

ORAL QUESTION—KEVIN O'REILLY, MLA FRAME LAKE

QUESTION 585-19(2): PUBLIC HEALTH TRENDS

February 24, 2021

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MR. O'REILLY: Merci, Monsieur le President. My question is for the Minister of Health and Social Services. In my statement, I referred to the conditions described in the Health and Social Services System 2019-2020 Annual Report. The report portrays some very mixed results here in the NWT, where we still seem to be lagging behind many other Canadian jurisdictions. Can the Minister describe for us how this tracking of some indicators feeds into planning and delivery of healthcare programs and services, particularly around mental health and addictions? Mahsi, Mr. Speaker.

MR. SPEAKER: Thank you, Member for Frame Lake. Minister of Health and Social Services.

HON. JULIE GREEN: Thank you, Mr. Speaker. The department uses monitoring of indicators as an ongoing means to both provide program oversight and to provide planning in all areas, including mental health and addictions. Some of the things we look at include usage rates, wait times, common presenting concerns, topics of prevention and promotion efforts and that kind of thing to get a feel for what is going on. The data that is obtained is used to monitor performance and also adherence to the program mandate: does the data show that the program is properly focused and delivering the services for which it was intended? We also find from the data that we are able to track trends and ultimately move that into system planning and professional development and staffing needs, so that our staff is up to date.

One of the areas in which we've had a lot of success and which I mentioned earlier today is stepped care. This is an approach where we overhauled the Community Counselling Program and decided that, instead of making a client a series of appointments over weeks or months, we would make appointments available on the same day so that there would be no waiting list. If you need an appointment, you could go and get an appointment. The waiting list or a long wait time would not be a barrier to being seen. This is the kind of innovation that was put forward in the mental wellness and addictions recovery plan and which we have now implemented, so that is an overview of how the data and the planning fit together. Thank you.

MR. O'REILLY: I want to thank the Minister for that. I know that she loves evidence and she loves making decisions based on evidence, so I appreciate that. Some of the more recent statistics during the ongoing pandemic paint a rather bleak picture of substance abuse, predominantly alcohol abuse, and overall health, mental health, and hospitalizations, family violence, child neglect. In June 2019, the Department of Health and Social Services released the mental wellness and addictions recovery action plan that the Minister referenced. Can the Minister tell us how this action plan is being adjusted to take into account findings of social conditions during the pandemic?

HON. JULIE GREEN: The current mental wellness and addictions recovery plan expires next month, so there is no point, at this point, to try to bring new actions into it. Instead, what we're doing at this point is we are looking at other ways to capture information and trends, as I mentioned before, and bring those into the everyday operation of the department. The Member referenced the social indicators that were produced for the first three months of the pandemic. It's my understanding that the department is getting ready to produce another of those reports. The thing about that first report is that it only covered three months, and so it wasn't a long enough set of indicators to really make firm policy decisions on. The intention is to continue repeating these social indicators over time, so that we get a good grasp of what needs to be done on a priority basis next.

MR. O'REILLY: I want to thank the Minister for that. As this year's budget address points out, though, 30 percent of GNWT operation spending is devoted to health and social programs and services, and in the budget that is proposed for next year, it is going to go up another \$75 million. The Minister of Finance said the current expenditure pattern is unsustainable and that a plan was being developed to stabilize health and social services costs. I am quite concerned about what that plan is going to look like, and I don't want it to lead to a reduction in Health and Social Services programs. Can the Minister of Health and Social Services describe what is going on with this sustainability plan for the Northwest Territories Health and Social Services Authority and tell us when it's going to be available to the public?

HON. JULIE GREEN: There is no question that the Health and Social Services system is under enormous financial pressure. The accumulated deficit is \$120.7 million. That is within the health authorities, the NTHSSA, the Hay River HSSA, and the Tlicho Community Services Agency. Sustainability is a very complex problem and, as the Member says, the place to start is not by cutting, but rather to look at what the drivers of spending are and what the value is we get out of that spending. This is really the core of the government renewal initiative, which my colleague the Minister of Finance has talked about, and also within the sustainability plan. What is going to happen is that there will be a dedicated group of three or four staff who will engage in looking at the detail of what we're spending money on and what value we're getting for that money and whether there are ways to reorganize ourselves to spend less money on those particular things.

I'm sure the Member is aware that fiscal sustainability is a problem in healthcare systems all across Canada and has been the subject of federal negotiations for an increase to the Canada Health Transfer, which we in the North don't get. We get our money through the FFT. However, we share this problem that they have. What we are going to do is look at, as I mentioned, internal costs containment, operation review in quality improvement, and the funding and service level so that we can get a grip on what we're spending and why we're spending it. This is not a public plan; this is an operational plan. We have offered to brief the Standing Committee on Social Development on a confidential basis about this plan and to answer questions that they have about that, and that offer still stands.

MR. SPEAKER: Thank you, Minister. Final supplementary. Member for Frame Lake.

MR. O'REILLY: Merci, Monsieur le President. I want to thank the Minister for that, and I look forward to getting that briefing, but I still think it should be made public somehow. In discussing ongoing wellness and mental health needs with some community leaders, there doesn't seem to be enough resources at the local level for planning and service delivery. Can the Minister describe what resources and services are available to communities for local solutions to mental health and addictions? Mahsi, Mr. Speaker.

HON. JULIE GREEN: We are now in year three of four of the children and youth care counselling program, which is a joint initiative with the Department of Education, Culture and Employment, and those counsellors are in place throughout Yellowknife and north to the Beaufort Sea. The last area that will be brought online is the South Slave. We have the Community Counselling Program, which is available in 19 communities, and then available in different ways such as telephone, virtual, and occasional visits to the remaining communities. We have the dedicated funds of on-the-land healing peer support and suicide prevention. We have access to facility-based addictions treatment. We have a lot of programs and a lot of variety at our disposal. We're looking forward to having the results of the addictions recovery survey to get the on-the-ground look about whether the supports we are offering are those that are most needed at this point. Could we do things differently? Of course we could, but we do now have a pretty robust set of programs in place and we are interested in hearing from the public about what else they need. Thank you.