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LEGISLATIVE ASSEMBLY  
OF  
PRINCE EDWARD ISLAND

RESPONSES TO QUESTIONS AND ORAL QUESTION PERIOD  
(PRELIMINARY PROCEEDINGS)

FOR

TUESDAY, 12 MARCH 2024



[1:16 p.m.]

[Hon. D. Compton in the chair]

Responses to Questions Taken as Notice

**Speaker:** The hon. Minister of Housing, Land and Communities.

**Hon. R. Lantz:** Thank you, Madam Speaker, and bear with me if I go a little long, but I think this is important to address. It's with regard to a line of questioning last week from the third party about some land transactions.

Last week, the Member from New Haven-Rocky Point stated in his question preamble that holding the mortgage is, in the eyes of the *Lands Protection Act, P.E.I.*, considered the same as owning the land, which, as non-residents, would be a clear violation of the *Lands Protection Act, P.E.I.*

In a subsequent question from the Member from Borden-Kinkora, he said that the Ontario people took a mortgage over both parcels, giving them a beneficial interest in the parcels, even though they never received Cabinet approval – this would be in contravention of the *Lands Protection Act, P.E.I.* – and asked government: Will we intervene and direct IRAC to conduct an investigation into the transactions?

Well, as was stated, IRAC is responsible for administration of the *Lands Protection Act, P.E.I.*, so my office reached out to them for their view on the hon. member's claims of contravention. IRAC informed my office that the *Lands Protection Act, P.E.I.* has not been contravened in either of these cases.

IRAC has indicated that they rely on precedent set from a PEI Court of Appeals decision circa 1987. In that, the focus deals with a beneficial right to the usage, possession, or occupation of the property, and whether that right is a present right.

In the case of a private mortgagee or mortgage holder, there is no present right to the use, possession, or occupation of a property over which it holds a mortgage. If a mortgagee seeks to enforce the default provisions of its mortgage and take possession of the property, then and only

then would Executive Council approval be required.

So, there is in fact no contravention of the *Lands Protection Act, P.E.I.* here, and we'd like to correct the record on that. This received media coverage, but it's important, when serious allegations are made with such certainty, that they be clearly refuted with the facts.

Thank you, Madam Speaker.

Questions by Members

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much, Madam Speaker.

I'm very concerned with government's direction on health care, and my question is for the Minister of Health.

All around us, we see symptoms of collapse: an emergency declared by doctors at Prince County Hospital, a vast and growing number of Islanders without access to a family physician, long wait times for basic surgery, and difficulties getting specialized care on the mainland.

In the middle of all this, the government has decided to spend millions on a medical school and divert resources from the health care needs of people.

**Effects of medical school on health care system**

My question is: Why is the government spending so much energy on a medical school when, all around us, the health care system is collapsing?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

[1:20 p.m.]

I always welcome an opportunity to talk about the medical school. In some of my comments the other day with regards to a motion – if you want to google “Royal

Bank, physician, supply, Canada” to read that report, which states in 2021, there were more than 2,400 family physician positions posted on government websites across Canada. That same year, we graduated less than 1,500 family physicians from programs in Canada. Obviously, there’s a deficiency there.

Our population has grown in Canada from 30 million to 41 million. We’re the only province in Canada that doesn’t have a medical school. The medical schools planned for Simon Fraser and Ontario will not help serve people on PEI and in Atlantic Canada.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you, Madam Speaker.

Of course, much of the attention surrounding the health care crisis is focused around doctors, but the problems are much deeper than that. Last December, the PEI Nurses’ Union wrote to the government. I will table that letter later. According to the Nurses’ Union, there were 349 vacant nursing positions within Health PEI late last year.

A question to the minister: What is that number now?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I don’t have that number at my fingertips. Obviously, it’s a moving number. We have made steps to fill that gap. We have 68 nursing grads at UPEI; 32 in the accelerated program. We are continuing to work with IENs in order to fill that gap in our staffing. We know we need more nurses. We’ve pulled every lever that we can. If the hon. member has any suggestions, I would gladly take them.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much, Madam Speaker.

But the minister should know those numbers. He should know the numbers of nursing vacancies on Prince Edward Island because that’s why we’re in the situation we’re in right now.

We all know that the medical school is going to drain resources from the available pool of physicians available to Islanders, but what we don’t know is how many nursing resources will be required at the medical school.

Minister, what nursing complement is required to support the proposed medical school?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you.

One thing we don’t talk about with regards to the medical school is the virtual lab and the simulation lab that will be in the facility that will allow our nursing staff on PEI to train up and to maintain their skills. A great example would be the PCH and critical care services; they now have a place to go to maintain their skills and upskill what they have.

The nursing program at UPEI is full to the max. We would want to make it bigger to have more students, but we are cramped for space. The medical school will allow us to serve the nursing students that we have, the medical students, the psychology program, and actually, the bachelor of paramedicine program.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much, Madam Speaker.

But that, again, did not answer my question.

According to the Nurses' Union, their current shortages are causing a massive strain on the system. They say that the dreadful situation is leading to burnout, work-related stress, and an inability to get time off and vacation.

My question: At what point does this government realize that the health care foundation is crumbling and that there is no time to waste all this energy and resources on a Conservative vanity project?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I'm not sure there's a question in there. The medical school is important. We have to control our own destiny. We understand our nursing shortage and how difficult it is for them to maintain services. We see it every day at lots of facilities, including the PCH; Colville Manor. Alberton has nursing shortages. We see it across our system.

We're trying to address those nursing vacancies with greater programs for bridging. We've signed a deal with the University of Saskatoon in order to bridge nurses – international nurses – in a timely fashion. What used to take 13 months will now take three months.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much, Madam Speaker.

There was a question in there and there was a question in the previous three. The problem is there was no answer to any of those questions.

We know this government likes flashy announcements. They buy \$2.5 million of advertising from the NHL and call it a triumph. They oversee massive overruns like the Canada Games projects. But when it comes to the hard work, well, this government is just not up to the job.

Again, will the minister consider a pause on the medical school while you get our house in order when it comes to nursing, emergency rooms, doctors, and long-term care?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I think we're very fortunate to have hired Dr. Preston Smith. The Medical Society has actually celebrated that hire. One thing with Dr. Smith is he's done a lot of this work before. He's brought the medical school in Saskatchewan from 60 seats to 100, I think in less than two years. I think we have a great leader there to drive physician engagement and continue to talk to our medical staff and our health care system.

[1:25 p.m.]

The best time to build a medical school was 10 years. The second best time is today.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much, Madam Speaker.

The fact of the matter, and as the nurses say: "Our members are carrying the burdens of a broken system."

My question to the minister: At what point does the minister agree that he is leading a broken system, and instead of pursuing another ribbon cutting and another press release, he should deal with the basics?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I can assure you that our staff, both in the Department of Health and Wellness and the staff at Health PEI, work every single day to maintain our service. Our health care system is 24/7, and the people who work in it are 24/7. We continue to work on labour

shortages and managing our system as best we can under trying circumstances. I'm very pleased with some of the initiatives that are starting to bear fruit, so we'll continue to work on those.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you, Madam Speaker.

We definitely don't have 24/7 health care service in West Prince.

Another question for the Minister of Health. Last week, I asked the minister why he bought a plane ticket to Denmark that cost nearly \$7,000. Does the minister seriously believe that a \$7,000 plane ticket for himself makes sense?

#### **Health minister's trip to Denmark (further)**

The nurses say that they are, and to quote again, "carrying the burdens of a broken system." So, how on earth does a \$7,000 plane ticket send the appropriate signal of determination to the people on the front lines of health care on Prince Edward Island?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

Again, back to the trip, I do have a list of some of the initiatives that resulted from that trip. I will table it; I can't just find it right now at the tip of my fingers.

Denmark is a leader in elder care. We know we have issues both in our health care system and our long-term care system with bed block, and we need to move those people out of hospital in order to provide better care, both at the hospital and in the ER. We know that seniors don't belong in hospitals; they do better when they're in the proper care of long-term care homes.

So, it's an important initiative, it's an important part of our health care system, and

it's an important part of our elderly population on Prince Edward Island.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much, Madam Speaker.

The minister spent \$30,000 on transportation costs to visit the dementia village in Denmark.

#### **Health recruitment missions**

According to the Nurses' Union, there have been three recruitment missions to Dubai. Will the minister please tell the House how many people have gone on those government-sponsored missions to Dubai?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I'd rather focus on the hires that we're doing in those locations. Those two trips have resulted – I think I've talked about it in the House before – with over 1,400 applications. We've narrowed that down to 140. We made 47 offers on our last trip. I think the total is now over 100 that are starting to arrive in PEI. Talk about vacancies today; there's 100 of whatever that number is. That's a good start.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** So, further to the Dubai missions, the Nurses' Union says that three recruitment missions have been made, and according to the union, no nurses have arrived. I will table that page from the nurses' presentation later.

Question to the minister: Is this information from the union accurate?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

Yes, the first cohort is coming in under the RCW designation. It took us some time; it was July of last year we made those changes to allow the IEN pathway to Prince Edward Island. The initial cohort will come into our system as RCWs and bridge up to a nursing program.

Back to the University of Saskatchewan and the agreement that we have from them, we'll move them through the system. It's a great introductory to the system. They've shown up at Beach Grove Home in the middle of a storm. So, we'd like to thank them for contributing to our health care system.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Charlottetown-West Royalty.

**G. McNeilly:** Thank you, Madam Speaker.

Question to the Minister of Health.

The Nurses' Union has written several letters to the Auditor General requesting an urgent investigation into the use and cost of private nursing agencies in Prince Edward Island. According to the Nurses' Union: "Evidence continues to mount that there is a lack of transparency and accountability when it comes to the practice of these agencies while their use continues to bloom."

### Private nursing agencies

Question to the minister: Minister, do you support this communication by the Nurses' Union to have the Auditor General take a look at this growing issue?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

We are doing some long-term initiatives to fill our nursing gap. I think it's important. If we want to talk about the PCH, we do have six agency nurses working at that facility now. It's important to maintain it. We have people within our system who are asking for

it: Colville Manor, Alberton, PCH. We need to maintain those services in the short term while we work on long-term fixes to our system.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Charlottetown-West Royalty.

[1:30 p.m.]

**G. McNeilly:** Well, yeah, but there doesn't seem to be much of a plan. This is a direct ask: Would you support the Nurses' Union in their request to the Auditor General?

The fact of the matter is that the government has the authority to ask the Auditor General to do this work that the Nurses' Union brought forward. Section 14(d) of the *Audit Act* says the following: the Auditor General "shall undertake special assignments or investigations at the request of the Lieutenant Governor in Council, and upon the Auditor General being provided the moneys the Auditor General determines will be needed to pay the cost of an assignment or investigation, by the Lieutenant Governor in Council."

I will table the relevant portion of the act later.

So, Cabinet can provide the Auditor General with the resources, ask for an investigation, and support both Island nurses and the people who rely on them for these essential services.

Question to the minister: Will you support this action to go to the Auditor General and use this section of the *Audit Act*?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker, and thank the member for the question.

I've had some conversations with my ministerial counterparts in Atlantic Canada on how to address this as a region. If one region will close the door on agency nurses, it does open the door in another region for them to flow in. So, we are having discussions about how we can address this

problem from a region perspective, and I think that's a great approach.

It's being led by the minister from Newfoundland. Obviously, they have significant costs in Newfoundland. If you want to rank us from one to four, I'm pretty confident that we are fourth. We don't like this option, obviously, but in order to provide services to Islanders, we want to maintain these services and we don't want to close anything at any time if we can help it. So, unfortunately, this is our option at this time.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Charlottetown-West Royalty.

**G. McNeilly:** I was just asking if you'd bring the nurses' request to Cabinet because you're in Cabinet. I don't understand that answer.

But again, according to the nurses, "Over-reliance on private, for-profit nurse agencies is only exacerbated by the health human resource crisis in this country."

Frankly, as the health care crisis gets worse, we need some expertise and some help with decision making, and the expertise is not coming from this government.

My question is: How much has this government spent on travel nurses since the spring of 2020?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I don't have that number over a couple of fiscal years. We're going to debate the budget on the floor this week or next and you will see some numbers. You'll see the reliance on agency nurses for Colville Manor, for example. It's a very difficult facility to staff. Even when talking up there, I think in eastern PEI, they even knew that there were only two people from eastern PEI in the nursing program at UPEI. That's how close of a community that we have.

Actually, a friend of my daughter, who is a teammate, I saw on social media the other day that she also got accepted. So, the total of nurses that are currently at UPEI medical school is three from eastern PEI.

We struggle with that facility. We want to give good care to the people who are there, so we'll continue to do so.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Charlottetown-West Royalty.

**G. McNeilly:** Madam Speaker, we've heard concerning reports from various unions representing health care workers on Prince Edward Island, each highlighting significant challenges faced by their members and expressing frustration with government's relationship, direction, and communication.

### Nursing float pool

Reflecting on the past initiatives such as the announcement in the fall of 2022 regarding the creation of a float pool of registered nurses – touted confidently by the minister at the time – begs the question, Minister of Health: How many float nurses currently comprise this pool?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

A good question, and it's an operational type of question. I wouldn't have that number at my fingertips. But I think it's important to talk about our relationship with our unions. We do value them very much. They're very strong leaders. Each one of them has somebody at their union that speaks very well for their members.

We do meet with them. I did ask the department for an update, in both Health PEI and ourselves, about how many times we have met. I want to read this off:

"Since February 1<sup>st</sup>, 2024, the Department of Health and Wellness and Health PEI have had 72 meetings with unions. This includes one with the minister and deputy minister; two with the assistant deputy



minister; 69 with Health PEI. They include 26 meetings with the PEINU; 27 meetings with UPSE; 25 meetings with IUOE; 38 meetings with CUPE.”

So, I think we have a good communication pathway with our unions. It is difficult. We try to manage their expectations with the overall health care expectations, and we’ll continue to work with our unions.

Thank you.

**Speaker:** The hon. Member from Charlottetown-West Royalty.

**G. McNeilly:** Well, that’s not what they’re saying. There’s a communication breakdown somewhere because that’s not what they’re saying, and they’re not happy, minister.

The question remains: Are there any float pool nurses in this pool?

[1:35 p.m.]

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

It’s certainly something I can bring back. Trying to be innovative and trying to staff our nursing is a big challenge. I think I’ve talked about it before, that we need to put in scheduling software to make it easier on our current pool of staff so that they can see shifts and we can communicate with our nursing employees better.

We’re trying to be innovative. I understand that sometimes these things go fast, but I will go back to my point: we want to keep services going. My communication to both my department and Health PEI is: “Whatever you need me to do, we want to maintain services on PEI.”

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Charlottetown-West Royalty.

**G. McNeilly:** This was touted by your government as a solution to a problem, and I

don’t even know if you can answer if it even worked or not.

Where is the evaluation? What’s the criteria for getting in there? Is this program working? Minister, you can’t even answer the simplest questions. Again, I repeat: Is the float pool nurse program operational or not?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

Again, back to the float pool question, if we had 200 vacancies, we have to have one heck of a float pool in order to service the vacancies in our system. We understand that we need to be innovative and work with our partners. We have nurses who are working way too much, and we need to balance their long-term health so that they stay in the profession, and we don’t leave them. So, we’ve got to support them and make their jobs – we’ve been asking a lot from them for four years through COVID, and now through these labour shortages. It is hard to be a nurse; we recognize that, and we want to support them as much as we can.

Thank you, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you, Madam Speaker.

The government has struggled over the past five years to deliver any housing assistance to renters, prospective buyers, or the construction industry.

Several months ago, the Minister of Housing and the Minister of Economic Development, with great fanfare, announced their Rent-to-Own program that was spun as a new support to help Islanders get into housing. The Minister of Housing was quoted as saying: “We want to help Islanders get a foot in the door towards home ownership...”

Fast forward to this weekend. Islanders who are trying to make use of the program are being turned away with little or no explanation after months of waiting for a

decision. “It’s a slap in the fact” was a direct quote from the CBC news story.

### **Rent-to-Own pilot program**

Question to the Minister of Housing: Do you stand by your Rent-to-Own scheme, given the concerns from Islanders who are fed up with another government initiative failing to meet its objective?

**Speaker:** The hon. Minister of Economic Development, Innovation and Trade.

**Hon. G. Arsenault:** Thank you, Madam Speaker.

Yes, to the hon. member, the Rent-to-Own program has been put in place as a pilot project to try to adjust the needs that we have here in our province. As we stated on Friday, we have actually 34 Islanders right now currently on the ground looking for homes to be able to purchase. The program is under a pilot stage.

We are always interested in evaluating our programs and we will continue to do so. At the end of the day, we want to make sure that we serve our Islanders and that they are successful in attaining their home ownership.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much, Madam Speaker.

The government has failed to take any meaningful action on the housing file. New builds have plummeted, and more and more Islanders are facing inadequate housing options. In the news article from CBC, Islanders highlighted their deep frustration with a program that doesn’t go far enough to get Islanders into homes because the housing price is capped at \$350,000. We live in one of the most expensive housing markets in the country, and this minister doesn’t even seem to realize it.

Question to the minister: Do you even know what the average home price in Prince Edward Island was when your program was announced?

**Speaker:** The hon. Minister of Economic Development, Innovation and Trade.

**Hon. G. Arsenault:** Thank you, Madam Speaker.

Like I mentioned, the Rent-to-Own program is under the pilot stage. We’re very happy with the way it’s turning out at the current time. We have many applications; we have 199 people who have applied. We do have a number that were declined because they didn’t meet all the criteria that we have established for the program. We’re always interested in making sure that, in five years, they can attain ownership. For us to be successful and for them to be successful, we need to abide by these criteria.

Thank you very much, Madam Speaker.

**Speaker:** The hon. Leader of the Opposition.

**Hon. H. Perry:** Thank you very much.

Well, you’re happy, but Islanders are not happy.

The average home price when you announced your program was actually \$390,000, according to the Canadian Real Estate Association. Today in Charlottetown, it’s approximately \$427,000. It’s no wonder Islanders are frustrated. They were set up to fail from the beginning because you launched an inadequate program.

Clearly, this minister is completely out of touch about the housing needs on Prince Edward Island, and it’s becoming clear that the Minister of Housing is just not up to the job. Housing needs to be about getting Islanders into homes, not about flashy photo ops for the ministers.

Question to the Minister of Housing: Instead of the half-measures you are currently offering, when can Islanders seek support through your Rent-to-Own scheme and expect you to revise and improve the Rent-to-Own concept?

[1:40 p.m.]

**Speaker:** The hon. Minister of Housing, Land and Communities.

**Hon. R. Lantz:** Madam Speaker, the Rent-to-Own program is designed to get those who have been denied a traditional mortgage through a bank an opportunity to own their own home. The Province, through Finance PEI, has essentially taken on the role of a bank. We're taking a much greater risk in some of these cases than a traditional bank is willing to take.

We've got people going through the process. We've got people in homes who have actually purchased homes through this program. It may take some time for us to really focus on the people who can take advantage of this program – screen them upfront to make sure that we're not taking in people who eventually will be denied – but it's a good program. We can evaluate it, we can adjust it, and we can put people in homes they can afford.

**Speaker:** The hon. Member from Borden-Kinkora.

**M. MacFarlane:** Thank you, Madam Speaker.

Last week in this House, my colleague from Summerside-Wilmot asked the Minister of Health some questions regarding the hiring process for health care workers on PEI. The Minister of Health, in response, did not provide a clear answer to what were, in my opinion, very clear questions.

#### **Process for health care hiring (further)**

My question to the Minister of Health: I will table the process later today, but do you agree, minister, it includes 20 or more steps including a sometimes-lengthy classification process, several senior management approvals, Treasury Board approval, and sometimes even a personal sign-off from yourself?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I know that the member is quite new to the House, but I want to remind him that when I was the Minister of Finance, they actually had a \$250,000 cap on hiring and any

expenditure at Health PEI. I changed that to \$10 million.

So, what Health PEI now can do, they can hire 10 doctors at once without going to Treasury Board. We've removed that. We don't have a PRPC. We do have to respect our unions and their classification system; that is part of the system that we work in. So, we continue to do that, and we respect those unions, and we'll have those conversations about how we can make the classifications easier and faster.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Borden-Kinkora, your first supplementary.

**M. MacFarlane:** Well, the process is what it is, Madam Speaker, and it's not hard to understand that it's hindering our ability to hire health care workers effectively.

The second question the Member from Summerside-Wilmot asked the minister was if PEI had more or less steps compared to neighbouring provinces. I can say that the answer is yes. The hiring process under this government does in fact have significantly more steps than the process of hiring health care staff in Nova Scotia, which requires no Treasury Board or ministerial signoffs at all.

My question to the same minister: You have the same report, minister, that I have, and no doubt have had it for some time. Why haven't you made the simple administrative changes within your department to make PEI more competitive in the hiring of health care professionals?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you.

Without repeating myself, we don't require Treasury Board approval. If we can hire \$10 million worth of staff, that's a lot of staff. So, they don't have to come to Treasury Board in order to hire those docs.

I would agree; we're looking at the pipeline process with regards to PSC and how we interact with Health PEI. It's very much a priority. We've met a few times. PSC has staffed up; some of their turnaround times

are decreasing. I think it's in their annual report that their volumes are going up, but actually, their response times are going down. That's what we want to see from our PSC.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Borden-Kinkora.

**M. MacFarlane:** Thank you, Madam Speaker.

Some of the most time-consuming steps, however, in this process include a cumbersome classification process. Looking across the pond in Nova Scotia, they use a streamlined approach that has a maximum of a 10-day turnaround, while classification on PEI can take months. If there's an appeal, it can take years.

Question to the same minister: If Nova Scotia can get a posting up in less than 10 days while it takes us months, why are you making Islanders wait for health care workers?

**Speaker:** The hon. Minister of Finance.

**Hon. J. Burrridge:** Thank you, Madam Speaker.

We're working on the classification process in the PSC. We've taken a few steps to improve that. One is we're doing one classification, one PQ, per position now. Historically, there was a PQ for every position. Now we're doing one PQ. Say if it's an RN, there would be one for a whole batch of RNs; they don't have to redo them.

The other thing that we are doing is we have an RFP out there to review our classification system and see if we can streamline that. That's happening right now.

**Speaker:** The hon. Member from Borden-Kinkora.

[1:45 p.m.]

**M. MacFarlane:** Thank you for that, and I appreciate that work is being done with respect to the classification system. But another step that I mentioned earlier, that I questioned, is the need for the minister to

sign off on some hires. I can see absolutely no good reason for why the minister should have his hands in the hiring process. This does nothing but delay getting our much-needed health care workers into the system.

So, again I'm asking the Minister of Health: Minister, will you remove this step in the process, or do you believe you have the necessary expertise yourself to hire the frontline health care workers?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

Although my wife doesn't like it, I don't take many days off. Any hiring form that would be on my desk would be signed that day or the next day. It is not an impediment to the hiring process whatsoever. I simply sign it off and away it goes down the hall, and they act on it.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Borden-Kinkora.

**M. MacFarlane:** The minister acknowledges having his hands in that particular piece of it, which takes me back to the question of – it's an issue of power. The minister and the Premier currently have power over our health care system hiring. In addition to that, they choose who gets bonuses and how much. They choose when a CEO gets fired and who gets replaced. A lot of this power seems to have come from changes to the *Health Services Act* back in 2018.

My question to the minister: You and your Premier's insistence on running our health care system has significantly added to our health care worker woes here on PEI. I'm going ask, minister, will you commit to removing yourself and the Premier from the operations of health care when you have no business of being there in the first place?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

It would certainly limit the number of questions that I receive in this House, that's for sure.

We have a system in place. The accountability framework is very strong. I actually had a chance to meet with Melanie Fraser yesterday for about a half hour. This is a very, very capable person. The current department that she managed before had 3,800 employees; we have 100. Again, I'm excited by the new CEO hire that we have and her administration capabilities and her experience. We welcome her to Prince Edward Island.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Borden-Kinkora.

**M. MacFarlane:** Madam Speaker, the closer the decision-makers are to the ground, the quicker the work gets done. The Premier, being the decision-maker way up on the fifth floor, and the minister, who admitted himself he's involved in the hiring process, has simply resulted in closure after closure of services at our Prince County Hospital and our West Prince hospital.

The Prince County Hospital has been without a leader for 18 months, which is how long it's been now since the administrator has resigned from that position. I understand there's no countrywide lack of administrators, but there does seem to be a Cabinet-wide lack of urgency for western Islanders.

My question to the minister: There was a qualified administrator/CAO who wanted to work at the Prince County Hospital and help us turn the fate of this hospital around. Unfortunately, we lost that individual somewhere along this hiring pipeline. How many doctors and nurses have Islanders lost out on along this hiring, convoluted pipeline?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

We did have a candidate. We actually did a labour market adjustment to try to offer

them as strong a salary as we could. We weren't successful; that is the hiring game. This person chose another opportunity in another province at a higher rate. It's not an auction, so we try to maintain it. My update yesterday is that, it says, "PCH administrator interview went well. Staff is referencing this week."

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Souris-Elmira.

**R. Croucher:** Thank you, Madam Speaker.

It goes without saying how important nurses are in our health care system. Without them, our health care system would not operate, period. Our need to attract recruits, and, perhaps more importantly, retain these health care heroes, is great than ever.

In recent discussions with RN students at St. FX University in Antigonish, I've been told that Nova Scotia Health is pulling out all the stops to recruit nurses in that province. In fact, this coming Wednesday, Nova Scotia Health is hosting a lunch and learn event on campus for students to learn more about working in the Province of Nova Scotia. The event is to allow students the opportunity to network with hiring managers and ask questions about future employment.

#### **Health care recruitment strategies (further)**

My question is to the Minister of Health: What efforts are being put forth to do similar events with RN students, not only at St. FX but all of our regional universities?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

Yes, nursing recruitment is very important. With some of their universities, obviously they do have an opportunity to be there first at the table.

I know from our university, as of last week, we now have a recruitment coordinator on campus one day a week. That's a nice improvement that they have access to our

recruitment team one day a week. That just started last week.

[1:50 p.m.]

I do have a schedule of recruitment events for the next 30 days. I do see UNB accelerated nursing, we're attending that one; an NB resident reach-out; Dalhousie, second year nursing; third-year nursing for UPEI. University of Moncton is on this list for students in April. We also have a physiotherapy conference in April.

I appreciate the opportunity. Our staff will look at it. We do well locally. Our batting average is probably not as high at Acadia or St. FX or any of those other institutions, but we need to be there.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Souris-Elmira, your first supplementary.

**R. Croucher:** Thank you, Madam Speaker.

You somewhat answered the next question that I have.

We have stepped up our recruiting efforts abroad, and we are making headway, but our province, I'm told, is behind the eight ball when it comes to engaging with our students in regards to trying to attract them.

My question was going to be: Why are we not the first province getting out in front of these students, whether they are in year 1 or year 4 of their program, making offers and pitching our Island as the place to come and work and practice?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, and again, another great question.

I did list some of the events that we are attending in order to fill our nursing pool on Prince Edward Island. It is important. We do need to look to our partners to recruit and retain at those other institutions that offer nursing.

I can go back to the department, back to the recruitment update. I would never have

known that we were attending these ones in the next 35 to 40 days. I'm sure those other institutions are on our list. They certainly should be, if they're not, and I'm pretty confident that they are.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Souris-Elmira, your second supplementary.

**R. Croucher:** Thank you, Madam Speaker.

Minister, that is good news, and I hope you keep up the good work in moving our recruitment forward.

In recent months, tuition incentives have been given to LPNs, paramedics, et cetera, and let me be clear on this next statement: I, 100 percent, support the decision to bring travel nurses to this province to help alleviate the strain on our system.

We spoke about Colville Manor here today. Without those travel nurses, my sister, who is a resident of Colville Manor, wouldn't receive the phenomenal care that she receives at Colville Manor. But it is high time that we start investing that money in our own workforce and potential new hires.

So my question is to the minister: What does your department plan to do to address tuition, signing bonuses, and wage gaps to ensure that these students would be hard pressed to turn down an offer to work in the greatest province in this country?

**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

It's important, the recruitment. We do play leapfrog with some of our other institutions. I don't want to be wrong in the numbers, but we do have incentives. We have federal loan forgiveness programs as well. Obviously, it's quite a bit, significantly, if you actually work for us outside of the Charlottetown area. There is a rural incentive as well. I can certainly table them.

It's something we constantly look at. I think we do well when we train our own, for sure. Our batting average is extremely high. In

September of this year, we actually attended an event and we had job offers for every single person in that class at UPEI. We're not waiting until February. So, that's a big step forward in making sure that they know that they can come work for us.

Even those nursing students who are in our system don't require an interview in the interview process. If they work for Health PEI during their schooling, they can apply for a position, and away they go.

Thank you, Madam Speaker.

**Speaker:** The hon. Member from Rustico-Emerald.

**B. Trivers:** Thank you, Madam Speaker.

Expanding use and access of public transit is key to meeting our climate commitments, connecting communities, and getting workers to work, especially for our seniors, our youth, and our most vulnerable.

For several years, the North Shore Summer Shuttle has operated, connecting north shore communities with Summerside and Charlottetown, growing by 46 percent last year over 2022's transit volume.

The Central Coastal Tourism Partnership and tourism operators are working hard to extend the tourism season. They need our support. Unfortunately, the shuttle service has been starting too late and not running long enough. There's far too much "shut" in this shuttle.

#### **North shore shuttle service**

Question to the Minister of Transportation: When will the north shore shuttle resume service this year, and how long will it operate?

**Speaker:** The hon. Minister of Transportation and Infrastructure.

**Hon. E. Hudson:** Thank you very much, Madam Speaker.

In his preamble, the hon. member referenced how important the transit system is here in the province of PEI. And certainly, in my opinion, and from feedback that I have received, the province of PEI has the best

provincial tip-to-tip, basically, transit system in the country, and it's something that I think that we can be very, very proud of as a province.

[1:55 p.m.]

Since it was launched, there have been 180,000 one-way trips. With that, does that mean that we can't and shouldn't continuously at ways that we can improve it? Absolutely, we should.

Thank you.

**Speaker:** The hon. Member from Rustico-Emerald, your first supplementary.

**B. Trivers:** Thank you, Madam Speaker.

Well, my communities are on pins and needles every year, waiting to see if this shuttle will be offered. Really, it should be a permanent service that doesn't hinge on an announcement every year, and it should cover that time period. It's such a valuable service for residents in my district, and one that we want to see expanded beyond the tourist season. After all, residents live in these north shore communities year-round.

People have a huge need for this service; especially, as I said, youth, seniors, and workers. However, right now, if people want to take a bus in the winter, they have to leave at 7 a.m. and can't get back until 5:30 p.m. to their communities. This is especially not viable for our seniors. There needs to be a year-round midday run added as well. We need more "trans" and less "sit."

A question for the Minister of Transportation: Are there any plans to expand transit service to at least an additional midday run to our north shore communities year-round?

**Speaker:** The hon. Minister of Transportation and Infrastructure.

**Hon. E. Hudson:** Thank you very much, Madam Speaker, and again, thank the hon. member for the question.

As I had referenced in my previous answer, yes; we always have to be looking at ways that we can improve this transit system, how we can improve the service to Islanders right

across this province of ours. You look at the Cavendish to Charlottetown transit, for example. It was originally announced back in July of 2022. Subsequent to that, in February of 2023, it was announced that it would be starting on June 19<sup>th</sup>.

Here today, I will give confirmation to the hon. member that it will be going again this year, certainly no later than when it started last year, and also, to be looking at when we might be able to start it if we can start it earlier. Certainly look forward to feedback from the hon. member.

Thank you.

**Speaker:** The hon. Member from Rustico-Emerald, your second supplementary.

**B. Trivers:** Thank you, Madam Speaker.

We need the service year-round. It should be started, at the very latest, in May. So, I'm glad to hear the minister say that, but let's get it done.

In winter 2021, as the minister referenced, the then-minister of action introduced a new, special, government-issued driver's licence to support the Kari ridesharing service; a great step in transportation innovation. There are many innovative ways to help provide affordable, energy-efficient transportation. There is the Turo peer-to-peer car rental service, a Zipcar car-sharing service, and even just support for good old-fashioned carpooling. I urge you, minister; jump in the carpool and show you Kari.

### **Affordable transportation**

A question for the Minister of Transportation: What are you and your department doing to support innovation, and introduce and support new ways to offer affordable and energy-efficient transportation in PEI?

**Speaker:** The hon. Minister of Transportation and Infrastructure.

**Hon. E. Hudson:** Thank you very much, Madam Speaker.

There's a lot packed into that preamble from the hon. member, but I think when you look at affordability, certainly, we can be

extremely proud of the fact that children and students ride for free; that right across the province, what do we hear? Toonie transit. And of course, all of us in here know the reason that it's referred to as toonie transit is because it's costing \$2.

You look at some of the others. The hon. member also references carpooling. It's one of the initiatives that our government, certainly the Transportation and Infrastructure ministry, has undertaken; to put in place parking lots right across the province for ones who are carpooling so that they can leave their vehicles there.

The other aspect of that too, that I have looked into and have taken initiative on: yes, certainly, some of those carpooling lots are in rural locations. Previously, they were dark. If I had any family member that, in the darkness of night or early morning, was going to be getting a bus there, I would be concerned. So, in a number of those, we have put lighting in as well, just for safety.

Thank you.

[Interjections]

**Speaker:** The hon. Member from Charlottetown-West Royalty, final question.

**G. McNeilly:** Two groups this government decided not to give a bonus to: respiratory therapists and physiotherapists. A couple years ago, you gave out a lot of money; didn't spend it all and didn't give it to anybody else. Now we're understanding that respiratory therapists are in high demand, and you probably should have given those bonuses to both respiratory therapists and physiotherapists.

[2:00 p.m.]

### **Agency health care workers**

Question to the Minister of Health: Now that we're hearing that you're using agencies to recruit respiratory therapists and physiotherapists, what else is in your pipeline? Are we going to have to expect we're getting agency nurses, physiotherapists, and respiratory therapists all over our province? What's going on? What's the plan?



**Speaker:** The hon. Minister of Health and Wellness.

**Hon. M. McLane:** Thank you, Madam Speaker.

I would remind the member that we actually did a labour market adjustment for our RTs to make them one of the highest paid in the country. In partnership with our unions, we're going to continue to identify positions that are hard to fill; have high vacancies. We rely on that position to do our system, so that's what we're going to do.

We have a locum – IMG – coming to PCH; nobody seems to mind that that's a locum. It's an important part to keep our system going.

Thank you, Madam Speaker.

[End of Question Period]