. In recognition of Earth Day 2024, the Town of Renew-Cappahayden organized a community cleanup from Monday, April 22, to Saturday, April 27, 2024.

Throughout the week, individuals of all ages came together, resulting in a highly successful endeavour. Volunteers dedicatedly addressed the roadside ditches within their communities of Renew and Cappahayden and the roadside ditches along Route 10 that runs through their town, in addition to the parks, beaches and trails.

The event left a lasting impact on all volunteers, community members and especially our environment and now will become a regular event in the town.

As a town situated along the scenic Irish Loop, the group hopes that their community cleanup will raise awareness regarding the severity of littering and to serve as an inspiration and challenge for other communities to participate in creating their own cleanup.

Please join me in congratulating the Town of Renew-Cappahayden in taking pride in their beautiful towns and working together to make a collective difference.

Thank you.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Fogo Island - Cape Freels.

**J. MCKENNA:** Speaker, I am overwhelmed and excited about my first public event as MHA for Fogo Island - Cape Freels.

**SOME HON. MEMBERS:** Hear, hear!

**J. MCKENNA:** On Saturday, May 4, 2024, I attended my first public gathering as MHA for the District of Fogo Island - Cape Freels.

I was honoured to be invited to the Gander Bay volunteer firemen's ball. My wife and I were greeted to a very warm welcome, as well as a very delicious hot meal. I was very happy to be able to chat with the 20 firemen and 26 firettes, as well as other invited guests. I was asked to speak to the public gathering and bring greetings as MHA to this celebration.

I was approached by fire chief, Shawn Bauld, to help with the presentation of awards to a number of firemen and firettes – a very exciting experience indeed. I was touched by the fire chief when he presented the fire helmet of veteran Bernard Fancey to his wife, son and daughter. Bernard, who passed away a few months ago, was a 31-year veteran of the Gander Bay Fire Department. I had the pleasure to meet the family and share in their grief.

I look forward to many more public gatherings in my district, and I want to say congratulations to the Gander Bay Fire Department.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Grand Falls-Windsor - Buchans.

**C. TIBBS:** Thank you very much, Speaker.

Declan Christian Tibbs was born on January 25, 2005, the day my life changed forever.

Starting dance at the age of six, Declan had the courage to stand on his own convictions. He was unapologetically himself. Over the past 12 years, my son has won numerous awards for both dance and choreography on national stages. Performing for thousands here at home and abroad such as Disney and New York City,

Declan has been an inspiration to dancers for years.

Over the past few years, he's taught dance in Grand Falls-Windsor, performed with two different dance schools and has toured the Island with *The Nutcracker*. After a lifetime in the arts and giving back to his community, the page is about to turn as Declan leaves for Winter Garden, Florida on June 17 to attend Valencia College for dance.

In a world so big, with life being such a short experience, I've always encouraged my son to do it all, do everything you can, experience everything.

To the little boy who became the man I am proud to call my son, life isn't about waiting for the storm to pass, it's learning to dance in the rain. Dance my boy, dance!

Thank you, Speaker.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** Statements by ministers.

### Statements by Ministers

**SPEAKER:** The hon. the Minister of Digital Government and Service NL.

**S. STOODLEY:** Thank you, Speaker.

Speaker, today I have exciting news about the work our government is doing to modernize online service delivery.

Recently MyGovNL reached a significant milestone, surpassing one million online motor vehicle registration renewals since launching in 2019.

**SOME HON. MEMBERS:** Hear, hear!

**S. STOODLEY:** Thank you.

During that time, more than 195,000 driver's licence renewals and 84,000 driver exams

have been completed through MyGovNL, and nearly 45,000 driving records have been issued through this online service.

In addition to Motor Registration Division services, residents have also renewed more than 209,000 MCP cards and received more than 61,000 domestic wood-cutting permits.

As of this week, there are some 350,000 registered users of MyGovNL, showing that residents have embraced our efficient approach to providing government services.

And those who prefer in-person services can still visit Government Service Centres throughout the province.

Speaker, this is possible because we have talented and dedicated staff at the Office of the Chief Information Officer leading this important work with those in my department and those throughout government.

I want to thank them for their service to the people of Newfoundland and Labrador and I look forward to sharing their next achievement – the personal health records have been developed in collaboration with the NL Health Services.

Thank you, Speaker.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Ferryland.

**L. O'DRISCOLL:** Thank you, Speaker, and I thank the minister for an advance copy of her statement.

The PC caucus would like to recognize the dedicated staff within the Service NL department for the valuable service they provide, whether it be in person, over the phone or online.

Service NL allows residents of Newfoundland and Labrador to access various government licence renewals, forms

and services. The convenience and efficiency of these online services are undoubtedly beneficial to many residents of Newfoundland and Labrador.

However, while online service delivery is important and the way of the future, it is crucial that the government not underestimate the continued need for in-person government services offices throughout the province, as it is an essential service.

It is important to remember that the Internet access is still an issue for many parts of our province, especially rural and remote areas. Furthermore, it is imperative that government consult with the community groups and organizations that advocate for persons with disabilities to ensure that online and in-person services are accessible to everyone without barriers.

Again, thank you to all the Service NL staff for your work, and thank you to continue that.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Third Party.

**J. DINN:** Thank you, Speaker.

I thank the minister for an advance copy of the statement.

While online services are often convenient, the question would be asked: Convenient for whom? Similar to self-checkouts, I guess. For some, they are a frustrating obstacle, especially in a province where Internet connectivity can be unreliable. Our office has received multiple calls from stressed seniors who had difficulty navigating the online portal and receiving service.

We, therefore, call upon government to ensure that in-person services remain well staffed and properly funded.

Thank you.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** Are there any further statements by ministers?

Oral Questions.

### Oral Questions

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Thank you, Speaker.

Speaker, today our Question Period is focused on persons with disabilities, as they are important members of our society. Those with disabilities are twice as likely to be in poverty as their counterparts in Canada.

I ask the Premier: Are you aware of what the rate of poverty is across Canada for those living alone with a disability?

**SPEAKER:** The hon. the Premier.

**A. FUREY:** Thank you, Mr. Speaker.

Of course, we're aware that disabled people suffer poverty at a higher rate. We take it very seriously on this side of the House. We were disappointed in the federal government's initiative, and I can assure you the government is working hard towards a targeted basic income for those with disabilities, and it will be released in short order.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Speaker, the answer is 50 per cent. Fifty per cent of those living alone with a disability are in poverty nationally. It is estimated that approximately 30 per cent

of Newfoundlanders and Labradorians experience some form of disability.

I ask: Why is there nothing in the announced poverty reduction strategy to target this vulnerable group?

**SPEAKER:** The hon. the Premier.

**A. FUREY:** Thank you, Mr. Speaker.

Of course, we recognize the burden of poverty and the economic strains on those with disabilities, Mr. Speaker. That's why we carved it out separately. We wanted to do something more advanced, something that I think would lead the country, Mr. Speaker, with respect to a targeted basic income for those with disabilities.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Speaker, the best way to get out of poverty is to have a job. So while the Trudeau-Furey Liberals bicker and point fingers about who's to blame for the \$17-million cut, the people who depend on these programs and access the supported employment and other government-sponsored programs are worried about their jobs.

I ask the Premier: Will you commit to funding this important program to keep these people employed?

**SPEAKER:** The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** Mr. Speaker, we are not defeatists. We are challenging the federal government and we are joined by a coalition of 10 provinces and three territories who are unanimously standing up to challenge the federal government.

The federal minister of Employment said to all of us, as labour market ministers, just

this past Friday, that he agreed the federal budget was flawed. He said to each and every one of us that it should never have reduced the top-up of the labour market transfer agreement and he challenged us to continue on the fight.

Well, Mr. Speaker, he has no trouble in getting our positive assertion on that regard. We will not accept defeat; we will challenge this federal government and overturn this unfair, ridiculous decision by the federal government.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Speaker, again, it is not about that; it is about show me the money. This government has money available to it. They put money in a Future Fund. Well, right now the people I'm talking about, the future is now. It is their future right now.

I am simply asking the government: Will you put money in your budget to ensure these programs continue?

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** I want to thank the hon. Member for giving me this opportunity to say out loud all of the work we have done. Not only have we put money on the table, we've extended core funding to each and every one of these organizations for six months, so that we can work through this mess together.

But what we're also doing, we're not accepting defeat. What is absolutely important is that the federal government not be left unchallenged in this unfair and ridiculous action. What the hon. Member is doing, which he may not realize he's doing, he's actually affording the federal

government a way out. We ask him: Join with us and join with this coalition to get the money back.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Speaker, what I am not doing is simply standing up and bickering with a federal government. I'm standing up for the people that are impacted by these programs.

**SOME HON. MEMBERS:** Hear, hear!

**T. WAKEHAM:** Their government knew that this program was coming to an end. They should have known it was coming to an end. They should have included it in the budget. They failed to do so.

So I simply ask: Will you ensure the people of the province that depend on these programs, that their government will be there for them?

**SPEAKER:** The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** Despite the high-volume rhetoric for the hon. Member, the federal government actually issued an edict, sent information to each and every province of Canada –

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

I heard the question quite clear.

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

I want to hear the response.

The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** Thank you very much. Mr. Speaker,

The federal government sent information to every province in Canada dated early April, saying that this money was still potentially in the budget. So I want to distance that statement from the hon. Member because it's not part of the truth. He knows that, we all know that and the 13 provinces and territories know that.

That's why, Mr. Speaker, there is a coalition of Liberals, NDP, Conservatives and even members of the Saskatchewan Party that are fighting these cuts. Why doesn't he join in?

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Speaker, the rhetoric – they can spend \$22 million on a hotel without going to tender, with nobody in it, but they can't find money to support the people that really need it.

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

**T. WAKEHAM:** That's the problem we have. They simply want to stand up there and talk about it. Let's actually do something about it.

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

**T. WAKEHAM:** Hearing aids are a lifeline for many individuals with deafness. The cost of servicing hearing aids is extremely prohibitive. Those with cochlear implants face extreme costs for their maintenance, of which little is covered in this province.

I ask the question: Why?

**SPEAKER:** The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** If I could respond to the preamble of the question, what the hon. Member is saying is that he is asking us to take \$22 million –

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** Mr. Speaker, what the hon. Member is suggesting is he is in favour of taking \$22 million away from homes and the homeless to be able to give to another cause. He needs to enunciate. He needs to say out and say out loud exactly why it is that he is a proponent to cuts.

We are supporting those who are challenged with employment, those who are challenged with housing, those who are challenged and are most vulnerable in our society. That's who we stand behind. He stands by pure politics.

**SOME HON. MEMBERS:** Hear, hear!

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** I would have preferred an answer to the question rather than the rhetoric, so let me ask a question in a different way.

Individuals in need of repairs are looking to get back to their normal lives. Speaker, a teacher struggling to work, such a person just shelled out \$10,000 to replace the processor in their cochlear implant.

I ask the minister: How can most people afford such an expense?

**SPEAKER:** The hon. the Premier.

**A. FUREY:** Thank you, Mr. Speaker.

Of course, the expense of these implants is quite excessive and –

**AN HON. MEMBER:** It's an operational question.

**A. FUREY:** It's not an operational question, it's a policy question and it's one that this government will take seriously and work with those patients to ensure that they can recover those costs.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Thank you, Speaker.

Since the announcement of the federal disability benefit of \$2,400 annually, those who are eligible to receive it have been asking whether or not their provincial support will be clawed back by the provincial government.

I ask the Minister of CSSD: Will those people who receive \$200 a month continue to do so?

**SPEAKER:** The hon. the Minister of Children, Seniors and Social Development.

**P. PIKE:** With the recent announcement, our department is looking forward to further details on that.

As you know, and understand, that doesn't come into effect until June of 2025. So, right now, we are supportive of any action taken by the federal government to improve the lives of Newfoundlanders and Labradorians and also to provide financial benefits for those working-age persons with disabilities.

But this government will make sure that we maximize the financial benefits for all the people that qualify for this particular initiative by the government. We'll have more information when we get more information, but like I say, we're still under review with it.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Opposition House Leader.

**B. PETTEN:** Thank you, Speaker.

I think the minister should speak from his heart, not from his notes. He'd provide a much better answer, I'm sure he would. I have every faith he would, actually.

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

The hon. the Opposition House Leader.

**B. PETTEN:** Thank you, Speaker.

This crowd really knows how to read the room.

Speaker, those with deafness experience unique communication challenges in all aspects of their lives, particularly in accessing health care.

How many interpreters are available in our health care system today?

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Mr. Speaker, I'm not sure of that number as I stand and provide the answer today, but I can have the answer for the Member before the end of the day.

This government shares in the concern of individuals in our hard of hearing and deaf community as well, Mr. Speaker. I know that we've had discussions with our provincial

health authority on this very topic on ensuring that individuals can have access to health care services. There are interpretation services available. If an individual presents at an emergency department, for example, there is also the ability – we know that the health care authority, even in clinics where it is not readily available now, are looking at putting equipment in place to allow for a proper communication between an individual and the health care provider.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Opposition House Leader.

**B. PETTEN:** Thank you, Speaker.

As May is the national Speech & Hearing Month, I figured the minister might be up to date on some of the data.

We have been informed that we have only six. Our counterparts in Nova Scotia have nearly four times that number. Deaf and hard of hearing individuals in palliative care, emergency or any other setting without proper interpretation experience significant hardships.

Minister, why are we so far behind our Atlantic counterparts?

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Thank you, Mr. Speaker.

Part of the reason, I guess, for the increased number in Nova Scotia is they have almost double our population. Having said that, Mr. Speaker, that's no excuse for not having sufficient services in this province. I know, as I've said in my previous answer, that we've been speaking with the health authority. The health authority is engaged on this issue. The health authority is looking at translation services.

They are available, Mr. Speaker, if an individual presents for emergency care or at one of our hospitals. But they're also looking at the equipment to better enable individuals that are hard of hearing or deaf to have proper health care services when they present.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Opposition House Leader.

**B. PETTEN:** Thank you, Speaker.

I remind the minister, Nova Scotia has four times as many, not twice as many. So we're still far behind.

**SOME HON. MEMBERS:** Hear, hear!

**B. PETTEN:** Speaker, we are hearing that many patients without a family doctor must rely on a nurse practitioner to complete their disability tax credit forms.

Why is the Furey Liberal government not allowing these independent community practitioners to bill government, instead of passing on the cost directly to patients?

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Mr. Speaker, the Health Accord went through a two-year process of consultation by hundreds of health care providers, stakeholders, individuals with a great deal of information and a great deal of knowledge and background.

The Health Accord, Mr. Speaker, outlines a way forward in a team-based approach to primary health care in this province. We are focused on that team-based approach with Family Care Teams throughout the province, a hub-and-spoke model, Mr. Speaker, where even in our rural communities, individuals can have access to a nurse practitioner-led clinic.

Mr. Speaker, we continue to focus on providing that service throughout the province where our health care providers are public servants.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Opposition House Leader.

**B. PETTEN:** It's not about public servants, as the minister is saying. We're talking about it's not fair if people have to go and pay out of pocket to a nurse practitioner to get something that government should be paying for. It's unfair. People can't afford it and we spoke about it all week and we'll continue to advocate for those.

**SOME HON. MEMBERS:** Hear, hear!

**B. PETTEN:** The Citizens' Representative stated: Caregivers, people caring for family members with disabilities and other complex challenges in their own homes, are burnt out and financially struggling, and respite care should be based on needs of a child, not family income.

When will we see action on this recommendation to help struggling families?

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Thank you, Mr. Speaker.

I thank the Member for his question because it is an important question. It's an important question for those who are going through those challenges.

There were recommendations by the Citizens' Representative, Mr. Speaker. We've also spoken with others within the health authority and currently, as we speak, there is a process where all departments, the silos between departments are being taken down where services are more fluid, are more readily available, additional services put in place under our child and

health care model, Mr. Speaker. The name of that program is CAYAC. I forget the exact acronym, but it is CAYAC, Mr. Speaker. That will provide additional services and answer some of the questions and concerns raised by the Citizens' Representative.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Harbour Main.

**H. CONWAY OTTENHEIMER:** The wait time for children is 18 to 24 months to get an assessment for autism in this province in the public system. Diagnosis is a crucial step in providing supports for children as early as possible. Many families are forced to seek other ways to get a child assessed, which is a huge financial barrier to many.

Minister, families seeking care for their children face an exorbitant wait time or an exorbitant fee. How is this acceptable?

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Thank you, Mr. Speaker.

In my previous answer, I talked about the child care model that is being put in place to improve services such as the service mentioned by the individual, the Member opposite. We want to improve the wait times, the assessment times. Early assessment, early intervention provides better outcomes lifelong for these individuals, Mr. Speaker.

I met with the Autism Society, in fact, just last week. We had talked about some of these very issues, Mr. Speaker, and how we can improve services. They will be greatly improved under the new model that is being put in place.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Harbour Main.

**H. CONWAY OTTENHEIMER:** Speaker, if that's not bad enough, adults above the age of 18 have a wait time for assessment beyond five years. This is disturbing.

I ask the minister: How many clinicians in the public system are doing adult diagnosis?

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Mr. Speaker, the number of health care professionals can change on a day-by-day basis. I was asked earlier today how many were providing a particular service – this Member, how many are providing a particular service. Mr. Speaker, I would be happy to contact the provincial health authority each and every day, if they want to ask these questions, and get them the answer.

I can't answer the exact number as we speak, at this very moment, Mr. Speaker, because it does change on a day-by-day basis.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Harbour Main.

**H. CONWAY OTTENHEIMER:** Speaker, that's not good enough. The minister should know these figures and this data. He is the Minister of Health after all.

Speaker, mandate letters for two previous ministers of CSSD directed the establishment of an advocate for persons with disabilities. It's been almost four years that have passed and all people hear are words, words without action.

When will this advocate finally be in place?

**SPEAKER:** The hon. the Minister of Justice and Public Safety.

**J. HOGAN:** Thank you, Speaker.

As Members in the House know, there was a report done on statutory Officers and we're certainly looking at that as the best way to have any advocates, including the advocates that already exist: the Seniors' Advocate and the Child and Youth Advocate. As we do that review, we'll certainly continue to look at other advocates as well, such as the disability advocate that the Member opposite mentioned.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Harbour Main.

**H. CONWAY OTTENHEIMER:** Speaker, again, four years later, no answers, no action. We know the incredible work and vital role that other advocates play in this province that represent the interests of vulnerable people.

Persons, though, with disabilities are severely disadvantaged in the absence of this advocate. We need a timeline as to when they can see an advocate who will represent their interests.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Minister of Justice and Public Safety.

**J. HOGAN:** Again, Speaker, this report of the statutory review – the review of statutory Officers, I should say, was not four years old. Certainly, we're looking at that now and looking how best to make synergies between all the offices and make sure they all operate functionally and to make sure that everybody has the ability to have an advocate for them.

I certainly made submissions when that report was done that we're all advocates in this House. I'm an advocate for seniors, I'm an advocate for children and I'm an advocate for people with disabilities too. So if anybody has an issue in Windsor Lake

and actually anywhere in the province, I'm happy to hear and advocate on their behalf.

Thank you, Speaker.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Harbour Main.

**H. CONWAY OTTENHEIMER:** Just to clarify what the minister has stated, I was referencing four years of mandate letters by this government indicating their commitment to an advocate for persons with disabilities.

So just to be clear, could we please have a timeline as to when the people can expect that advocate?

**SPEAKER:** The hon. the Minister of Justice and Public Safety.

**J. HOGAN:** Thank you, Speaker.

We're continuing to review that report, and again, make sure that everything is done properly and make sure, as I said, the synergies are there for all the offices of the House. Again, I will say that anybody in this province – not just Windsor Lake, who I represent – has any issues that they want to come to government for, I'm happy to advocate on their behalf – for any issue, for anyone in this province, for any district, including Harbour Main.

Thank you, Speaker.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Terra Nova.

**L. PARROTT:** Thank you, Mr. Speaker.

We all advocate for the people in our districts, specifically people with disabilities.

**SOME HON. MEMBERS:** Hear, hear!

**L. PARROTT:** Speaker, as an amputee, I have raised this issue several times in the House. There are over 400 individuals in this province who are amputees, and this government provides zero dollars to them.

Prosthetics are not covered by the Newfoundland and Labrador government. Why?

**SPEAKER:** The hon. the Premier.

**A. FUREY:** Thank you, Mr. Speaker.

As I've said in the House before, we're looking at covering those, because it is an expense that a patient shouldn't have to incur. As an orthopedic surgeon myself, I've seen the impact that that can have on patients and their lives, and there's no need to have an actual financial barrier to them to proceed with their normal life.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Terra Nova.

**AN HON. MEMBER:** (Inaudible.)

**L. PARROTT:** I didn't vote against anything. I've felt the impact of it, though. We can talk about that after if you want to.

Speaker, the support of amputees in this province is lacking significantly. Those travelling to the Miller Centre in St. John's for rehabilitation following an amputation are not covered by MTAP. These patients are seeking independence by relearning and regaining their lives.

Why are rural amputees not covered by MTAP?

**SPEAKER:** The hon. the Minister Responsible for Labrador Affairs.

**L. DEMPSTER:** Thank you, Speaker.

The Medical Transportation Assistance Program is a program that is valued by many people in this province. The program has been around since 1998. When folks are travelling to access specialized services, there are supports available in place for them. There is a program – so if somebody is coming to the Miller Centre and not referred, it's my understanding that there is a program that rests in Health that would provide support for that.

In terms of the Medical Transportation Program, if folks are travelling, especially long distances, you have to be referred to see a specialist. That is what the program is based on, and I'm sure the Member is aware of that. There's a tremendous uptake in that program, an extra million dollars in the budget last year, an additional \$700,000 this year, and we are up about 30 per cent in users around the province of that program.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Terra Nova.

**L. PARROTT:** One place in the province to get specialized service, and that's the Miller Centre – only one. It's a very specialized service, and you have to have a referral to get a prosthetic.

Speaker, government is willing to provide money to lower your light switches, as well as add wheelchair ramps. They're willing to put people on social services, but these are people who are trying to get their mobility and their lives back after a life-altering amputation.

How does that make sense?

**SPEAKER:** The hon. the Premier.

**A. FUREY:** Thank you, Mr. Speaker.

Having been on the other side of the gurney, I can appreciate somewhat from an

empathetic perspective, not, obviously, as a lived-experience perspective, the burden that that places on patients. It's significant. It's a significant clinical burden. There is no need for a financial burden.

That's why we commit to ensuring that those costs are not a burden to those patients and their families as they try to return to normal life after what, the Member opposite is indeed absolutely correct, is a life-altering experience.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Placentia West - Bellevue.

**J. DWYER:** What is this government doing for persons with disabilities in our public school system that are falling through the cracks due to a lack of classroom supports?

**SPEAKER:** The hon. the Minister of Education.

**K. HOWELL:** Thank you, Speaker, and thank you for the opportunity to respond and speak about some of the incredible resources and resource folks that provide services in our classrooms.

Recently, in *Budget 2024*, we were able to allocate \$3 million, which will be translated into 104 student assistants that provide supports to students in our classrooms, day in and day out. This is a resource that certainly supports the education system and that we couldn't operate many of our classrooms without, so we're certainly looking forward to getting those numbers on the books and having those resources in our classrooms.

On top of that, there are a number of other resources that we provide to students based on specific needs if it's a physical need or if it's some type of other need that we can meet that helps facilitate their learning.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Placentia West - Bellevue.

**J. DWYER:** Well, Speaker, I'll tell you what this government has done. They have set up a two-tier education system by not providing those supports that many in this province need, both the metro and rural.

When will this government show us a plan to improve the education system for persons with disabilities?

**SPEAKER:** The hon. the Minister of Education.

**K. HOWELL:** Thank you, Speaker.

I'm a little bit confused as to what the Member opposite is referencing when he speaks of a two-tier system because all students who have needs in our classrooms have the availability of resources. We certainly have those resources in place –

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

I heard the question – please.

**K. HOWELL:** We certainly have those resources in place, and we have examples in that as we look at the number of itinerant resource teachers that are available, the number of teaching and learning assistants that are available, the number of teachers with specialized training and treatments for some of the particular needs that our classrooms represent. We're continuing to build those supports and we'll continue to provide it in our classrooms.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Labrador West.

**J. BROWN:** Thank you, Speaker.

Earlier this week, I wrote the minister asking for the water bomber to be returned to Wabush after it was moved by this government. We had close calls last year and now Environment Canada has declared drought conditions in Labrador West.

How is having a single water bomber in Goose Bay able to protect an area as vast as Labrador under drought conditions? Why is this government ignoring that and keeping the water bomber out of Wabush?

**SPEAKER:** The hon. the Minister of Fisheries, Forestry and Agriculture.

**E. LOVELESS:** Thank you, Mr. Speaker.

I think the hon. Member did get a response to the letter that he wrote me on this particular issue. We certainly value the staff in the department, as I said before, from a human-resource perspective to an asset perspective, we join forces and determine where the water bombers will be situated.

Right now, it is in Happy Valley-Goose Bay and if it needs to be moved because of the risk assessment that's done by the valuable employees in the department, then it will be moved to that risk area.

Thank you.

**SPEAKER:** The hon. the Member for Labrador West.

**J. BROWN:** Last year, our roads and rails were cut off for days with fires in Quebec. We were lucky that the fires didn't progress further north into Labrador West. Now, Labrador West has officially entered a drought.

I ask the minister: What wildfire resources will be based in Labrador West permanently, not 600 kilometres away in Goose Bay, to make sure we will not get cut off this summer if a fire happens again?

**SPEAKER:** The hon. the Minister of Fisheries, Forestry and Agriculture.

**E. LOVELESS:** Thank you, Mr. Speaker.

I do have a list, but I don't have time enough to really name off what we've done in terms of fire response and being ready for this fire season.

Again, we all recognize and see on our TVs what's happening out in the western part of this country. The concern in Labrador is taken seriously, but, no doubt, we are ready as a department and we will ensure that Labrador has the lens that is required in terms of focus of being ready to fight fires, if they do happen in Labrador or any part of this province.

Thank you, Speaker.

**SPEAKER:** The hon. the Member for Labrador West.

**J. BROWN:** Thank you, Speaker.

Speaker, I hope that this year is a quiet year. I hope that this year there is at least a rain shower every day in Labrador West, but the climate has changed in Labrador West, it has changed significantly. Instead of improvements, we have seen cuts to the forest fire forest service in Labrador West. We lost our water bomber.

I ask the minister: What services is he committed to bring back permanently into Labrador West so we don't see what happened last year and even worse that could possibly happen this year?

**SPEAKER:** The hon. the Minister of Fisheries, Forestry and Agriculture.

**E. LOVELESS:** Mr. Speaker, he's not losing the water bomber. The services of the water bomber and our human resources in the department are available to Labrador, that same as it is to the Island part of this province. We're committed to Labrador;

we've been so and we will be moving forward.

Uncertainty of the forest fires, we don't know what's going to happen. We will pray that it still rains and that we don't have to be faced with the challenges that they're facing in the western part of this country.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Humber - Bay of Islands.

**E. JOYCE:** Mr. Speaker, recently there was major flooding on the West Coast with significant damage done to the roads, properties, private dwellings and a few homes were destroyed.

Minister, in a letter you responded to me you stated: Damages to these houses would be insurable.

Several houses and properties have been damaged in the last several years due to mudslides and the insurance companies said they are not eligible as it was an act of God.

I ask the minister: Would you have this matter reviewed and activate the Disaster Financial Assistance Program as insurance does not cover this type of damage as mudslides?

**SPEAKER:** The hon. the Minister of Justice and Public Safety.

**J. HOGAN:** Thank you, Speaker.

The DFAA is a federal program and there are, obviously, some criteria any time before the program can be activated and one of the exceptions is that any property that's insurable is not covered by DFAA. There's also a minimal threshold that must be reached before we activate, or we request to activate the DFAA. Sometimes the administrative cost that our government will

face outweigh, actually, what we can recoup. So we don't activate it in that case.

My understanding is this home, in this case, was uninsured as opposed to uninsurable. A home can be insured but still not be covered because there's an act of God, but I will get the details on that to make sure I'm correct on that and provide them to the Member when I get a chance.

Thank you.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Humber - Bay of Islands.

**E. JOYCE:** Thank you, Minister.

There was a recent announcement by the Premier for a \$13 million new sport and well-being dome. I quote from the press release: "The facility will prioritize exercise rehabilitation for acute care patients with conditions such as heart disease, lung disease, orthopaedic conditions, stroke and cancer."

There are many people in the Corner Brook area with these conditions. Our office has been contacted by many citizens who are on the wait-list for rehabilitation due to the above-mentioned conditions.

Will the minister have this matter reviewed and have many patients who are suffering in silence with no rehabilitation options available to them in the Corner Brook area?

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Thank you, Mr. Speaker.

I thank the Member for his question because this is also important. The Health Accord focusses on wellness and that was part of the announcement in St. John's. I know there is dedicated rehab in the Western region. There's a 10-bed rehab,

a 15-bed restorative care. There is physio that provides physiotherapy and occupational therapy in the new Western Memorial, but we continuously look at how we can improve. That's part of what the Health Accord is about, is looking at how we can continuously improve services throughout the province.

Wellness is a large platform in the Health Accord and I'm certain that we'll be looking at what services are needed in all regions of the province to promote wellness.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The time for Oral Questions has expired.

**J. DWYER:** Point of order.

**SPEAKER:** The hon. the Member for Placentia West - Bellevue.

**J. DWYER:** Speaker, during Question Period, I asked a question –

**SPEAKER:** Which section, sorry?

**J. DWYER:** Pardon? Forty-nine.

During Question Period, I raised a question about person with disabilities and about supports in schools. The answer that came back to me and to this House was, in my opinion, a false statement because it was said that all persons with disabilities in our school system have the support of an assistant and stuff like that.

So not only do I know that is to be false about my own district of Placentia West – Bellevue, but it's also false as a parent. I have a son, a child with autism that hasn't had a support. I hope it's really circumstantial, but his supports were taken away when I became an MHA.

**SPEAKER:** There's no point of order there.

It's a difference between opinions from the Members.

The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** Thank you very much for your ruling, Mr. Speaker.

I wish to rise on section 49 to raise a point of order. During Question Period today at 2:24 p.m., the Member for Conception Bay South stood and did that which he did yesterday, which you corrected yesterday. There was a reference to an hon. Member's surname, during the course of Question Period. This, of course, is a violation of the rules of our House that Members cannot be referred to by their name.

Given the circumstances that this is a repeat of yesterday's events, you ruled on the matter during the course of Question Period yesterday. This is a second time that it's now having to be referred. I now have chosen to rise on a point of order.

I would ask for you to, not only rule on this matter, but also remind all Members of the House, this is not acceptable behaviour and that any further continuance of this kind of behaviour will result in a sanction.

Thank you, Mr. Speaker.

**SPEAKER:** The hon. the Member for Conception Bay South.

**B. PETTEN:** I appreciate the Member for Corner Brook's commentary, and he's right, I'm not disputing that. But maybe we need some clarity from the Liberal Party of Newfoundland and Labrador, is it the Liberal Party of Newfoundland and Labrador or is it Furey party of Newfoundland and Labrador? Because everywhere we're reading out on the signs, everywhere in public, Furey is the advertised name for that party, Speaker.

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

**B. PETTEN:** I'm not using his surname, I'm using the name of the party you're associated with. If you want to provide clarity, maybe the Premier can or maybe the minister can. Until then, I have no problem saying Furey because that's the name of their party.

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Take your seat for a second. You too, take your seat, please.

Yesterday, I did make a ruling regarding using personal names and I do remind all Members to not use names, but rather use their titles. That's to both sides of the House. It's a long-standing tradition that we refer people by titles and that.

The hon. the Minister of Immigration, Population Growth and Skills.

**G. BYRNE:** Mr. Speaker, to have respect for this institution that we call the House of Assembly is to respect its rules. Without respect for the institution, we are less. We need to raise this institution up by adhering and respecting its rules.

What I heard just a moment ago was not only a blatant disregard for this institution, but for your office as the Speaker. I heard for the second time a deliberate violation of the rules of this House and a play on words and a tongue-in-cheek exercise, which, quite frankly, diminishes us all.

I ask you, Mr. Speaker, rule on this clear and egregious breach on our rules; set the record straight. Also, I would ask you to contemplate if there are any further deliberate attempts to lower this House, that you act with censor against any Member from any side of the House.

**SPEAKER:** I take the comments on both sides, and I will report back to the House on the points of order.

But I do remind Members that we have a long-standing tradition that we do not refer to people by names within the House.

Presenting Reports by Standing and Select Committees.

Tabling of Documents.

Notices of Motion.

### **Notices of Motion**

**SPEAKER:** The hon. the Minister of Digital Government and Service NL.

**S. STOODLEY:** Speaker, I give notice that I will on tomorrow introduce a bill entitled, An Act to Amend the Vital Statistics Act, 2009, Bill 77.

**SOME HON. MEMBERS:** Oh, oh!

**SPEAKER:** Order, please!

One second, Minister. If Members want to talk back and forth, take your conversation outside, please.

The hon. the Minister of Digital Government and Service NL for your notice of motion.

**S. STOODLEY:** Thank you, Speaker.

I give notice that I will on tomorrow introduce a bill entitled, An Act to Amend the Credit Union Act, 2009 No. 2, Bill 78.

**SPEAKER:** Further notices of motions?

The hon. the Minister of Fisheries, Forestry and Agriculture.

**E. LOVELESS:** Speaker, I give notice that I will on tomorrow introduce a bill entitled, An Act to Amend the Crop Insurance Act, Bill 76.

Thank you.

**SPEAKER:** Are there any further notices of motion?

Answers to Questions for which Notice has been Given.

Petitions.

### **Petitions**

**SPEAKER:** The hon. the Member for Humber - Bay of Islands.

**E. JOYCE:** Thank you, Mr. Speaker.

I stand on a petition today to amend the *Limitations Act* to remove limitation periods for civil child abuse claims where the abuse complained of occurred against a minor: within an intimate relationship; within a relationship of dependency; or where the defendant was in a position of trust or authority.

And amend the *Limitations Act* to state limitation periods do not run during any time the defendant: (a) willfully conceals or misleads the claimant about essential elements of the claim, i.e., the fact that an injury, loss or damage has occurred, that it was caused or contributed by an act or omission, or that the act or omission was that of the defendant; or (b) willfully misleads the claimant as to the appropriateness of a proceeding as a means of remedying the injury, loss or damage.

I stand again, Mr. Speaker, and present this petition on the *Limitations Act*. I'm looking for an update, I guess, from the government itself. Hopefully, we're going to have the amendments ready and the amendments to the *Limitations Act* brought to the House. There is some speculation that the House may close next Thursday. There is speculation. I have no confirmation of that, of course, but there is speculation that it may close next Thursday. So I'm hoping it's not going to close next Thursday, it'd be the following week.

I'm asking the government, and I know it comes down to the Minister of Justice and Public Safety for it, but it's the government initiative if they're going to bring legislation in to ask for an update on the progress of bringing in this bill.

I understand that there are eight other provinces across Canada who already have the Statute of Limitations lifted and I'm sure that whoever is writing up the amendments can have that changed fairly quick when you've got eight others that you could draw from that have it done.

I don't know if the minister can give the House an update on the statute of limitations. As I said the other day – I don't know if the minister heard it – it's not the minister. I know it falls on the minister but it's not the minister's decision. It's the House decision, a government decision in Cabinet to bring that forward.

So I call upon the government and not the minister to ensure that this amendment is made and brought to this House, this session of the House of Assembly. I look forward to the amendments and having the debate in the House of Assembly, to have this put behind us so that we can say, collectively as a government, we did the right thing here for the people of Newfoundland and Labrador. Not just for Jack Whalen but for other people who may be affected by this.

I don't know if the minister has an update on this. I don't know if the government has got any plans when they're going to bring this legislation in, but it'd be nice to inform the House so we can inform the families.

Thank you, Mr. Speaker.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Harbour Main.

**H. CONWAY OTTENHEIMER:** The background to this petition is as follows:

WHEREAS the fatal overdose rate is rapidly increasing; the drug-related crime rate is increasing; police are begging for more support and resources; the wait-lists for mental health and addictions treatments in our system are overwhelming; the options for drug detox and rehabilitations centres are limited; and

WHEREAS the vast majority of inmates suffer from mental health illness or substance abuse and are unable to access the proper mental health care and treatment they need;

THEREFORE we petition the hon. House of Assembly as follows: We, the undersigned, call upon the House of Assembly to urge the Government of Newfoundland and Labrador to provide access to long-term mental health care that ensures continuity of care and proper mental health treatments and supports on a regular and continuous basis.

Speaker, the mental health care system has failed. It is in crisis and the crisis is urgent for many reasons. Let me cite a few. The fatal overdose rate is increasing at alarming rates: 51 suicides in this year. An increase of over 143 per cent since 2019. That's five years, Speaker. Five years, it's increased 143 per cent. The evidence is there. This is the evidence. We don't need to go further to see this. In September, reported for eight months, there were 24 of our Newfoundlanders and Labradorians who have died due to overdose. Four months later, the number had doubled – doubled – to 51.

That's not even talking about non-fatal overdoses. We have no data on that. No data after the ATIPPs that we filed, and we know that non-fatal overdoses are generally seen by police or other front-line health care professionals. If we can't get the data just on non-fatal overdoses, how can it realistically be expected for us to target

appropriate addiction supports if they don't even know the scale and the extent of the problem? We know other provinces collect the data. Again, we are failing in that area.

The drug-related crime rate is alarming. It's increasing. We saw that the government in *Budget 2024* had allotted \$1 million for seven community Mobile Crisis Response Teams. We know that. When is this happening? It's one year down the road.

**SPEAKER:** Order, please!

The hon. Member's time is expired.

**H. CONWAY OTTENHEIMER:** Thank you.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Topsail - Paradise.

**P. DINN:** Thank you, Speaker.

Again, this is a petition I've offered many times in this House, so I'll try again.

Approximately 100,000 people in Newfoundland and Labrador live with mental illness.

Only about 40 per cent of people affected by mental illness and addiction seek help.

Seventy per cent of mental illness development is during childhood and adolescence and most go undiagnosed.

Less than 20 per cent receive treatment.

Emergency and short-term care isn't enough and it is essential more long-term treatment options are made readily available.

Therefore, we petition the House of Assembly as follows: To urge the Government of Newfoundland and Labrador to provide access to long-term mental health care that ensures continuity of care

beginning with psychiatric and neuropsychological assessments being more accessible to the public so they can access proper mental health treatment and supports on a regular basis.

Again, I've gotten up many times here, but there are many advocates and people out there lobbying for better care. There are people out there with lived experiences. We have again, Ms. Kristi Allan and her individuals that help her, that every Monday for 180 Mondays now – 180 Mondays – they've been out there silently advocating for better mental health care.

We talk about 70 per cent of psychologists in this province are telling us that the Stepped-Care approach has only minimally improved access – only minimally improved access. They go on to say that mental health and addictions systems must offer a broad range of services to provide the best possible opportunities for recovery. Mental health is just not the absence of mental illness. We all have physical health; we all have mental health.

As I said, in the schools, 70 per cent of our children and adolescents are developing and dealing with mental health care challenges.

In a number of reports that have been put out, a couple of quotes that I've stated and I'll keep stating, one is mental health and addictions does not do well on wait-lists. Having people to wait when they need immediate care is an issue. Many have said they're lucky if they can get service. As the Member mentioned there, my colleague, we've seen suicide rates increase.

Before I sit down, I do want to say there is hope. If anyone is suffering from mental health issues and cannot get help, please reach out to me or anybody.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Mount Pearl - Southlands.

**P. LANE:** Thank you, Mr. Speaker.

Speaker, this petition is a request that the Province of Newfoundland and Labrador join with the provinces of Alberta, Saskatchewan, Manitoba, New Brunswick, Ontario and the Yukon to not waste valuable provincial resources on the current federal government gun buyback program as imposed by Bill C-21.

WHEREAS Canada already has stringent regulations and comprehensive legislation related to firearms ownership; Canada has millions of responsible, law-abiding firearms owners; data shows that the confiscation regime would not stop firearms violence in Canada; the vast majority of firearms used in violent crimes are obtained illegally and/or are smuggled into Canada; legal firearms owners are strong advocates for measures that will actually prevent firearms violence; legal firearm owners in Canada are vetted on a daily basis through the CPIC system; the list of firearms to be confiscated is arbitrary and not based on functionality; assault rifles or fully automatic firearms have already been banned in Canada since 1977; criminals who have illegally obtained firearms will not be impacted by the confiscation regime; the list of firearms to be confiscated include some hunting rifles and shot guns, which can be expanded upon to include more firearms which are used for hunting purposes; the federal government is abandoning evidence-based decision-making as it relates to preventing firearm violence; and the list of firearms was legally obtained by licensed, law-abiding citizens and were never purchased from the federal government, therefore, how can the government buyback something that was not something that was not theirs to begin with.

We therefore ask the hon. House of Assembly as follows: We, the undersigned, call upon the House of Assembly to urge the

Government of Newfoundland and Labrador not to participate in the federal buyback program, which would entail the use of provincial resources, including, but not limited to, provincial law enforcement, provincial government agencies and the provincial office of the chief firearms officer.

Mr. Speaker, I present this petition, again, on behalf of a number of firearm owners, hunters and so on. I think the petition speaks for itself. It is pretty detailed. I guess the bottom line is that we have this bill passed by the feds, it's going to be punitive to gun owners, hunters and people who – it is not going to impact criminals, one way or the other.

Criminals are not going out and buying a gun, registering a gun and storing a gun legally like a regular citizen. They're obtaining them from the streets and so on, guns that are being smuggled in through organized crime and so on. Therefore, we should not be penalizing people who are simply hunters; we have a lot of them in this province.

So we shouldn't be wasting our resources (inaudible) this.

Thank you.

**SPEAKER:** Order, please!

The Member's time has expired.

### Orders of the Day

### Private Members' Day

**SPEAKER:** This being Wednesday, I'll call upon the Member for Conception Bay South to present the PMR.

**B. PETTEN:** Thank you, Speaker.

Speaker, I move the following Private Members' Resolution, seconded by the Member for Stephenville - Port au Port.

WHEREAS (a) the wait-list for mental health and addictions care are too long, even for youth in crisis; (b) many not finding help are left with few alternatives; (c) abuse of deadly drugs is worsening, particularly in Labrador; (d) the fatal overdose rate is accelerating; (e) the drug-related crime rate is accelerating; (f) up to 87 per cent of inmates suffer from mental health or substance abuse issues, but many are released back into the community without proper treatment or support; (g) there are few options for drug detox and rehabilitation, too few drug-free shelters and too few options for families in crisis; (h) police are seeing an alarming rise in the number of calls related to mental health crisis and addictions and begging for more support and communities are afraid; and

WHEREAS the All-Party Committee on Mental Health, Substance Use and Addictions was announced on September 1, 2023, to look at the prevention, early intervention, treatment and support with an emphasis on youth and young adults and the social determinants of health, such as housing, poverty and education; yet the Committee – it is meeting of late, I'll acknowledge, but I think we're far behind the ball when we look at when the Committee was formed back in September, it was heightened awareness. There was a lot of public scrutiny over the issue and, I believe, since September up until the recent week or two, since it was brought up here in the House of Assembly, we're getting more meetings, hopefully that's a continuing trend. We're looking at eight or nine months later and that's a lot of inaction by this government.

THEREFORE BE IT RESOLVED that this hon. House urge the government to expedite the work of the All-Party Committee on Mental Health, Substance Use and Addictions and fully include people with lived experience; relevant government departments; professionals in health care, policing, justice, corrections, education and social work; community groups; Indigenous

communities; faith groups and others who can provide insight to help address the wide array of challenges more effectively, so everyone in need has somewhere to turn right away.

Speaker, we bring this private Member's resolution – I guess a couple of weeks back, we had one day here in the House and we concentrated – today was on disabilities, we concentrated a couple of weeks ago on mental health and addictions. You know, that message actually resonated because we're hearing that on a day-to-day basis in our individual offices. I know Members on all sides of this House hear it every day. There's not a day goes by we're not dealing with a mental health issue or a substance abuse issue or both, and most days it is both.

A lot of this is hand in hand because substance abuse is driven by mental health. A vast majority in the penitentiary – there are a lot of them in there, they suffer from mental health and addictions. The crime they do is also associated with that. It's a vicious cycle.

In 2016, I guess it was, I served on the last All-Party Committee on Mental Health and Addictions and the report that came out of that Committee was *Towards Recovery*. It had 54 recommendations.

A lot of those recommendations, at the time, we met with a lot of groups, we discussed a lot of issues, we heard a lot of heartbreaking stories, and it was one, in particular, that stuck with me. This young girl attempted four times to commit suicide. It was one with a lot of publicity over it. Each time was the cry for help, and each time those calls went unanswered until, finally, the fourth time they were successful.

We all know people in our lives; we all know people that are near and dear to us. I had a close family member of mine at 18 years old committed suicide; it was to do with mental health. Were addictions going to follow this

person at 18 years old? Quite likely. At the tender age of 18, they never had an opportunity to fully get engulfed in that, but obviously there were significant issues there but went untreated. This cycle continues and we continue on this pattern.

As an adage, and we've said it and it's used a lot times, you keep doing the same thing over and over again and we expect different results. You announced that part of the *Towards Recovery* report was we needed a new mental health facility. We all agreed, and I was a member of that report and I thought it made sense. That's still not open and it's being constructed and there is a bit of controversy over it, but regardless, it's going to open eventually and that may and should provide some immediate help. But that help comes after the problem. You're not getting to the root cause of the problem.

I know the Health Accord, the government heralded that a lot, too, about the social determinants of health. All this stuff is a big conversation. We got to do more than just say words. We talk about it and it sounds good and we got this action plan and we got this plan here.

The former minister of Health did stand in his place – and I know I asked him and I'm sure other Members on our side used to ask him. He was always very proud to get up and read the virtues of all the recommendations and how many of them, the boxes, they ticked. All the while, there is a list of people suffering from mental health and addictions, people waiting for psychiatrist appointments, psychologist appointments and people with addictions waiting to get treatment.

I dealt with a young individual, a young man probably in his early 40s, someone I knew for quite some time and someone who had a lot of faith in me. He needed help both with addictions and mental health, and we done everything possible. On a very personal note, I knew he and he was probably close to my age, realistically. I

think he's always young but he's not. His ex-wife, actually, she doesn't speak to me anymore because I was trying to help him get his life together, but they were going through a nasty divorce and it seemed like I was taking his side. I wasn't taking his side; I was trying to help the man to try to further his life along so he could help her and do his part with their children and what have you.

Speaker, sadly, he took his own life last year in Sweden. He met a girl from Sweden, he went to Sweden and he went missing two days after he got there and he's no longer with us. There's a part of me that will always remember. Not a day goes by that I don't think of this person because we went – I know I did and my office did – to every stretch of imagination to help this person. He used to call up daily and ask us for help. There's nothing more raw than something like that. He used to beg my constituency assistant: I need help. We did everything we felt we could possibly do.

The mental health and addictions coordinator that we all use as MHAs, he's a great individual. We had a straight line, direct line to him and he does great work. But there's only one of him; he's on his own. So unfortunately, it failed. But unfortunately, one is too many. I can go on that list of people – each of us can stand up here and we can list numerous, numerous people that the system is failing.

How are we ever going to get past – we got to start creating some successes. So as we talk and we say we're doing this and we have this plan in place and now we have this new All-Party Committee on Mental Health, Substance Use and Addictions – I'm not against that. Ironically, five years or six years ago we had the *Towards Recovery* Committee to deal with these same issues. Now, I know this is directed more towards youth. It was driven by the addictions, overdose deaths. The numbers are on the increase. As of December, they're upwards

of 50-some odd overdose deaths in the province.

That's alarming. I mean, in three months, we over doubled the amount. It's incredible, actually. But we still have a problem. Have we improved other than a lot of things sound good since 2016? No. There've probably been some improvements. But is there still a wait-list for psychiatry, psychologists, mental health supports? I tell you it is.

Speaker, I know a lot of people – I could go on, on this topic, for a long time. When I was getting up, I was wondering what I'd do to speak, because I didn't know really where my head was to, but I could go for days now. When I stand, I realize that mental health issues are very close to me and my family. I've spoken about that here before in the House. And addictions are very close to me, too, as I have a family member who is – well, anyway, I'll leave it at that. But it's been years of suffering and it's divided us over addictions.

So I can write two books on that. And there's been a lot of money invested in this individual who happens to be my brother. The system has failed. But it's failed me, too, because I don't have a brother. I only had one brother; I don't have a brother. He's there in body but he's not with me.

But we spent the money. My mother spent the money. Our family has come together and it divided us because of addictions, but it's the lack of supports. It's not getting the meaningful results that are needed. Tina Olivero speaks out about losing her son. The list goes on. It's parents in this province that stand up one after another, after another, after another and stand on the steps and I have family members in my own district who come to me on a daily basis – the Gosse family, if they're listening – these people need help.

We, as elected officials, need to provide that help. We need to say more than words; we

need to do actions. Our actions are not matching our words. Words are fine, but they're empty words if there are no actions. If people are still dying and struggling like they are with substance abuse and mental health, we need to do more, Speaker.

Thank you very much.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Harbour Main.

**H. CONWAY OTTENHEIMER:** Thank you, Speaker.

I stand here to speak about the private Member's resolution on mental health and addictions. As my colleague, the Member for Conception Bay South has indicated, we are all affected, I'm sure, in this hon. House. Each one of the Members are impacted in some way or another by either loved ones or friends who are struggling with mental health and addictions or substance abuse.

So I'm sure that it's accurate to say that we all feel the impact of our failed health care system. Now, I don't want this to be all about the negative and about what we've done wrong and what government has failed to do, but I do think it's necessary in order to address what we can do right. I hope to address some of the things that we need to do as solutions to addressing this crisis that we are facing in our province today.

No mistake about it, the crisis is urgent. Whether we refer to the fatal overdose rate and that it is increasing at alarming rates, whether we look at non-fatal overdoses, although we can't measure those numbers, we can probably estimate that they are very alarming indeed. And what about the drug-related crime rate? We know that there are connections between drug use and crime. They are undeniably linked and connected.

So it's accelerating at alarming rates. We just have to refer to the RNC data on the drug crisis, for example, in the area of St. John's. I obtained data from the RNC about the number of files that are assigned, for example, from 2021 to 2023 to the drug investigative unit, now it's the Weapons and Drug Enforcement Unit. It doubled, Speaker. The number of charges laid from '21 to '23, more than seven times what it had been just two years earlier. So we see the evidence, the evidence is there. There's no denying that.

What does that say? That says our drug problem is spiralling out of control. The illicit drug use in our towns and communities is serious and we have to take note and not just talk about Committees. Yes, Committees are important. Although, when I look at the work in the last eight months, I believe, of the all-party Committee and from what I'm hearing, there has not been enough concerted action taken to really address this problem.

So there needs to be more focus, Speaker, on prevention, early prevention. It's the key. It gets to the root causes of addictions. But, again, if it's not taken seriously – and we see the all-party Committee, which is an important concept. It's important because what it does is hopefully brings people with lived experiences together to share their stories and their accounts of testimonies of what they've endured. But I've heard that has only been happening as of late, which is not acceptable.

Why is that important? Because the only way to really get, in my submission, an accurate idea of the complexity of life for someone who's suffering from mental health or substance abuse addictions is to consult with people who have lived experiences. There should be, as they say, nothing for us without us. We've heard that before. That is a sound and profound statement. Why is that important? It's because the goal is to have a more equitable, a more aware and a more inclusive province. That can happen

when we all collaborate on important issues like this, Speaker.

But, again, when I look at the way that the government's attention has been focused, there are serious and grave concerns. Because what we see now, Speaker, is when a health care system fails to treat mental illness, what happens? It's the criminal justice system that is punishing the symptom, Speaker.

For example, let's look at HMP, let's look at the individuals that are there in HMP, who are essentially housed in cages, without proper rehabilitative programming. We heard that from the Auditor General, who stated in her report – the scathing report – about the inadequacies of the HMP and the criminal justice system that we have in our province to adequately treat and care for the people that are there who are mentally ill.

We know, the evidence is clear, there are estimates at least, we go back to the Jesso report, at least estimates of 87 per cent of people, of inmates, suffer from some mental health illness or substance abuse in our penitentiary. So what are we doing, Speaker? We're punishing sick people, whether they have fetal alcohol syndrome, whether they have PTSD, whether they have schizophrenia, basically that's what's happening.

So what is happening is the criminal justice system is sucking these people up into the system. These are people that need to get medical care and treatment, and they are not receiving that. We are inundated here in the Official Opposition with letters. We received one just this weekend from a family who are distraught because their loved one is in the HMP and not able to get the proper care for his schizophrenia.

What do we do? We cannot interfere, it's basically a decision that's been made. They're keeping this individual at the HMP, where really he should be getting mental health care and treatment in a psychiatric

facility or in a proper health care facility. But he's not. The family are distraught because they're seeing his mental health declining rapidly and there are no supports there.

What can we do? We are at our wit's end to know how to advise them, because they have a loved one who's just falling through the cracks, Speaker. He's lost.

This is only one of many. I heard from someone last week, an inmate who's at HMP, who basically cannot access the proper mental health care as well.

So, Speaker, this is of concern. It seems like the police who are under-resourced. We only heard recently from the RCMP out in the Conception Bay North area who implored the Department of Justice and the minister to help them with police resources because of the drug trade and the fact that they need more resources out there; only to be essentially dismissed. I say that was the real ineffective response that was given. They were blamed that it was a staffing issue or something of that sort.

Speaker, that's not acceptable and the police seem to be the default when someone is in a mental health crisis, especially in rural and remote communities.

In my last minute, I want to speak about the mobile crisis unit. I know that money has been put forth in *Budget 2024* for the mental health crisis. But I also know that there were seven communities or towns that were waiting. I believe that there have been no concrete assurances that these will be provided. I know Conception Bay North Joint Council has been advised they're waiting an estimate of two years before they can get that mobile crisis unit.

That is badly needed, Speaker. It's a team of health care professionals who will help police officers, work together to respond compassionately when people are in mental health care and they've got to wait two years. Although, I was under the impression

from the minister that that would be forthcoming for the people in the area of Conception Bay North who are desperately in need.

Thank you, Speaker.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Minister of Health and Community Services.

**T. OSBORNE:** Thank you, Mr. Speaker.

I want to speak to this because the all-party Committee should remove the politics from this issue. It is an important issue. It's an issue, Mr. Speaker, that takes everybody in this Legislature, everybody in health care, everybody in the department and in the health authority to bring about improvements.

I do want to talk a couple of minutes about the improvements, Mr. Speaker, because significant achievements have been made. I will say right upfront: We need significant more improvements. Much more work needs to be done. But since *Towards Recovery*, there has been significant improvements in mental health and addictions and substantial investments have been made in the province.

As a direct result of *Towards Recovery*, the implementation of the provincial stepped-care model, which is an evidence-based approach that aims to match individuals with the right care at the right time, and step that care up or down as needed.

In addition to traditional methods, we have Doorways, as a result of *Towards Recovery*. We have 811, which has mental health and addictions added to the calling. We have Bridge the gapp, which has been recognized across Canada and put in place in other jurisdictions. We have Flexible Assertive Community Treatment teams, and ACTT as well in the province, as a result of *Towards Recovery*.

We have, in budget 2024-25, \$450,000 for the recruitment of a housing liaison in each of the health zones to work directly with the FACT teams and ACTT. We have mobile crisis teams in areas of the province, and we've added more in this year's budget.

I will take the point that the Member made. I wasn't aware of the timeline that her community was told, but I will check into that because it is important that these mobile crisis teams be put in place to serve the people that we want them to serve.

We have the comprehensive provincial Dialectical Behaviour Therapy program in place in the province, Mr. Speaker. We have 85 Doorways, by the way – I said we had Doorways; there are 85 Doorways locations in the province now. There are over 15 e-mental health options available through Bridge the gapp.

There are currently four opioid-dependence treatment hubs in the province, and we are expanding that. Not only are we expanding that, but we're adding other substances – not just opioid – to those as well. The *Provincial Alcohol Action Plan* came from *Towards Recovery*, as did *Our Path of Resilience*.

So there have been many, many improvements put in place, and we need those improvements, but we need more. We do need more. And that's what the All-Party Committee for Mental Health and Addictions was put in place for.

I do have some concern with the wording of the resolution, Mr. Speaker. I think the wording is well-intentioned, but the Committee has seldom met since being put in place, and some people with lived experience say they have not been properly included.

I think if we're going to be fair and remove the politics from the All-Party Committee, all Members should be available or provide a substitute to these meetings. But more

importantly, Mr. Speaker, in November I had asked Members to bring forward at the next meeting names of stakeholders that they wish the Committee to consult, and that's in the minutes, by the way. None received – none received. So the wording of the resolution is a little bit concerning.

The next meeting, December 18, I asked Committee Members again for their suggestions on organizations they wanted us to engage with. Mr. Speaker, none received. At that meeting, there was one verbal recommendation, Guardians of Recovery, and we met with those. None received.

So, Mr. Speaker, the next meeting was in February because we didn't have names of those to consult with, other than officials. But if the only names put forward were by officials, we would be accused of picking and choosing. We had intended and said upfront that we will ask Members for individuals with lived experiences and groups they wanted us to consult with and we would ask officials to supplement that with additional, giving the Committee an opportunity to add names first. But that's in the meeting minutes of December 18.

On February 26, because we still didn't receive any recommendations, I asked officials to send a list of stakeholders out to Committee Members. Mr. Speaker, that was in February. We went from December to February because we had no submissions of suggested names. The next meeting was in May and still no recommendations. So to say that we have fallen down is a little bit unfortunate.

I am proposing some amendments to this. I'm proposing these amendments, seconded by the Member for Cartwright - L'Anse au Clair, the Minister of Labrador Affairs. The proposed amendments in the seventh WHEREAS clause substituting the words "there are too few" with the words "there is a need for additional;" removing the words "too few" immediately before the

word “drug-free;” and removing the words “too few options for” so that the clause will now read: There is a need for additional options for drug detox and rehabilitation, drug-free shelters and families in crisis.

Furthermore, in the last WHEREAS clause, removing the words “yet, the Committee has seldom met since then” and “some people with lived experience say they have not been properly included” because we know that there was an option for people to properly include stakeholders. So remove the politics from this All-Party Committee.

The work of the first All-Party Committee, Mr. Speaker, showed great progress from then to now and I want the same for this. I want to remove the politics. We should all take credit, all sides of the House, with this All-Party Committee just as the initial All-Party Committee put forward by the former Member for St. John’s Centre, a good recommendation by the former Member. I can say her name, Gerry Rogers, because she’s no longer a Member, but she put forward that recommendation. The All-Party Committee made 54 recommendations. There was some significant progress and improvement, but we need more, and all Members of this Legislature can have input and can celebrate the progress of the All-Party Committee.

**P. LANE:** No, not so everyone can.

**T. OSBORNE:** One further amendment in the THEREFORE BE IT RESOLVED clause, replace the words “government to expedite the work all of the All-Party” with the words “the All-Party Committee to prioritize the work of the” and replacing the word “include” with “engage” and remove the words “so everyone in need has somewhere to turn right away.”

That will now take the politics out of this Committee, I believe, and ensure that this Committee can do the work that the people of Newfoundland and Labrador so deserve, look for additional recommendations like we

saw with the first All-Party Committee, look for recommendations that can truly improve, listen to people with lived experience, listen to groups that can provide lived experience and where all parties in this Legislature can have input into this All-Party Committee.

I did see the Member for Mount Pearl - Southlands saying that not everybody is included. I am absolutely delighted to invite both independent Members to sit and present to the All-Party Committee.

**SOME HON. MEMBERS:** Hear, hear!

**T. OSBORNE:** To make recommendations on stakeholders to the All-Party Committee, as well.

It is an All-Party Committee so it’s a Committee of the parties that are recognized in the Legislature, but I am more than delighted to meet with both independent Members and have them in front of the All-Party Committee to present and provide recommendations of stakeholders as well.

The final THEREFORE BE IT RESOLVED would say that this hon. House urge the All-Party Committee to prioritize the work of the Committee on Mental Health, Substance Use and Addictions; and fully engage people with lived experience; relevant government departments; professionals in health care, policing, justice, corrections, education and social work; community groups, Indigenous communities, faith groups and others who can provide insight and help address a wide array of challenges more effectively.

Mr. Speaker, I will provide these amendments and, hopefully, we can see, as a result of these amendments, this proceed.

**E. JOYCE:** Speaker, point of order.

**SPEAKER:** The hon. the Member for Humber - Bay of Islands.

**E. JOYCE:** Section 49, the minister just stated it's going to be an all-party Committee in one sense, then he said we can make a presentation. If we're good enough to be in this House of Assembly, we are good enough to be on an all-party Committee, because we do have people in our districts that are affected.

So don't diminish us by saying we can make a presentation but other Members in this House from the three parties can be part of the Committee. It's insulting to the people that we represent.

**P. LANE:** Hear, hear!

**SPEAKER:** There's no point of order there, but I'm sure the minister will take your remarks under consideration.

We do have a proposed amendment and will take a recess to review that proposed amendment.

### Recess

**SPEAKER:** Are the House Leaders ready?

Order, please!

Upon review of the proposed amendment, I find that the amendment is not in order.

The hon. the Member for Topsail - Paradise.

**P. DINN:** Thank you, Speaker.

I'm pleased to get up once again – well, not so much pleased, but I got to get up and talk once again about mental health. It's something I do far too often in this House. You know you've stood up many more times when you start to recite the stats over and over and you don't have to read them out.

I presented a petition just earlier again today, one that I've presented many times. It talks to about 100,000 Newfoundlanders and Labradorians who are dealing with mental illness. Of those, there's about 40

per cent that seek mental health and addictions help. We've gone on to realize that over 70 per cent of mental health and addictions issues are developed in childhood and early adolescence. Again, of which only 20 per cent – only 20 per cent – seek help.

That, in itself, tells you of the issues we're dealing with when we deal with mental health and addictions. I would suspect those figures are much higher. I would suspect those are individuals who have identified as having those issues. You're talking, at a minimum, 25 per cent of our population. I would argue it's greater than that.

To get up and speak on mental health, I'll keep doing it as long as I can. As I said, we have Kristi Allan who's been out with her group for 180 weeks, 180 Mondays, in front of this building. So what's happening, I heard the minister talk about the successes. Yes, there have been some successes, and he also alluded to the fact that there's still significant work to be done.

But some of these issues have been going on for quite some time. As I mentioned earlier, they have the stepped-care approach, the minister mentioned that, but I know from psychologists in Newfoundland and Labrador, more than 75 per cent of them have said that the stepped-care approach is not doing the job it should be. They said it's only minimally improving access to mental health and addictions supports.

So that tells us a lot has to be done. You can talk about *Towards Recovery*, and I remember seeing that document, seeing all the lovely green tick marks next to every recommendation. There was one of those recommendations, I believe, asked for 9 per cent of the health care budget to be dedicated to mental health care. That was for 2022. Now, I know last year through budget Estimates, there was no answer to that. It was at 5 per cent, and I would

suspect this year it's still below the recommended amount.

There's a very concrete indication that we're not doing enough when it comes to mental health care and addictions. There have been multiple reports put out there; we talk about people with lived experiences and I agree that they need to be included. They have to be included in any discussion we have about mental health. I believe the Member for Harbour Main earlier today mentioned nowhere without us.

That even goes further when you talk about the Health Accord and you talk about having the right care at the right time, and in the right place. That is so evident when you're dealing with individuals who are having mental health struggles and struggling with addictions. You have to have the right care at the right time and in the right place.

These are not issues that can be dealt with, with a phone number, or with an app. I've had an individual who called me during the last election actually, going around, and her child, a young teenager was dealing with mental health issues, and multiple times brought her to either the Janeway or into the Waterford, and again just sent away. Look, here's a brochure; call these people. Not the help she needed. It was not the right care at the right time at the right place. It was none of that.

She also struggled with getting supports for her child in school. As I noted earlier, 70 per cent of mental illness and addictions issues start in youth and adolescence. Where is that mother now and her child? They're in Nova Scotia. They packed up and left and went to Nova Scotia because the school system over there, the health care system over there provided her child with the supports she needed. I'm sure any parent in this House or any parent in this province are going to do what they can for their child, even if it means packing everything up and moving.

That's one indication. It's really hard to take some of these stories, especially when you want to help them and you're doing all you can but you're not getting them to the point they need to be at. I've had at least in the last month, two parents who have called, one with a teenage daughter and one with a teenage son, and dealing with huge issues where, in our day, your parents would say don't get in with the wrong crowd. I'll use that as saying these individuals have gotten in with the wrong crowd.

They're addicted, they're getting into trouble, they have issues and these parents cannot find any supports for them or any way of helping their child. The system seems to be letting them down, and that's disheartening. That's disheartening when you have children who need help and, as a parent, you can't get them that help.

When you hear other parents and people who are judging them saying well, you must have saw this coming – you must have saw this coming. What kind of parent are you? What kind of parent are you that you allowed your child to get involved like this and go down this path? Again, this goes back with lived experiences. It's so easy for all of us to stand back and judge, but unless you go through it or walk a mile in their shoes and experience the lived experiences of these individuals, only then can you truly, truly realize or at least begin to try and understand what they're going through and then potentially find some solutions.

So when we talk about this All-Party Committee, then it must – there's no maybe, if – it must not just engage people with lived experience, but include people with lived experiences. Those are the individuals you need to hear from. Those are the individuals who can offer solutions. Those are the individuals that will keep the discussion focused on what needs to be done.

As the Minister of Health alluded to, talking about taking the politics out of this. That goes for all of us. I think we all agree this

should not be a political football that we kick around. It should not be that. This should be focused on getting some true results for the individuals who need it. That's what it's about.

Yes, there has been some progress. Yes, the minister realizes there is significant progress that needs to come along, but as we've also heard from individuals with lived experiences, and I've said it many times in this House and I'll say it again – I said it earlier today – it's quoted from a report done by the Canadian Mental Health Association, Newfoundland and Labrador and it's from an individual and it says: Mental health and addiction does not do well on wait-lists, and that's so true. If you ever had to speak with someone who is going through a mental health crisis, it is immediate. It is right there. It is scary. People need support.

As I said earlier today when I presented the petition, and I'll say it again, I am not up here fear mongering; I'm not up here to indicate that there is no hope. There is hope and help for those who need it. You have to reach out. Reach out to someone and talk first.

We will continue to work and push hard to ensure that those supports are better and deal with the long-term continuity of care that so many need.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER (Gambin-Walsh):** The hon. the Member for Torngat Mountains.

**L. EVANS:** Thank you, Speaker.

I'm just going to speak a little bit on the private Member's motion here just calling for supports for mental health that's lacking in the province.

I come from the District of Torngat Mountains. I have been very vocal about access to health care, access to mental

health care. I've been very vocal about the number of suicides we have in my district. When I'm going to speak on a private Member's motion on mental health, I think people expect me to get up and talk a lot about suicide rates in my district.

I don't have to get up and talk about suicide rates in my district because I've spoken on that many times in the House of Assembly. Suicide rates in my district are really, I guess, frightening because they're so high compared to the rest of the province and across Canada.

But one of the things that I've resolved, myself, to do, as the MHA, is to talk about why. Why do we have so much mental health issues across the province, but especially in my district? What we have to do is we have to properly look at mental health. That is what this private Member's motion is trying to get to the heart of: Why do we have mental health issues? It's because of the stressors. The stressors that we have to deal with.

The Health Accord talks about the social determinants of health. I actually wrote this down just now from the Health Accord's blueprint. It says social, economic, and environmental factors have more influence on health, 60 per cent – social, economic and environmental, 60 per cent – than the health care system, 25 per cent, and then of course the other 15 per cent is genetic make-up and biology – the social, economic, and environmental factors.

When we look across the province now, we see a lot of people in crisis and it's not on the surface, mental health, the crisis, but when we look at them, if we actually paid attention, we would look at them in crisis for trying to be able to afford food. Nutritious food – forget about nutritious food for a lot of people now; they're just trying to access food, and that's one of the biggest complaints. If you can't access food, it creates mental health issues.

We also look at housing, all across the province, especially here at the surface, in St. John's where if anything happens, everybody knows about it, is the housing crisis. I'm not talking about Tent City. Tent City is just the tip of the iceberg; it's what we see because they're out there and they're getting attention. What is not getting a lot of attention is all the people who are stressed about being able to access housing. That impacts your mental health, right? Because it's so important.

Then we look at other things, when we look at the social determinants of health. That's what I want to talk about, and I've got to be careful not to go down rabbit holes because in my district – I was being interviewed one day, and I don't think it was on *Open Line* but it was through VOXM. I don't know if I'm allowed to say that. But the person who was interviewing me, I said pick a topic, any topic, and I'll tell you how my district is disenfranchised, is marginalized because of the lack of supports and services chronically year after year, decade after decade.

That's the problem in my district. It's not that we can't cope with life. It's not that we don't have the ability to look after our children and to look after our own health care and look after our lives. That's not the point. The point is all these stressors that's been forced upon the people of my district. So it's so important for people to realize that your quality of life is tied to your mental health, but everything is related.

I talked about access to food, nutritional food. What do I have in the House of Assembly from my petitions? Because you can't keep asking the same old questions over and over again. I have had the Minister of Transportation stand up and we're not going to get the freight boat from the Island.

But over \$1 billion was spent on paving, connecting Labrador communities together. The South Coast is connected to Central Labrador; it's connected to Western Labrador. We're not connected. When did

they take off that freight service? They took it off when the rest of Labrador was connected, and that's only happening now. Over a billion dollars spent on paving. Not a dollar for my district, connecting us. Yet, they'll take off our access to affordable food. Actually, it's not affordable food, but we can actually pay the higher prices. But now when you look in my district, we can't.

Speaker, I was hoping you were going to call me on relevance, but I think you're a little bit too wise for that. I think you see my connection. Access to food is tied to mental health. Access to housing – all the building materials that we need to build and maintain our houses in Northern Labrador is tied to that freight service from the Island.

Torngat Housing was building houses. How did they get their building materials up there? They basically got it on that freight boat. It's kind of, sadly, humorous that that freight boat impacts our mental health. That freight boat, that service that we had to get the goods from the Island up to Northern Labrador is tied to our mental health.

Looking at our youth, looking at CSSD, how many times did I, when I first got elected, raise issues with children in care? One of the things that CSSD talks a lot about is wraparound services.

If you go to my district – Speaker, my sister gave me advice, she said, when you're talking on really emotional issues – and I said everything in my district? She said, yes, try to be calm, Lela. Just try to be calm because you'll get out more information. So I'm going to be calm.

Our children in care: No wraparound services. If you google it, CBC probably still has it posted about the interviews that were done for Roddickton on the Northern Peninsula. The mayor was there and he was being interviewed. He was talking about the loss of their industry, what were they going to do? Their schools were going to close because they didn't have the

industry, they didn't have the economic viability and their population was declining – out-migration. But what came along and saved them? Innu and Inuit children from Northern Labrador being fostered, and the poor old man, who wishes he could probably go back now and delete that, he talked about the revenue that they were getting from looking after our kids.

Wraparound services: There are no wraparound services. Speaker, you go to the parents and you go to the family members of children who are in care, the family members, you go to the communities, they'll say there are no wraparound services. There is nothing to help parents get their kids back.

Now, that's a very blanket statement, but, in actual fact, Speaker, when you go and you talk to the parents, you talk to the grandparents, you talk to the uncles, the aunts, the relatives, the wraparound services are not there that would allow the children to be able to come home.

So one of the things that we're working on – and I say we as Nunatsiavut and with the Innu – is trying to actually keep our children on the North Coast.

Mental health supports: Why do we have to have so many suicides? The thing about it is, I talked a lot in the last couple of days about, I call them, our winners, our leaders who secured monies for three major projects in Northern Labrador, the AIP prize winners. One of them focused directly on the forced eviction. I used to call it the forced relocation, but listening to Lena Onalik, she calls it the forced eviction. Her relatives are part of the people that were forcibly evicted from Hebron. I talk a lot about Okak Bay as well. Nutak was evicted as well, but Nutak is the new place. In actual fact, when the Spanish flu hit Okak and so many people passed away, they went to Nutak.

But, Speaker, the things about it is, we have a history of being marginalized and without overcoming that, we will never be able to get over our mental health issues.

Thank you, Speaker.

**SPEAKER:** The hon. the Minister of Municipal and Provincial Affairs.

**J. HAGGIE:** Thank you very much, Madam Speaker.

I think it's great to be able to have the opportunity to speak to something which, in my time, in a previous portfolio, occupied an enormous part of the first three years of that mandate.

Not to make too many points in a scoring exercise, I think one of the unfortunate side effects of this is any staff who might be listening, I would hate them to feel that this, in any way, should be taken as minimizing their work. We have a very capable staff in mental health and addictions. They even surprised me when it came to the work they did during the pandemic. I think I'd like to take this opportunity, even two years out of the portfolio, to recognize the work of the Mental Health and Addictions directorate within the Department of Health, along with the services that are now in NLHS, but used to be in the regional health authorities.

It is unfortunate, as well, that some could read this as being somewhat dismissive, potentially, of *Towards Recovery*. *Towards Recovery* was a process that had stalled in 2015 and in 2016 it was rebooted. There is at least one Member of the Opposition caucus over there that I recognize as having sat on that intimately and I think we can all take some satisfaction from the work that produced.

It was a foundational document; all 54 recommendations have been largely finished. They are works in progress and everybody acknowledged that at the time. One of the things it did do, which is

referenced specifically in this PMR, is the issue of lived experience. We incorporated that, both into testimony, as it were, that the All-Party Committee at the time received. It was baked into it and, as a result of this, we became only the second province to put in place a Recovery Council. The sole qualification of which was lived experience, either directly with a mental health or addictions issue or as a family member thereof. That was an invaluable source and it reported directly to the minister of the day, unfiltered. So, again, I would argue that we baked that in.

Indeed, throughout the system if you look at Doorways, which didn't exist in 2016, now in 85 communities, a walk-in, drop-in mental health service. It's a point of entry, you can move on to other things and if you're kind of between appointments and having a problem, you can go there.

These teams have a peer advisor, paid for by the RHA, who is a person with lived experience who identifies as someone with mental health or, in this situation, addictions experience, and is part of the care team. They are people who can relate to clients.

So I would argue that lived experience is already baked in, and I think whilst it does no harm to repeat it, I think the impression one could be left with, having listened to the debate, is that it simply doesn't exist.

I will take issue with one of the comments about stepped care, which was a program derived through Memorial University, it is a made-in-Newfoundland-and-Labrador solution. It was cloned for use in mental health, it was accepted by everybody on the All-Party Committee, from all parties and from all stakeholders.

The key that may enable it to work even faster is step 5. Step 5 revolves around the Waterford. It would be very tempting for me at this point to go down why, for 10 years, another government chose to do nothing about that at a time when they had record

revenues. We have done that. It is built, it is connected to the Health Science Centre, it integrates physical and mental health in one facility. It's part of a process of integration that's already begun. There are integrated units within the Health Sciences Centre providing a mix of physical and psychological and psychiatric care, for example, for eating disorders. It works.

But the new adult mental health and addictions facility cost less to build than we pay in rate mitigation for a project that they don't like me mentioning so I won't, out of courtesy, not wanting to provoke anybody. But it was a major capital expense and it's costing us \$740 million a year, the cost of a brand new, acute care facility every year.

I do have some issues with the way the resolution is worded, and in the interests of time, rather than speak on a subject, which is really dear to my heart – and I have several pages of notes here – I would like to introduce three amendments, sequentially.

I would propose, firstly, in the seventh WHEREAS clause, substituting the words “there are too few” with the words “people in the province have a need for additional,” removing the words “too few” immediately before the word “drug-free” and remove the words “too few options for.” So this clause would now read: People in the province have a need for additional options for drug detox and rehabilitation, drug-free shelters and families in crisis.

My second amendment, in the last WHEREAS clause, replacing the words “yet the Committee has seldom met since then” with the words “the Committee should meet more often.” So it now reads as: And WHEREAS the All-Party Committee on Mental Health, Substance Use and Addictions was announced on September 1, 2023, to look at prevention, early intervention, treatment and support, with an emphasis on youth and young adults, on the social determinants of health, such as housing, poverty and education, the

Committee should meet more often, and some people with lived experience say they have not been properly included.

And amendment three, in the THEREFOR BE IT RESOLVED clause, replacing the word “include” with “engage with” and removing the words “so everyone in need has somewhere to turn right away.” So the clause now reads as: THEREFORE BE IT RESOLVED that this hon. House urge the government to expedite the work of the All-Party Committee on Mental Health, Substance Use and Addictions, and fully engage people with lived experience; relevant government departments; professionals in health care, policing, justice, corrections, education and social work; community groups, Indigenous communities, faith groups and others who can provide insight to help address the wide array of challenges more effectively.

I have the appropriate number of copies here.

**SPEAKER:** Three amendments have been moved by the Minister of Municipal and Provincial Affairs, we will now recess to review the amendments.

### Recess

**SPEAKER:** Is the Deputy Government House Leader ready?

Order, please!

I rule that the proposed amendments are in order.

The hon. the Minister of Municipal and Provincial Affairs.

**J. HAGGIE:** Thank you very much, Speaker.

I think this improves the PMR. I think the general gist of it in terms of getting a speedy conclusion to an APC, an all-party Committee, is laudable. I just want to

actually add one more piece. We’ve tried to use evidence to inform our policies in every department and certainly in Health.

One piece of evidence I’d like to bring in relates to use of language, and I can be a bit of a pedant sometimes in terms of that. But Members on the opposite side refer to overdose deaths. Overdose is someone who takes too much, either accidentally or deliberately. What evidence does seem to exist is that that is actually not what happened.

If you look at the toxicology from drug deaths in this province, the average individual has at least five controlled drugs in their system. Not one, five, and it’s a cocktail. These individuals are actually dying from poisoning. They do not have a safe drug supply, there is no such thing as an honest, reliable drug dealer, and there are no standards for illicit drugs.

So they do not know what it is they’re injecting and their illness prevents them from thinking beyond getting rid of the cravings that they have. These individuals die because their drugs are deliberately cut with toxic substances from horse tranquilizers to baking powder to flour to cyanide. All of those things have been found in this cocktail. It does not matter. You cannot get safe drugs, and that is the big challenge.

That leads us down a whole other discussion, and it’d be interesting to see what the All-Party Committee on Mental Health, Substance Use and Addictions comes up with because nowhere in this world, let alone this country, has come up with an answer to that that actually works and isn’t ideologically arguable.

So with that, I think we just set the record straight. These people are killed. They are poisoned.

Thank you.

**SPEAKER:** The hon. the Member for St. John's Centre.

**J. DINN:** Thank you, Speaker.

I'll start this – I'm troubled by the amendment that basically deletes – if I understand it correctly here – the line so that everyone in need has somewhere to turn right away. I think, in many ways, the crux of this private Member's motion was to make sure that people had timely access to the supports they need for their mental health and addictions.

It's troubling that that's one of the key lines that is removed. Without it, it basically waters down that motion. There is no timeline as to when people might have access. They will basically provide insight to help address the wider range of challenges more effectively. I would argue that one of the key challenges, Speaker, is time, is access, when and where appropriate to help, when and where it's needed.

At least if you got turn to right away, it may not beset a timeline, a month or a week or a day, but it's certainly a lot more definitive than leaving it out.

I say this because I've referenced this back earlier, an email sent by NL Health Services to principals and guidance counsellors in Central Newfoundland which basically impacts the timeline with which students can access mental health. Basically, to bring your attention regarding the heavy backlog of children with mental health problems waiting for my assessment in the pediatric clinic, until further notice, kindly defer sending new consultation requests to me for children with ADHD, learning disability, oppositional defiant behaviour, disruptive behaviour, anxiety, depression and autism.

So, basically, I would have to argue here that the key thing, the key factor that's going to impact the ability of these children to access mental health is timeliness and the

lack of resources – and I don't know if that's why that phrase was taken out because it would put an onus on government to actually address that timeline, to actually provide the necessary human resources to address that timeline.

It's great to talk about the array of challenges. I would argue that the array of challenges can be boiled down to a lack of individual people, of trained specialists. We have 105 people short in CSSD of the social workers. We know that there's a key issue there. That's the biggest one that's affecting timeliness.

I will say this, when I talked to school counsellors – I still talk to school counsellors and I talked to school counsellors when I was president. If you're in a large urban area, you've got a workload but if you're a counsellor that's in a rural section of the province, you might be responsible for several schools. So think about this and we would often say if a student is going to have a crisis, he or she better make sure that it happens when the counsellor is visiting the school for that day.

So it's about ratio. Now, while we're debating this, I texted a few counsellors that I had the opportunity to work with about, like, would it help if you had clerical assistance, people to actually do the booking for you, to help you send out the correspondences, the filing? No school counsellor has that. We're all blessed here, as MHAs, to have people to take care of a lot of that work for us. A school counsellor doesn't. It's all on them, in addition to the actual work that they do.

Now, one counsellor said yes, something like that would help. The other counsellor said, no, we need more counsellors, a lower ratio. Too many assessments, too much mental crisis, counsellors are now triaging, which I would assume means we've got to determine which ones need to get the attention first, which means that other students, in this case, are not getting it.

The burnout is dangerous. We can't do anything proactive to more or less create good mental health and to talk about it. We can't get the crisis done. It's very sad; too much behaviour.

Now that's from counsellors, ones I know, very professional people who are deeply concerned about the students that came across through their door and they are frustrated.

I thought the motion was a pretty decent one because it talked about the need to address in practical ways. But removing that, really sends a clear message that we're not interested, or the government is not interested in trying to address the timeliness factor of it. That's troubling. That is truly troubling, especially when we had, Speaker, in this House, correspondence from a pediatrician that they're already being drowned in the number of children waiting for help and if you can't address it at the school level, it's not that these problems magically disappear when they finish school. They're going to carry them with them and they become lifelong issues.

So I will say this, and I want to emphasize something that my colleague from Torngat Mountains spoke about because back on April 30, on *The Current*, they were talking about the recriminalization of certain substances in BC, how British Columbia had walked back a little bit from that. It's interesting because one of the people they interviewed about that was Corey Ranger who is president of the Harm Reduction Nurses Association and it's interesting what he spoke to.

He talked about homelessness had increased significantly over the last two years; the drug supply has worsened significantly over the last two years or since the beginning of the pandemic. So we could actually address those root causes and applying more enforcement and criminalization to people, which is something we've done for 100 years-plus in

Canada, has not been shown to actually decrease public drug consumption.

So if we could actually target the housing crisis, the affordability crisis, the mental health crisis, the unregulated drug poisoning crisis, these colliding wicked problems that we have in British Columbia; instead, we're looking at in a short-term way.

He goes on. Housing, the very thing we've been speaking about here, having adequate housing, not shelters. Not shelters that have, on more than one occasion, proven to be unsafe for people and have done nothing to help them with their addictions and mental health. But the fact is, it comes down to the lack of staffing at times, the lack of access to mental health care.

Address these issues, address the human resources piece. We can build a dome. We can have a space for people to walk about. We can talk about adding new beds, building new hospitals, but unless we have people there to help, it's not going to solve the problem.

I'll finish with this, to me, access, timely access and address the other pathologies of poverty, if you will.

Thank you.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Leader of the Official Opposition.

**T. WAKEHAM:** Thank you, Speaker.

I want to speak quickly, as I have approximately four minutes here.

I want to highlight four words that are in this particular motion: expedite, include and right away. Those are the key words in this entire Member's resolution that we put forward: expedite, include, right away.

That's what we're talking about here. We're talking about the fact that we all know we have an issue. We all know there are problems. But at the same time, it's not just good enough to say we're going to set up another all-party Committee.

We've studied and studied and studied and we have lots of reports out there that are in libraries or in departments sitting on shelves that have never been acted upon. What the people who are impacted here want to know is what action is going to be taken. When we talk about action, we talk about the social determinants of health that have been mentioned here. But we also talk about the people that are out there right now providing these services.

I spent a career in health care, and health care, when you break it down, comes down to people helping people. That's exactly what we need. We need more people helping people.

**SOME HON. MEMBERS:** Hear, hear!

**T. WAKEHAM:** So we can bring it down, let's get it down, but let's expedite this process. Let's include the groups that are excluded and let's make sure that people have somewhere to turn right away. Those were the key messages that we're sending today to everyone.

I want to stand here, before I sit down, and simply say to all of the relevant government departments, to all of the professionals in health care, policing, justice, corrections, education and social work, community groups, Indigenous communities, faith groups and others, I want to say thank you – thank you for the work you're doing.

**SOME HON. MEMBERS:** Hear, hear!

**T. WAKEHAM:** Thank you for the work you're doing on behalf of the people of Newfoundland and Labrador who need your help. I certainly hope that coming out of this we pass this resolution without the

amendments because we want not to engage with you, we want to include you in this process. That's what we're talking about here, so amendment that says, simply, "engage," that's why the word "include" is so important and that's why the word "expedite" is so important and that's why "somewhere to turn right away" is so important.

Thank you, Speaker.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** The hon. the Member for Conception Bay South.

**B. PETTEN:** Thank you, Speaker.

First of all, I want to thank everyone that got up and spoke today. It's always interesting, on these motions we speak and you don't know where the conversation is going to go, but I think it has been a lot of good commentary. We will not always agree. There has never been a Legislature yet that's going to agree on everything, and I don't think we're going to start here today, but I do appreciate everyone's commentary and it's always healthy to getting it to the next step.

Speaker, we owe it to the people of the province, we owe it to those families, we owe it those that are dealing with mental health issues, have mental health issues in their families, are dealing with drug issues, families with drug matters, dealing with suicides; these issues are real.

The Minister of Health said about politicizing, and I'll tick that in a second, but these are real. I'm not creating those stories. I'm not concocting those stories. I think if you went to the 40 Members in the House, we can all tell you similar stories. It's not made up.

The former minister of Health, who happened to sit on the All-Party Committee for *Towards Recovery*, we heard a lot of

stories, I remember. The Minister of Labrador Affairs, and Indigenous Affairs, she also sat on the Committee with us.

Actually, on a side note, her father actually flew us into Nain for one of our All-Party Committee meetings and I always remember that day. It was a draining experience, because we sat in a room – and the minister, I'm sure, can recall quite well, it was very emotional. It was very raw. It was heavy – it was heavy. It was something that, for many years since that, I don't forget.

But those stories are still being told out there. Those issues are still real. We haven't accomplished where we need to be, not even remotely close.

We started up a new All-Party Committee recently in September. There's been some back and forth about the amount of times we meet and how substantive the meetings have been. Now, I know they've picked up lately and we're moving forward, but people are getting exhausted with telling their story. People are going to one mental health counsellor, they're going to one psychologist, they're going to one psychiatrist. They're lucky. They're waiting. They might get in to see another psychologist. They're telling all different people. There's no continuity of care. They're frustrated.

The minister gets up and says he asked us to submit groups to him. The minister knows full well what happens there, like we've done before. We have provincial bodies that recognize – yesterday, I think youturn presented, Guardians of Recovery presented. We'll get Choices for Youth, we'll get I'm sure people from the penitentiary come in and we'll have health professionals come in. We'll hear some real-life stories because the plan, I think, was to hear from people across the province, not only in St. John's. The province is a lot bigger than St. John's and the Avalon Peninsula. This province is big; rural Newfoundland needs to have a voice at the table, too. We should

go meet with them because there are groups out there as well.

It's not politicizing. What are we going to give them a list of people to go in and retraumatize their stories and tell their stories again over and over again? But they're not getting the results, so they're coming to us. We are their voice; we are their advocates. There are 40 advocates in this House of Assembly advocating for those people on a daily basis. We got a Systems Navigator that helps those people. We are trying to get them to recovery. We're trying to get them housing. This is what we do. So I don't think there's any need of putting them through the rigour and the stress and the strain of coming and sitting in front of an All-Party Committee.

The minister's commentary of being political and how he asked us on this date and this date and this date, I mean, that's nothing further from the truth. We knew full well when we were meeting with these provincial groups and we've been fully expecting that – we've been asking when are you bringing these groups in to meet with us? We all knew the groups; he knows that, too, but that's politicizing it.

People don't want this to be politicized. We're looking for action because our government, our leaders said publicly many times – and I think it's a great position to be in – we want to be about people more than the politics. That's what this is all about. It's about people, not politics.

The minister wants to try to turn it into politics. That's wrong. It's not where we need to be. If we're not going to solve any problems at that, where are we going to get to? We're going to get to where we're to now where we're getting bombarded now. There are many meeting requests coming in everyday meeting with a new group, which is fine. We waited eight months until it was called out here in the House. Then, all of a sudden, we were bombarded with meetings and lo and behold while the House was in

session. Anyway, that's another part I can't understand.

We can't all just easily leave the House. We asked do you want to get political and throw us a shot back – he asked us in one All-Party Committee, do you mind if we get together probably for a short meeting every now and then when the House is in session? We do that all the time, 10, 15, 20 minutes maybe. We're all just running out to the Clerk's boardroom or something and have a conversation.

These are full-on presentations. One went on yesterday for an hour to an hour and a half. I couldn't leave the House. We had someone substituting and then the minister is getting up and he's saying we're politicizing. Then there are meeting requests, meeting requests, meetings requests. It's fine, but where were they to for eight months, and are anyone any further ahead? Like, realistically, we've got to realize – this Committee, we sat on it because we were asked to sit on it. This Committee was formed because people were on that step, day after day after day because they were crying out for help. Their loved ones were dying. They had loved ones there with overdoses. They had suicides. They were on that step crying out for help. When the pressures got to the point that the government had to act, the minister, to put the fire out – and it's fine he done it – he committed to forming an All-Party Committee.

There'd be no All-Party Committee ever formed without those people standing on the step and doing what they're doing. But are they getting the results that they looked for? It bought government time. The saying goes, you punted, you kicked the can down the road. That's what you're doing. You bought time.

So let's be honest about this. Let's be straight forward and be honest with the people of this province. That's what we did. We had a *Towards Recovery* report. If you

dug into that report, similar recommendations are going to come out of this one. I know this is more youth oriented but at the end of the day we dealt with youth in the *Towards Recovery* report, too. A lot of this is report after report after report but it buys government time.

People on the street and families with people that are in need, that's not what they need. They need action. They need results. They need help. The minister can get up and say he asked us for this this, submit lists of people there and submit lists of people there. But would he be open to having a lineup come in through the door, one after another and tell their heartbreaking story? I don't know how much we can listen to because it is heartbreaking.

But I don't think that that's fair to those people. We know their stories. The minister knows the stories. Me and him are copied on too many emails to mention. He knows exactly what I'm talking about. I'm hearing them daily. As Health critic, I hear them daily, whether they're phone calls or emails, Facebook, you name it. The minister is copied on many of the same emails.

We don't need to politicize this, as the minister said. We want action. We want to speak for people. These groups are coming to us just like they're coming to the minister and their government. In Opposition, we have a role to do and we have to speak up for those people. Private Members' resolutions are that opportunity.

A week ago or two weeks ago, we spoke about mental health and addictions issues. We had a full day committed to it and we committed, also to them groups, that we would bring our PMR. There are lots of issues out there – lots of issues out there. We committed to them that we would have the PMR to bring attention to their issues, bring attention to the matters, things that matter to them.

So the minister can stand up again – and I'll repeat it – and try to be political and politicize; that's not where we're to. We don't want people turned away. We want things expedited. People need action now. They don't need these words and these theatrics. The former minister of Health said they're not killed; they're poisoned. What does that really mean? What does that mean to the family that had a child die of an overdose? Really?

If you're a parent – that's a sobering question I'm asking everyone in this House and everyone listening. What does it matter if you lost a child or loved one to an overdose? If you're going to get up and do a cliché – they're not dying; they're poisoned – no one is saying that may not be medically correct. Is that what the people out there need to hear? Really, is that what we need to hear? Is that the level we need to bring this House to, that we've got to stand up in this House and make that comment?

I don't know about anyone else, but I find it offensive. I think any family out there, any family member out there, they should also find it offensive. It's not good enough, Speaker. It's not good enough, and I challenge anyone around this House, if you ever had a family member or someone close to you die of an overdose? Because if you did, you would not be making comments like that. You would not be looking over as the Health Minister and accuse us of being political.

I speak from very close emotions; you might be able to tell it in my voice here now. This is not political to me, trust you me, this is not political to me. It's almost destroyed my family, Minister. For you to call me being political and for you to be saying people are poisoned, I think it's a low blow and it's uncalled for and it's not satisfactory. You've got your amendments brought in here, you've got our motion made useless for what we want, because we want action right now, not down the road. We want to be

expediting, not to be engaging. That's not the answer, Speaker.

So we may very well have to vote against our own motion, but we're strong in what we stand for, we believe in what we stand for, and we're not giving in to this rhetoric we hear across the way. We're reaching out, we're pleading out for help, and we want government to support this. Unfortunately, government want to play a game, and that's the problem we're into now. We're probably faced with this problem until this government is finally removed from power. That won't be long.

Thank you.

**SOME HON. MEMBERS:** Hear, hear!

**SPEAKER:** Order, please!

We'll now vote on the amendment.

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**SPEAKER:** All those against, 'nay.'

**SOME HON. MEMBERS:** Nay.

**SPEAKER:** The amendment is carried.

On motion, amendment carried.

**SPEAKER:** We will now vote on the amended motion.

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**SPEAKER:** All those against, 'nay.'

**SOME HON. MEMBERS:** Nay.

**SPEAKER:** Motion carried.

**AN HON. MEMBER:** Division.

**SPEAKER:** Division has been called.

Call in the Members.

**Division**

**SPEAKER:** Order, please!

All those in favour of the amended motion, please rise.

**CLERK:** Andrew Furey, Lisa Dempster, John Haggie, Gerry Byrne, Bernard Davis, Fred Hutton, Tom Osborne, Siobhan Coady, Pam Parsons, Elvis Loveless, Krista Lynn Howell, Sarah Stoodley, John Abbott, Paul Pike, Sherry Gambin-Walsh, Lucy Stoyles, Perry Trimper.

**SPEAKER:** All those against the amended motion, please rise.

**CLERK:** Tony Wakeham, Barry Petten, Paul Dinn, Helen Conway Ottenheimer, Joedy Wall, Jeff Dwyer, Chris Tibbs, Loyola O'Driscoll, Pleaman Forsey, Jim McKenna, James Dinn, Jordan Brown, Lela Evans, Eddie Joyce, Paul Lane.

Speaker, the ayes: 17; the nays: 15.

**SPEAKER:** I declare the amended motion is carried.

The hon. the Deputy Government House Leader.

**L. DEMPSTER:** Thank you, Speaker.

I move, seconded by the Minister of Municipal and Provincial Affairs, that this House do now adjourn.

**SPEAKER:** The motion is that this House do now adjourn.

Is it the pleasure of the House to adopt the motion?

All those in favour, 'aye.'

**SOME HON. MEMBERS:** Aye.

**SPEAKER:** All those against, 'nay.'

Motion carried.

This House do stand adjourned until 1:30 p.m. tomorrow.