November 15, 2017

HOUSE OF ASSEMBLY PROCEEDINGS

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The House met at 10 a.m.

MR. SPEAKER (Trimper): Order, please!

Admit strangers.

Orders of the Day

MR. SPEAKER: The Government House Leader.

MR. A. PARSONS: Mr. Speaker, I move, seconded by the Minister of Natural Resources, for leave to introduce a bill entitled, The Serious Incident Response Team Act, Bill 24, and I further move that the bill be now read a first time.

MR. SPEAKER: It is moved and seconded that the hon. the Minister of Justice and Public Safety have leave to introduce a bill entitled, Serious Incident Response Team Act, Bill 24, and that the said bill be now read a first time.

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

All those in favour?

SOME HON. MEMBERS: Aye.

MR. SPEAKER: All those against?

This motion is carried.

CLERK (Barnes): A bill, Serious Incident Response Team Act. (Bill 24)

MR. SPEAKER: This bill has now been read a first time.

When shall the said bill be read a second time?

MR. A. PARSONS: Tomorrow.

MR. SPEAKER: Tomorrow.

On motion, Bill 24 read a first time, ordered read a second time on tomorrow.

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

MR. A. PARSONS: Yes, Mr. Speaker, I call Order 2, third reading of Bill 13.

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

MR. A. PARSONS: Mr. Speaker, I move, seconded by the Minister of Natural Resources, that Bill 13, An Act To Amend The Highway Traffic Act, be now read a third time.

MR. SPEAKER: It is moved and seconded that the said bill be now read a third time.

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

All those in favour?

SOME HON. MEMBERS: Aye.

MR. SPEAKER: All those against?

This motion is carried.

CLERK: A bill, An Act To Amend The Highway Traffic Act. (Bill 13)

MR. SPEAKER: This bill is now read a third time and it is ordered that the bill do pass and its title be as on the Order Paper.

On motion, a bill, “An Act To Amend The Highway Traffic Act,” read a third time, ordered passed and its title be as on the Order Paper. (Bill 13)

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

MR. A. PARSONS: Mr. Speaker, I call Order 7, second reading of Bill 25.

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

MR. HAGGIE: Thank you very much, Mr. Speaker.

I move, seconded by the Minister of Justice and Public Safety, that Bill 25, Prescription Monitoring Act, be now read a second time.
MR. SPEAKER: It is moved and seconded that Bill 25, entitled Prescription Monitoring Act, be now read a second time.

Motion, second reading of a bill, “Prescription Monitoring Act.” (Bill 25)

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

SOME HON. MEMBERS: Hear, hear!

MR. HAGGIE: Thank you once again, Mr. Speaker.

I’m pleased to rise in this hon. House today – slightly sniffly after my flu shot from yesterday – to open debate on Bill 25, an act respecting monitoring of prescriptions in this province. It comes as no surprise that this bill comes here. We have had discussions around the issues surrounding opioid use and diversion for some time now. It has been labelled in other jurisdictions as a public health crisis.

Just to set the tenure and the background, Canada has more prescriptions for opioids per capita than any other country in the G7, and Newfoundland and Labrador, unfortunately, is at the leading edge of those numbers, too. It is felt that a problem around opioid addiction stems from the liberal use of opioids and also now, potentially, diversion.

I would emphasize from the get-go, however, that the intent of this bill, which is a legal framework to address monitoring of what are designated under the act and then under the regulations as monitored drugs. The principle aim of this act is educational; it is not punitive.

A lot of the discussions now – and I suspect in Committee – however, will veer towards the punitive end of the spectrum simply because those, by their very nature, are unusual in the course of prescribing behaviour and medical behaviour in general. I think it’s worth stating now: there are a vast majority of people in this province, prescribers in this province and dispensers in this province, who act in an entirely professional and totally responsible fashion. This, if you like, education piece is aimed at making that practice even better.

For those people whose behaviour is egregious – and it is a very small number, both of dispensers, prescribers and patients. For those individuals, they have, up to now, been exceptionally difficult to deal with in a timely and responsive manner. This is the principle purpose of this bill.

You can go back through the department for maybe 10 years and find examples of individuals who have been a source of worry, for whom there has been no simple or straightforward approach to managing the problem. They have been managed ineffectively, where they have been managed at all, and have often figured prominently in the news, not once, but on multiple occasions before their activities had finally been curtailed. This bill is to provide a legal framework to help manage that very small group but, again, it’s principal aim is to educate and inform to improve clinical practice.

This bill provides that legal framework to implement a Prescription Monitoring Program in this province. The function of the program is going to monitor, analyze and report information related to the prescribing and dispensing of monitored drugs. Initially, the only and first category of drugs that will be monitored – and this will be developed in regulation and stipulated there. The first category and the only category will be that of opioids, which are currently our pressing public health prescription challenge.

However, Mr. Speaker, the bill is worded so broadly that additional drugs can be added in the future. Benzodiazepines are another category of drug which would be worthy of monitoring for a public safety point of view. Those numbers, however, and their impact is smaller and less lethal currently than opioids.

We heard just this week, however, and last, in data provided by OECD and CIHI around category of drugs which are of significant public health concern but over a much longer term. That, Mr. Speaker, is the use or inappropriate use of antibiotics.

Again, to put that in perspective, this province has 33 per cent more prescriptions per capita for antibiotics than the next leading jurisdiction in Canada. We are way over the national average in use of a category of drugs that will actually, if it
continues, jeopardize safe health care for a whole variety of conditions. Obviously, the impact on life and limb in the short term is nothing like that of opioids, but in terms of a public health, a problem on a global scale, I would suggest, antibiotics have just as big a potential to actually kill indirectly by being useless on those occasions when we need them most. This bill and the regulations under it that will be crafted would allow for monitoring of antibiotic prescriptions, for example, should the need arise.

For the moment, however, I will go back to the focus of the program, which is principally opioids. For those of you who don’t have a background in pharmacy or prescribing, opioids are basically derivatives of opium. They are categories of drugs such as morphine and its derivatives, which are well used and have a well-respected and established place in clinical practice, but also other drugs such as heroin, which, in this country, anyway, is not recognized largely as a prescription drug, although other jurisdictions do allow its prescription. There are some programs in Vancouver, for example, where this can be obtained legally through prescription.

They are, and have been for a long time, an important and legitimate class of drugs used in pain management and have been essential in such areas as the acute surgical situation, for example, with which I was much more familiar, but also in cancer care and palliative care.

The national trends have shown an increase in opioid prescriptions, and this is of concern because in actual fact they are drugs of habituation and addiction, physical and psychological dependence. Classically, we were taught, when I was a resident, that this would be something that happened in a very small percentage and only after a prolonged exposure. But there is now evidence, for example, that even those people who receive a prescription for post-operative pain relief, those people whose prescriptions last six days or longer have fully four times the rate of addiction than those people who have five days or less, and that is a real alarm bell.

I have to say, Mr. Speaker, that the medical profession and prescribers in general were actively misled by companies such as Purdue Pharma, the manufacturers of OxyContin, to the point where I think, personally, they bear no small responsibility for what is actually a global catastrophe. And the most worrying thing from a moral and ethical point of view is that they may have exhausted their good will in North America, but they’re now turning their sights on India and Brazil where the populations are huge and the regulations minimal.

So, I think, again, I digress slightly, but I hope no one will argue the issue of relevance on this particular point. The most recent statistics indicate the number of people referred for treatment for opioid dependency in Newfoundland and Labrador have jumped by 600 per cent in seven years. They have gone from 73 people in the year 2007 to 2008 to 443 in the period ’14-’15.

These referrals resulted in a variety of treatment options ranging from counselling, a dependency treatment using drugs such as methadone, which has been the mainstay – we’ve now moved toward Suboxone – and there are other injectable medications of what is called a depot preparation which are long acting, which are showing some potential here. We’re keeping an eye on those as options for the future.

The Prescription Monitoring Program, however, is not intended – not intended – to prevent the use of monitored drugs for legitimate medical purposes. There are many reasons why an opioid is the most appropriate treatment for a patient’s condition and this program is not meant to deter prescribers from making an informed clinical decision to make that prescription. It is hopefully going to be a tool to educate them so their decision becomes more informed.

The primary goal, apart from that, is to ensure that when an opioid is prescribed both the prescribers and dispensers have up-to-date and accurate patient information when they make that decision and when they write that prescription. In a sense, this is actually the earliest form of a decision support tool that we are mandating and building into the system.

The trend of opioid use, diversion of opioids, overdoses and death nationally and in Newfoundland and Labrador is and continues to
be a growing concern. Numbers in British Columbia, which is kind of the leading edge of this way, show that already this year there have been over 1,000 deaths from opioid poisoning. I don’t think these people have overdosed; I think they’ve been poisoned by additives to what that they thought were legitimate street drugs. Their heroin or their cocaine has been laced with a poison called fentanyl or carfentanil or one its derivatives, which is lethal in minute doses.

In 2016, there were 2,816 apparent opioid-related deaths in Canada. In Newfoundland and Labrador, we had 57 hospital admissions involving opioid poisonings and 16 apparent opioid-related deaths. Of interest, on a harm-reduction level, the naloxone program, to which I have alluded on many occasions, has actually been used at least as often as that with, good results; i.e., people who would otherwise have perished are alive because of that program. I will highlight the importance of that program a bit later on in this legislation because it’s part of a piece of a bigger jigsaw.

The bottom line from those statistics is essentially these are extremely concerning. In November of 2016, I joined with my federal provincial and territorial counterparts to release a joint statement of action to address the opioid crisis in response to some of the background I’ve just provided. At that same time, I also announced the province’s Opioid Action Plan in response to that situation.

One of those action items, there were education pieces, there were some legislation we’ve already referred to, Bill 55, from a previous session where we have options for secure withdrawal management and also harm reduction strategies again around the naloxone kits and needle exchanges. One of the action items identified in November of 2016 was the introduction and implementation of a Prescription Monitoring Program. This bill, and my standing here in this hon. House today, is the culmination of that process.

The program builds on other measures that I’ve referenced. Education; we have a new mandatory safe prescribing course for all newly licensed physicians that went live on the 1st of January. We are the first province in Canada to have done that. Others are now following suit.

We funded that through Memorial University and the College of Physicians and Surgeons. Early reports show that in other jurisdictions elsewhere in the world where they’ve tried this, it has had a beneficial effect.

We had Bill 55 passed, An Act Respecting Secure Withdrawal Management for Young Persons. We have a public awareness and education program on opioids and we’ve also, as I referenced, gone into harm reduction manoeuvres around naloxone take-home kits. As I say, we’ve used anywhere north of 16 of these. It’s very difficult to track sometimes the usage, but what reports we have on those 16 would suggest that they have reversed a potentially fatal situation.

We’ve had naloxone pop-up tents which were initially collaboration between government, Eastern Health and the City of St. John’s. I’d like to shout out to my colleague for Virginia Waters – Pleasantville who was a key link between our department and them at the time. Festivals across the province have also seized on the opportunity. I would encourage those folk who are planning for next year’s events to contact their local RHA. All we need is a space and a tent and we’ll do the rest.

To get on to the program itself, these monitoring programs are being used in all jurisdictions across the country, with the exception of Quebec, with the intent of helping prescribers and dispensers make informed decisions about who requires opioids and how and what that form should take.

Again, for emphasis, the purpose of the program is education. It is to help prescribers and dispensers make the most informed choice at the time when they feel that prescription is necessary. It’s not an intent to police professionals. It’s rather to give them access to information in a timely way about their patients at the time the drug is either prescribed, or in the case of dispensers, at the time it is actually dispensed with reference to the monitored drugs.

This program will assist those professionals to make better quality decisions, but it also will allow them to look and potentially identify folk who actually have opioid dependence simply on the basis of their prescription pattern. That, in
turn, will allow them at least to be offered appropriate services and a discussion to take place about how they wish to deal with what could be a dependency or addiction. One of our challenges is sometimes actually identifying people in that situation. That can then lead on to formal programming and help them to manage and recover from their addiction.

The foundation upon which this program is built is the Pharmacy Network. There was reference made in this House to that network on previous occasions. It finally went live in the spring of this year and was a success. We have anecdotal preliminary information already from NLCHI that there has been a reduction in adverse drug events. Unrelated to opioids, there’s been a reduction in duplicate prescriptions and there’s a reduction in prescription errors as well.

Indeed, going back to the first two individuals to connect to the Pharmacy Network before it became mandatory, they in actual fact, the day they were connected, identified an issue with potential double doctoring of opioid prescriptions. It works, Mr. Speaker, in short.

In turn, the Pharmacy Network itself is a component of an initiative around the province-wide electronic health record, which we commonly refer to as HEALTHe NL. The Pharmacy Network is comprised of a real-time database of medications. So when a patient goes in to receive a prescription and get the drug dispensed, that fact is entered into the database as it happens, live from all of the province’s pharmacies that are outpatient pharmacies.

In spring, we have connected all 201 of them to the system. What the HEALTHe NL viewer does is simply a front end, at no cost to the prescriber, which will allow them to access that profile and close the loop, so that not only does the pharmacist see the patient’s dispensing history, but at the time the prescription is written, a prescriber can look at the viewer securely, bring up the patient’s medication history – with respect to any drug over any period of time that has been filled – and have that information at the time the prescription is written.

It’s that complete medication profile, whether they filled a prescription in St. John’s and are now getting another one filled in Gander or Grand Falls or vice versa, that’s real time, it’s live and it’s current. That is the key, to have that information in the hands of the prescriber at the time the prescription is written itself.

Ideally, with the fullness of time, the prescription itself wouldn’t be written any more. It would be composed, if you like, electronically and sent automatically to a pharmacy of the patient’s choice. Once more prescribers get on to the electronic health record, then that will become a reality. This in the meantime is a hybrid which has worked in other jurisdictions. I’m referencing British Columbia here, which gets around the requirement and the onus to force change on physicians or prescribers when there may be a cost incurred. They can plan this in a more leisurely way.

Although at some point, Mr. Speaker, the facts of the case are that good, quality, primary care requires an EHR in a team environment. So with the fullness of time, I would suggest that patients may well be at a disadvantage in those practices that are so low and don’t have an EHR. That is, however, outside the remit of this act.

In British Columbia – we are not reinventing the wheel here. In British Columbia, what they did, just like us, we have tamper-proof prescription pads. These are specially printed documents unique to a physician or made so by the way they have to be filled in. These exist already and are used for what are called control drugs, which are legally defined in a different way.

That mechanism will continue, but we will likely modify. This will be prescribed under regulations, so it’s not part of the act. We just have an explanation here for workflow.

A physician or a nurse practitioner, or a midwife – when we get more than the one we have at the moment practicing – and dentists will annotate in a way to be prescribed that they have viewed the healthy viewer at the time the prescription is written and are satisfied that there are no issues with issuing this opioid prescription. It will be signed, maybe timed and dated, and the prescriber’s number will be affixed to that signature. Essentially, they’re using their licence and their professional standing to certify that in
their professional view there’s nothing untoward about issuing this prescription.

I go into that detail simply to enlighten folk who may not have the background of others as to how prescriptions actually would be written in the system. This is a hybrid, but it’s worked well in British Columbia.

So to speak a little bit more to the nuts and bolts of the bill. It provides the necessary legal authority for us to actually operate the program. It grants powers to and imposes duties on myself, the Minister of Health and Community Services. It also has those same impositions and requirements on dispensers, prescribers, regulatory authorities and also patients, because they have a role to play in this, too.

Again, the object of the program is around education, support and assistance to those groups to avoid misuse and potential abuse of drugs that are designated, under regulation, as monitored drugs. These monitored drugs will be defined, and as I’ve already indicated, we’re starting with opioids initially and the regulations for that will be in place prior to the implementation of the program.

The bill does specify it’s the minister who’s responsible for the program itself. However, the bill also does permit delegation of powers and duties by the minister to an entity or person. In conjunction with discussions with the Information and Privacy Commissioner, that delegation was felt to be required that it be delegated to someone who is also designated as a custodian under the Personal Health Information Act. That was a recommendation from the Privacy Commissioner, and it addressed a lot of his concerns about potential loopholes or gaps in safeguarding what is sensitive personal information.

It also allows us to store complete information. By having the custodian designated under fear, we can store everything that is relevant to the patient; everything that is stored in that is secure and protected in a way that other legislation may not be as stringent. So it holds us to a high standard.

The intention also is that Newfoundland and Labrador Centre for Health Information would be the delegate to administer this program. The logic behind that fits in with other announcements we’ve made around streamlining of IT and clinical records services electronically in the province. Essentially, the centre currently houses several provincial electronic databases and principally the Pharmacy Network.

As I’ve already mentioned, the Pharmacy Network is the foundation block without which this program would not be feasible, and that had to be up and running. Just to remind folk, that happened 1st of July, just past. So we’ve really tried not to drag our feet with this.

We’ve had the Pharmacy Network up and running and I might say with minimal fuss. We have had some issues with one or two pharmacies, but in actual fact on closer examination that was an issue with their Internet service provider and not with the technology or the centre itself. The centre would then house this information and would generate reports which would be descriptive and could be sent to prescribers and dispensers and also allow analysis about patterns of use and potential sources in the case of opioids of diversion.

As I’ve mentioned, at the time of writing a prescriber would be required under the act to check the medication profile and to sign to that effect. The profile, I can’t stress, is key. A real time, up-to-date profile is key to the safe and reliable functioning of this.

Equally, the dispenser currently already has to check in the Pharmacy Network but there will be a specific onus on them in the issue of monitored drugs for them to do that. Their systems are flexible enough that this could be done electronically and wouldn’t require a paper process.

The regulatory authorities are also involved in this. Again, this is where you start to stray into that grey area of what is acceptable professional practice, what is questionable and what is downright egregious and possibly even criminal.

There will be a mechanism stipulated in regulation whereby once certain thresholds are passed, that information would be conveyed to them. Should they take action or have already taken action where a particular prescriber’s
licence has been constrained or abridged in any way, that information would have to be fed in to the system so that we could then identify any situations where someone who was not allowed by their professional regulatory body to go near opioids or benzodiazepines in the future, were they to issue a prescription for that, this would be flagged and of itself would constitute behaviour that would require notification.

We understand that the decision around prescribing any drug is one related to the clinical autonomy of the prescriber at the time. It’s not our intent to tinker or abridge that autonomy in any way, but we also recognize the prescriber’s ability to do that role and fulfill that role properly is kind of dependent on the right information being fed to them by patients. That’s why within the act there’s a specific onus on patients, on individuals seeking prescriptions, to be honest and truthful as to the reasons for them seeking that.

If that information that they provide is inaccurate, there will actually be consequences potentially for the individual. There is wording in the act to cover the event where you have someone who goes to mislead a prescriber and it is an offence. It states that the patient is not knowingly to provide false or misleading information at the time a prescription is sought.

Once the data is housed and stored through the Pharmacy Network, there exists an ability to flag unusual activity, the most obvious being where a person visits multiple prescribers in the same day or multiple dispensers to obtain monitored drugs. As part of the operation of this program, when that flag is triggered, we need a mechanism to actually act upon it. That’s part of the framework that doesn’t exist at the moment.

Officials would have to reach out to prescribers and dispensers to seek clarification with respect to a prescription. The bill provides authority for the minister or a delegate to request information where that’s reasonably necessary to achieve the objectives of the program.

Where there are reasonable grounds – and some of these will be in terms of thresholds and triggers that will be worked through in the regulation – the bill authorizes the sharing of information between prescribers, dispensers, the regulating authorities and if need be, law enforcement. It allows the safe, protected information to be released in a controlled way when certain thresholds are passed to either a regulatory authority or maybe to a regulatory authority and law enforcement, or in the situation of what’s been colloquially termed doctor shopping, maybe to law enforcement directly.

The bill authorizes that sharing and allows for the management of more egregious circumstances. Again, I go back to my opening comment. This is not a punitive bill, but there has to be a stick along with the educational carrot. Part of the problem we’re trying to deal with is not the behaviour of 99 per cent of people; it’s the behaviour of 1 per cent of the people. Those percentages may be off a little bit, it could be 95 and 5 per cent, but the facts of the case are the vast majority of people involved in opioids are involved for perfectly legitimate, entirely appropriate reasons.

Bill 25 also contains an inspection regime whereby the minister can appoint an individual, or person, who will be a custodian under PHIA or an employee of a custodian. The reasons for that, again, relate to concerns the Privacy Commissioner had about who should have access to what in the way of sensitive information.

It’s important to note again – and I can’t repeat this often enough because there’s some fear mongering going on about how this is a punitive exercise, but the object of this program is to educate and assist. It’s not meant to go out and be a big stick.

It is anticipated that in the issue of an unclear indication for opioids, or an unusual prescription outside the prescribers normal profile, for example, that the vast majority of people would comply with a request for information. We do this regularly for physicians through MCP for their financial billings. There’s an audit process and there’s very little issue for the vast majority of individuals.

But again, we’re moving away from the behaviour of the reasonable individual into territory that is at least gray and possibly criminal. So in order to address that we do
actually have to have the option of additional powers to address issues of non-compliance. This, again, is for that very small percentage of individuals, prescribers, dispensers, whose behaviour is well outside the norm for their peer.

So as part of the implementation process, the bill permits the establishment of an advisory committee to address, if you like, this clinical audit function. You don’t have to have it, but the bill states quite clearly, should you exercise that option, it has to have at least one prescriber and one dispenser on that committee. The reason it’s worded like that is to reflect potential flexibility, depending on who the prescriber might be on an occasion, whether it’s a physician or a midwife or who the dispenser might be.

As I say, while setting up the committee is discretionary – we don’t need to create committees we don’t need and have standing committees all the time – when you do the act, not the regulations, the act requires that there be at least one dispenser and one prescriber on that committee.

The purpose of this committee is to provide advice and recommendations on any matters that might be referred to them through the program. They’re there to educate the administrators of the program and the minister, if need be, on what’s gone on and whether this request or whether this prescription or dispensing activity was clinically entirely reasonable.

In the first instance, Mr. Speaker, it’s the intent of Health and Community Services to have two committees. One of these will be made up of representatives from regulatory bodies, law enforcement, community partners and government departments that have an interest in opioid use and diversion. During the development of the program, we actually had a committee of such stakeholders who provided advice and guidance on the development of the program and the framing of this legislation. It would seem sensible to continue this committee and morph it into that advisory committee.

The second committee is the one I’ve referenced about clinical expertise, but in a slightly different way in the sense of reports, what you do with these educational pieces, how should they be crafted so that the end-user can get the best benefit from them. There have been a variety of strawmen, if you like, for prescribing and practice profiles that have been used over the time. I can go back to my time with the NLMA when we did that with billing activities for fee-for-service physicians. I know currently choosing wisely – and Dr. Parfrey through the university is looking at specific activities within the realm of clinical practice and has developed a series of indicators.

The most common is simply a kind of box-and-whisker plot where you have an average for your group and a range of, if you like, normal activity and then a little line as to where you, as your individual practitioner, fall. That group could be defined as being geographical. For example, before I retired it could have been general surgeons in Central or off the Avalon, and it could also be described in terms of specialists in general or general surgeons of the province and that would be a different comparator.

Those actually shift because different people have different practice profiles. There are at least three or four, for example, family physicians whose principal area of clinical activity are outside of family medicine in addictions and mental health. They’re prescribing profile, particularly for things like methadone, will be completely different than a GP whose main focus is care of the elderly and, in turn, that would be completely different from someone whose main emphasis is on palliative care. You have to compare apples and apples, not apples and anything else you happen to have.

The clinical expertise on that committee will help determine how those reports should be crafted. The proclamation of the bill we have proposed as the 1st of January 2018. The regulations are well underway. There’s one section of the bill that we have suggested should be delayed and we’ve suggested it be delayed until June 30, 2018, and that’s section 7 which specifically relates to the requirements for
prescribers to have the HEALTHe NL viewer. Again, this is not an electronic health record as such; it is simply a portal to the Pharmacy Network to see who’s written what and what patient has picked up which drug.

It is at no cost to the prescriber that doesn’t already have it as part of their EMR or EHR. It is something you can put on a CD. They will simply require a username and a password, which will be sent to them by NLCHI, to make sure the access they get is authorized. That’s the bare bones of it. How that will be operationalized and the time to actually do that is why we’re looking at June 30, 2018 for that final piece.

The other piece of that is that NLCHI has to work with the regional health authorities to actually push that software out to all their PCs and terminals across their facilities. Again, not a lengthy process, but there’s a change management piece in there in that people have to get comfortable with using it. It’s not difficult. Even I, as a surgeon, could manage to use it. As they say: It ain’t brain surgery. I think, in fairness, it’s a process that’s analogous to what went on with hooking pharmacies into the Pharmacy Network.

We have spent a lot of time in the department consulting with the stakeholders I’ve alluded to: provincial health care regulatory bodies, law enforcement, community groups and professional associations. Their input has all been put in the blender, if you like, and is manifest in this bill.

We’ve also looked at other jurisdictions. We have really taken a leaf out of BC’s book, and I make no apologies for that. They have led the way, unfortunately, because of a variety of social, cultural and geographic factors whereby the opioid issue has become their problem first and slowly spread east.

Our issue is it’s kind of jumped a little bit because once it got into Alberta with our connections and family connections and work connections, that has come back a bit quicker than it would if it travelled by road.

The bottom line from all these groups – the feedback we’ve received has been predominately positive. There are always little nuances about whether or not there should be this facet or that facet put in the bill, but I think there’s a general acknowledgement – well, I know there’s a general acknowledgement out there that this piece of legislation in principle is crucial. There’s also a groundswell of support for the bill as it is currently written.

I notice the time is ticking down. I just have a few concluding remarks. Again, and I make no apologies for repeating this, section 3 quite clearly states that the objective of the program is to educate, assist and support the use of this technology and this program for prescribers and dispensers with relation to drugs that are monitored. In the first instance, that will be opioids. The reason for that I highlighted in my opening remarks. It is not in any way meant to be punitive. That might sound paradoxical given the fact that there are significant chunks of the act which refer to inspectors and quasi-judicial and judicial approaches to what some would view as a clinical activity.

I hope my remarks have framed that in a way that makes that understandable. It is the vast majority of prescribers and dispensers in this province who do an excellent job, competent job, and look to be educated and fine tune their practice using this information. There are, however, small groups or small numbers of individuals, both prescribers, dispensers and members of the public who misuse opioid prescriptions, either for personal reasons in terms of managing their own addiction, for which we now have a tool to identify them and help them, or for criminal activities, which I cannot condone nor will I.

So for those individuals, it is important that we have a mechanism whereby we can deal with them appropriately. The first issue is around identifying and building and verifying your case. That’s where the inspection piece comes in. That’s where the role of enforcing compliance with request for information becomes crucial. If you go back over the last 15 years, for those individuals whose behaviour has been sanctioned because it was egregious, it took 10 years in some cases to bring these people to task and to be able to successfully terminate their activities.
Again, if you go into detail on some of those on an individual level, this was not the first time these individuals have been brought to the attention, but because a framework like this did not exist in terms of data collection and because there was no rigorous mechanism by which they could be held to account, they got away with it, or they got back to it somehow. This is an attempt to close that loophole, because a small number of people with criminal intent actually have a huge impact on the general health of the population.

You don’t want someone diverting significant quantities of opioids into small communities around this province, or any community, no matter what the size. Unfortunately, there are suggestions that that is happening. This will find those individuals and hold them to task. The bulk of the people who will use this are responsible, dedicated, committed individuals who simply want to do their own job better, and that was very much the message we heard from the clinicians I’ve spoken to about the intent of this bill. So this is about building confidence in that group. It’s also about building confidence in the general public so that they realize we have seen a problem and we have acted to manage that.

There are harm reduction issues that will flow from this. This is not going to make our job any easier on the harm reduction front. If you look at what’s happened in other jurisdictions, there has been a move for some people with particular challenges to more illegal activities. So in terms of the addicts options, it has tended to push them towards the street. This is why last year we had such an emphasis on harm reduction. We have not stopped with harm reduction and we have other measures that we are continuing to discuss, both in the province and with our federal counterparts.

Really and honestly, we cannot allow one of these drawbacks to jeopardize what is a sound, popular, well-supported piece of legislation. So, yes, it’s not perfect in the sense that it will have a consequence, but in terms of the problem it is designed to look at, this, I would suggest, is a comprehensive and clear way of dealing with the issues I’ve highlighted.

It builds on a successful program. It builds on the Pharmacy Network, which once the change has been completed, as I say, with the exception of a couple of businesses who had challenges which then turned out to be related to Internet service provider and router, not the program itself, we have had really very little in the way of any issues. It’s already anecdotally started to bring down prescription errors, duplicate prescriptions, and reduced the number of adverse drug events. We will hopefully have some comprehensive statistics to report, probably at the end of its first full year of operation.

We recognize that prescription drug misuse, particularly opioids, is a real issue. This is a start that’s focused on that issue. To get this done, it’s not just going to be a matter of passing a piece of legislation in the House and writing some regulations. To address the societal impact of opioid misuse and addiction – and drug addiction in general is not something government can do by itself – we need front-line health care workers who are dedicated and want to see progress. It also needs the public to recognize several things.

If I had one sort of slightly off-track message here, the recognition that addictions is actually a disease and not a lifestyle choice would probably be the single-biggest societal change that I would welcome in this province. I cannot do that by myself. People of influence, thought leaders, education are all part and parcel of that.

Without that mind switch, we are going to find people who will naysay this on the grounds that somehow we are supporting unacceptable lifestyles. I’ll put that out there now in case anyone wants, either here or in TV land, to bring that argument up. Bring it on. I’ll talk to you about it because you’re wrong – you are wrong.

We acknowledge that the program is taking some time to develop. You can have it quick or you can have it right. This is a compromise. I suspect someone at the beginning of this process, someone wants, either here or in TV land, to bring that argument up. Bring it on. I’ll talk to you about it because you’re wrong – you are wrong.
not a strategy of strategies, but some concrete and tangible developments.

The commitment of the people who have been involved in this, I think, really has to be commended. I’ve already alluded to that in another place, but I think I’d like to read into Hansard the fact that the individuals here, the RNC, the RCMP, the community groups on the Burin and in other areas, and Ruby who actually made the trip in from the Burin today –

AN HON. MEMBER: Marystown.

MR. HAGGIE: Yeah, sorry. Thank you. I’m fumbling for that one.

These folk have committed enormous effort and enormous time to help make this possible. I think it doesn’t do any harm at all to repeat that whenever possible.

Mr. Speaker, I’m going to abridge my time a little bit. I’m simply going to say I commend this bill to the House. I look forward to hearing comments from the other side of the House. I look forward to handling any questions in Committee. I really think this is another milestone in our management of what is a significant public health issue, and I look to the support of the House for it.

Thank you very much.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Conception Bay East – Bell Island.

MR. BRAZIL: Thank you, Mr. Speaker.

It’s indeed an honour to stand in this House on this Wednesday morning and speak to Bill 25, Prescription Monitoring Act. I have to agree with the minister here. There are a number of key points that he’s outlined here that I personally wholeheartedly support, but particularly the first one that in isolation none of us, no matter what agency you are, no matter what professional you are, no matter how much of a concerned citizen you are or if you’re a parent or if you’re a user or recovering addict, that we can solve this issue alone. There has to be a holistic approach to addressing the opioid epidemic that we have here, but particularly the impact that it’s having on our society.

We see it in every community. I’m glad the minister acknowledged, too, that there are grassroots agencies and organizations that are made up of citizens who are coming forward to lend their support to addressing this issue. There’s no doubt we need legislation that helps move it to the next level, that helps us identify exactly what are the main issues, how do we monitor what’s happening, how do we ensure that everybody involved in this are on the same page. There are components and approaches that can be done that will make an even flow to the whole process.

As the minister had talked about, the impact that opioids have had in our society and in this country and around the world, and the devastating impact it’s had on families, but particularly individuals. I’ve had personal experience in my own community with agencies and organizations who have just recently been established because of the loss of young men and women from overdoses and their long battle with their commitments to the opioids.

As the minister had noted, too, we need to get to understanding the philosophy that this is a disease versus just a standard lifestyle. Because there is always some adversity to sectors in society who don’t normally follow that trend. It’s easy to point blame versus actually saying we have a responsibility and we have a stake in this. We need to be able to do that and address it in a manner that solves the issue here, but particularly engages all of our own segments in our society. Looking at how we address the opioid issue here is no doubt very important to our society.

Having legislation that puts it at a higher level and includes the key stakeholders is very important, but I first again want to spend a few minutes about the impact that it’s having. I think that our listeners who may not be tuned in to the issues of opioids and may not have had experienced that in their community, in their neighbourhood or particularly in their family would understand the impact that its having on our society. Not only the ultimate loss of life – that’s the ultimate impact that it would have on
these individuals and their families – but it’s the loss of productivity.

It’s in some cases, unfortunately, the lifestyle that it leads these people who are addicted to the opioids from a criminal point of view, from a lack of education, from a breakdown in the family unit to not being productive citizens, to not being engaged in our society. That has a dramatic effect on what we do in Newfoundland and Labrador.

There’s no doubt any piece of legislation that comes to this House and gets debated, the intent is always to improve a program, a service, to address a particular need, to in some way, shape or form find a better approach to including our citizens and ensuring their quality of life is better. To address that, particularly if it’s a grave issue that people are facing like addictions, particularly around opioids, we need to have legislation that is balanced, respects the individuals who are involved, respects privacy, but finds a better way to ensure that the whole access and the flow is the continuum.

There are going to be different degrees of interventions, different degrees of monitoring, different degrees of partnering to address this particular issue. It’s not just the prescribers. It’s not just the dispensers. This is a bigger issue here. I’m glad the minister ended his address here on that note, that there’s a higher level of collaboration here that has to take place if we’re to address this. What this legislation will do, it will frame it in a legal manner that instructs and guides agencies, organizations, government departments, stakeholders to ensure that the process being followed is in line with us being able to find a solution and address the particular needs.

One of the particular needs has been noted, and it’s been discussed by organizations, users, professionals in the field, is the overprescribing. Probably the bigger underlining issue is: Why are we overprescribing? Is it our particular lifestyles? Is it our physical makeup? Is it it’s easier to address – is it that we have so much faith that we as Newfoundlanders and Labradorians are that much tougher that we don’t get addicted to things as easy in other issues?

That’s not necessarily the truth in the world. We always think we’re indestructible, but in our society, as Newfoundlanders and Labradorians, we’re susceptible to any other issue in life that may be physically detrimental or, in this case, medically detrimental, which has a total impact on your holistic life here and that’s the addictions to opioids.

Opioids are prescribed for various multitudes of medical interventions. As we know, 95 to 99.9 per cent of the population can use that opioid to address whatever particular ailment that’s relevant to without any issues around long-term addictions, without any issues around it totally interfering with their life. As a matter of fact, in a lot of cases it helps them get back to a normal standard of their everyday activities and get to the recovery.

Unfortunately, there’s a group, for a number of reasons, that they become addicted to it. That addiction becomes a disease. How we address that is very important because it has an impact on what the rest of us do here in society.

What we’re going to be talking about here and what I do like about this part of the legislation – and the key component here: It’s meant to educate, support and assist. They are philosophies that we try to embed in everything we do here, if it’s around education, if it’s around inclusion, if it’s around health care, if it’s around democracy. It’s about how we educate people. It’s how we support and how we assist. We need to find the perfect balance that includes all of those three components so that we know at the end of the day what we’ve put in play will be successful.

There’s no doubt there’s no magic wand, there’s no quick fix, there’s no let’s nod and it’s all taken care of. That doesn’t happen in any society. It definitely doesn’t happen when you’ve got something that’s an addictive process and it’s disease related. That’s what we’re dealing with here. It becomes a holistic approach to how we address issues around that.

What we’re creating here is the Prescription Monitoring Program. In a previous life a number of years ago, I had the privilege of working with some professionals in this field about the concept of that. The issue they had was there
was no ability to really monitor how often somebody who was abusing these or were so reliant on them or the criminal element were having access to it.

We didn’t have a proper monitoring process to know what was happening in dispensing and what was happening in prescribing in one area wasn’t happening a day later or two hours later or a week later for that same individual because the intent of the use of it may not have been why it was prescribed. That becomes the dilemma.

Obviously, as a professional who would be in that field, they must shake their head sometimes in disbelief. Because they go in with the right intention, the right diagnosis, the intent of saying here, this will improve your recovery; this will help you get to the next stage so you can be more productive and more engaged in whatever activity you’re doing. This is to address, in a temporary manner, the particular ailment you have. It’s unfortunate, and I can’t even imagine as a professional, a prescriber, a doctor, a physician, what that means when they come back and see their patient further down the road and see what that’s led to, the addiction issue and the impact that’s had on their lives.

I see it talking to some of my pharmacist friends, who’ve seen a young man or a young woman come in, initially having to get a prescription for a particular pain killer, a particular opioid, and then six months later see the downward spiral and the impact that’s had because now they’re addicted to it. It’s become a disease to them. The process of getting them away from that and the supports that are necessary sometimes are not always in play. That has a devastating effect on those who prescribe it.

At the end of the day, I’ve talked to many who’ve said I come in and sometimes I shake them and want to say you’re not getting this prescription; but, at the same time, they know they’re reliant on it. They need to have it. This is their day-to-day activity. So professionals acknowledge the fact there has to be another way that we can do this. The best way, no doubt, is preventative measures.

I see the act as a step forward in preventative measures. No doubt, as I get further down I’ll have a few challenges. As we get to committee I’ll have a multitude of questions about the process, the control mechanisms, the partnering with entities there, the process of how we got to this, but that’s secondary. What I want to talk about here now is the intent of this bill and how positive it is if we can move it and ensure that it meets the prescribed needs that it was set up to do.

As we talk about in communities – again, I relate back to my home community of Bell Island – there’s an organization set up, it’s called Unity in Our Community. It’s solely set up to address the opioid issue that we have over there. It’s unfortunate that it had to be created after some deaths in our community from overdosing, but out of darkness sometimes comes some light.

I’ve been fortunate enough to go to some of these meetings and see the addicts talk about what they’re struggling with, and they’re there. They’re in a room, they’re addicts. They’re telling us they’re going to have to leave to go get their fix, but they still want to be part of knowing there’s a better life for them. They just need the supports.

I’ve been in a room with people who are going through their recovery and the challenges they had. I’ve been there with people who’ve been off it for two or three years and what that means to them, but every day they still struggle with the supports.

I’ve been there with families who’ve lost loved ones and the impact that has, and how they want to prevent it happening to somebody else. Some of the signs they never saw. Some of the safeguards that could have been put in play that just didn’t exist, and still don’t exist, but need to be moved forward so we have a better opportunity to ensure the next group and the next generation down the road can be identified that this doesn’t become the epidemic that it is right now, where it doesn’t continue and we start addressing it and we start dealing with the issue and we start supporting those who have that particular need.

As we get through this legislation, there are a lot of really good points there that I think can be part of that. The monitoring, obviously, has to be one. If we can ensure that only those who should
have these opioids, to have access to it, if we can identify there’s abuse in some part of the mechanism, then we need to deal with that. We need to deal with it in a number of ways.

One, we need to be able to immediately stop the abuse from happening or access to those particular opioids so people can’t continue their destructive lifestyle. We also have to make people accountable for their actions. When I say people, I didn’t say these may be the entities, the professional people who are giving it an understanding. No doubt, they all are part of a bigger philosophy here. They take an oath to do what’s in the best interest of their patients, and 99.9 of them follow that process.

We also have to acknowledge the fact that there’s a criminal element that will find creative ways legally to get something that legally should be used, but to be used in an illegal manner. So there’s a continuum where your law enforcement agencies would have to work with your prescribers and with your dispensers, and with the underlining over umbrella organization which, to me, should be some kind of a board made up of professionals who would monitor the whole process and keep it in line with other types of entities we have that enforce regulations, open up lines of dialogue that promote education and also help develop partnerships where support mechanisms can be put in play.

What this legislation does, it does start that. I’ve looked at a number of other jurisdictions and I’ve seen where they’ve started this process. Some have been very successful. Some have the good mechanism, but the mechanism on paper doesn’t necessarily mean you’re going to have successful results. The key components that go in the continuum, there are some breaks in the line and obviously the outcomes haven’t been where they need to go.

There’s no doubt, like any policy or any program, there’s going to be tweaking. There’s going to be some assessing exactly what’s the best move forward. There’s going to be some addressing how we better use the resources we have and how we better develop partnerships as we go through the whole process itself.

I also have to talk about the functionality of the intent here. The functionality is not to reinvent the wheel. There are a few things here that I have some deep questions about when we get into Committee asking for particular clarification, but the functionality here is not reinventing the wheel, using some of the key things that we already have here.

The Pharmacy Network, something that’s been talked about, it’s been piecemeal for a number of years. I have to acknowledge it’s now up and running. I’ve talked to some pharmacists and they said there are still some challenges with it, but it is being tweaked. Every day there are nuances here where there are suggestions that people are finding better ways to ensure the information and the intent of it is actually meeting those goals. So we’ve come a long way to do that.

There is no doubt technology will improve such that everybody will have access at a moment’s notice. It will be able to draw down on that information. The information that’s accessible is the information that only those who should have access to it – which becomes an issue around putting out so much information and having so much more information accessible. Who is it accessible to? That has to be some of the safeguards.

There are some things within the act that I have to be satisfied, at the end of the day, the safeguards are in play. The information, the privacy part of it, that people shouldn’t have access to the general public or beyond those who would necessarily need it, there should be a mechanism put in play to ensure that. There are a number of questions we’ll have related to that.

The whole concept that was noted about: How do we better engage the existing resources that we have? Like you said, using the Centre for Health Information, they have a decade of expertise. They’ve been refurbished. They’ve been realigned. They’ve set out what has worked and what hasn’t. They’ve tweaked certain programs and services there. They found a mechanism that would better capture our information and better segregate it so it’s usable for what particular needs.
I think noting and agreeing with this part of the act of taking the Pharmacy Network and adding some additional information so we’re being able to extrapolate some additional information so that the Centre for Health Information can identify, if indeed there are some issues there around abuse, overuse or misuse.

There are three components here that we have to look at. We can’t label everybody in one category or another; there are different segments as to what would happen.

I do agree whoever prescribes, whoever dispenses are responsible for exactly what they’re giving out. Now, to what level of responsibility? Well, the ultimate responsibility, and I know they all feel the same way – it’s about ensuring that what is being prescribed would be a benefit to the particular patient and not in any way, shape or form be detrimental to their well-being and their health.

In some cases, it’s acknowledged, we have to live. We don’t live in a utopian society. There are going to be people who take advantage of that. So we need to be able to find the mechanisms to put in play to ensure that our society is safe, particularly from that part of potential abuse.

We know from a financial point of view it’s a very lucrative business because, again, when you’re an addict, you’ve got to have that. In a lot of cases, unfortunately – and this is testimonials from some young men and women and older citizens who have said – it gets to a point where you’ll almost do anything to get that fix that you need to have it.

How do we get to a point where we know there’s a trend? Some will tell me that they started where they could take four and five pills a day and that was quite – then it was eight or 10. Now it’s 12 and 15 and sometimes they’re up to 20 and 30 pills a day to get their fix. They’re finding all kinds of stuff.

I’ve had horror stories where people have told me they went and broke their leg deliberately so they could go in and get prescriptions because the doctor had already caught on to them knowing that they were abusing it. But then they’d go in to emergency and you have a broken leg, a doctor has an oath and a responsibility to fix that. Obviously, they know you’re not faking pain when you’ve just put pins in your leg. Now you get your prescriptions again and now you’re back into a trend of being able to manipulate that for as long as possible. That’s part of the whole process.

It becomes unfortunate that we’ve gotten people into that mode. As was noted, sometimes it is ill-fated processes of what these opioids were intended to do to what they’re actually doing to people.

Conspiracy theories – is it that some companies didn’t share all the data in their research of the impact it would have on people? And that some people might be more susceptible to becoming addicts and this becoming their health disease? Is it deliberate? Was it lack of research at the time? Was it that there was a need for a particular intermediary opioid to address something that wasn’t addressed? Did we build up a resistance to particular painkillers and this over a period of time? There are still all kinds of discussions out there as to how we’ve gotten to this point where opioids themselves have become so addictive and become so reliant on them.

There’s been a whole discussion here around how we address moving forward on this plan. The Prescription Monitoring Program is a first step, no doubt, and it is not in isolation because there are a number of other agencies out there who’ve been doing yeoman service in trying to address the needs around curbing addictions to opioids, access to opioids, prescribing of opioids over a period of time but, again unfortunately, sometimes are working in small silos, in isolation.

What I’m hoping this will do and what I think it has the framework to do is bring all that in line, try to bring it under one prescribed philosophy, if nothing else. It doesn’t force everybody to do their part out there, but it does particularly identify, from a monitoring point of view, the amount of use, who are using it, where they’re getting it from and particularly what the time frames are within that prescribed use and dispensing. I see a number of benefits from where this can take us into addressing the opioid epidemic that we have here.
I’m glad that the minister talked about other jurisdictions and identifying where there are some challenges in other ones. In my own review of other provinces and how they implement them – and other than Quebec, everybody else has some form of legislation. Some, it’s under existing legislation. In our case, it could have been under the Centre for Health Information legislation if we wanted that to be. Having a stand-alone piece of legislation, I’m not adverse to it. I see sometimes there’s strength in having something forthright and upfront so people understand that this is being taken seriously and it spells out exactly responsibility, it spells out exactly the intent of the act and it spells out exactly what you would hope the outcome would be as you move forward.

One thing about a piece of legislation, there’s nothing preventing you from coming back and making changes over periods of time. As you assess the success, as you develop more partnerships, as you understand there are other segments to what it is you’re trying to address and then as you get to that area in life, you make a decision that we need to either upgrade something or there’s something here that we need to remove, or there’s a whole new angle that we need to go to ensure that legislation meets the need that it was set up to do.

In this case, contrary to what people may think, this is a very encompassing piece of legislation because it outlines a number of key components here. It’s not only about the standard legislation of the intent here and the intent about education, supporting, about putting in play the mechanism; it also outlines exactly who the stakeholders would be, their roles and responsibilities. It also outlines exactly the process, and there’s a legal component here. This is just not fluff and data collection for the sake of data collection. There’s a legal component here. This act here will have legal ramifications for professionals in a multitude of health-related professions here about following rules and regulatory processes, but particularly from a legal point of view.

When, in an act, you note your Royal Newfoundland Constabulary, when you note your RCMP and you note other specialized policing agencies, then you know this is a serious bill. Then you know that what’s being discussed here is being taken seriously, and that there’s a full-fledged umbrella process here of accountability and people have to live up to that accountability.

So I just want to take you through some of the things for the bill because what people may not realize – well, what does this include? Is it just a bit of fluff that we’re going to have a computer program and now we have two more blocks on a sheet when you note it? In principle, it’s an easy way to say we’re going to collect more data, but the data collection is only the first part of a bigger picture, and the bigger here is how we address the opioid epidemic. How do we ensure that the resources we already have in play can be used? How do we ensure that those who are not following the ethics, the morals, the proper procedures, the legalities are accountable and, more importantly, can be stopped from doing things that they’re not legally allowed to be doing, and are doing things that are detrimental from a health point of view?

There are a number of agencies here. We’re talking about the Medical Association, we’re talking about the Nurses’ Union, we’re talking about the pharmaceutical association and we’re talking about the dentists. There are a number of people here who have the ability to prescribe opioids and have the ability, on a daily basis, to be seeing those individuals, those patients, who may be at risk of becoming addicted to opioids, or themselves who are already addicted to opioids.

So even that data there, even that collection data there, that resource is a positive to be able to ensure that we start addressing the issue and make the connections between all those who are out in our society who have it their main objective to try and improve the lives and address issues around opioids.

I just want to read some of the key components because as I go through those, I may note some of them; I may get through them all before my time is up. If not, in Committee I’ll have a number of questions for the minister and, no doubt, the minister has had dialogue with a number of stakeholders out there. I’ve had some dialogue with a number of them over the last couple of days, but prior to that, on some other
There’s no doubt, everybody has concerns. Everybody has, as their primary objective, the philosophy of finding a better way to address opioids. I found nobody, no agency, no particular group, no head of a not-for-profit organization who’s adverse to us in the House of Assembly having an act that addresses prescription monitoring, particularly around opioids.

Keep in mind – and it was noted, particularly in the press conference – the issue here is about monitoring drugs. The list right now is restricted to opioids, but that doesn’t mean it wouldn’t be restrictive. So that’s a discussion that we’ll have with the minister in Committee as we get there.

The primary intent here is about the immediate challenge that we have in Newfoundland and Labrador and it’s about those opioids. The act itself, while it’s generic in what it’s doing and it’s open – that it can continue forever and a day adding new drugs to it as if they’re deemed that they have a major impact, that we need to be able to collect that on a more precise basis, and have to have more safeguards in there. And have to have a monitoring process there that becomes a watchdog to ensure that the use and/or misuse or misguided use is being monitored, identified and dealt with by a particular agency authority or a particular supportive intervention organization.

That can be done simply by identifying the information that’s – first, where it came from and then, subsequently, which agency is best equipped to deal with that. I want to talk particularly about some of the issues that are here around the difference between how we will probably be implementing or what’s being proposed here versus some of the other jurisdictions.

One of the biggest challenges that I have here – and it’s no disrespect to this minister or any other minister – is that the minister in this case has absolute power. I have a struggle with that. I have a struggle with that with any piece of legislation when a minister has absolute power over exactly what’s being done.

I understand ministers are there to guide. Ministers are there – they have a responsibility for their line departments. They’re the umbrella guiding light for programs and services, no doubt about it. But when I looked at other jurisdictions and couldn’t find any that were similar where the minister has carte blanche control over the whole process, I tried to find something that I felt comfortable with.

Nova Scotia has a better process where a board is put in place. I have no qualms with the minister or Cabinet or the process where appropriate board is selected to monitor this. We have the Centre for Health Information, so we have a mechanism in play where the information can be stored, disseminated and then broken down to see how it’s addressed as part of that.

But in this case here – and I just want to note because when we get in Committee I’m going to ask the minister then for a little bit more clarification about responsibilities of the minister. As we look at them, they are prescribed basically that the minister has total control over every aspect of this. Now, the minister does have the jurisdiction to be able to designate somebody, and that’s fair enough.

From a personal point of view, I would of rather have a bigger umbrella group that’s already put in play prior to that with the minister’s endorsement – not the minister’s control, the minister’s endorsement – because this organization or agency or board, in a number of jurisdictions, would have the professional ability to monitor the process here and come back with a set of recommendations to either the minister and then to the House of Assembly, about changes to a particular legislation as part of the whole process.

So here’s just some of the things here: “The minister may, in accordance with the Act and the regulations, enter into an agreement relating to the sharing of information with the following persons: (a) a dispenser; (b) a prescriber; (c) a regulatory authority; (d) a law enforcement authority; or (e) another person prescribed in the regulations.”

May – if there was a board here that was made up of these particular individuals, then that information would be directly shared within the
confines of those. And all these agencies already have a vested interest; they’re already part and parcel. They’re the ones who monitor, they’re the ones that are the authorities who police agencies; they have a set of guidelines that must be followed. These are things that are very important, I think, to sustainability, but success here. Because these are the players who all – there’s a continuum here of assessing which agency, if it’s a registered nurse who sees a particular client, who refers them a doctor, who does an assessment, who prescribes an opioid for that aliment to the pharmacist, who fills that, that has that effect. Or we go back, there’s another component here, there are dentists who are involved because somebody just had a root canal needs a particular thing.

Having access to knowing of what the file is for that individual. And that’s why I want to bring it back to the real intent here. The real benefit I see is that there will be one file on your screen where you bring up, will have all the information, particularly around that individual’s use of opioids.

Now you got four or five lenses. If people do what this is intended to do, the health professional, you have four or five lenses to take a particular look at the use, the prescribing, or again, as I said, the overuse or misuse of particular opioids. All of these professionals would have to be in some way, shape or form – no doubt, they’re already trained, they’re professionals, they’re health professionals. In some cases they spent eight, nine, 10 years in post-secondary education being trained to identify particular situations, but there would have to be some additional supports and training here to identify here’s a potential red flag or here’s something I should go back and identify.

I do like that there are a few extra things that need to be done when you’re doing a prescription from a prescriber point of view about some of the issues. Is this the first time that I’ve had somebody actually come in? Is it the second time somebody has come in? Is this a continuum? My assessment was that this injury had been healed; why is this person still depending on that?

I mean, there are things that a doctor, no doubt, asks themselves every day when they’re doing it. And a pharmacist again, because it’s storefront, when they’re people coming on a continuing basis, when they look at their file, would say there’s a red flag here. This person hasn’t had a major alignment. Why is this now another prescription two weeks later?

It’s to identify if there’s some way, shape or form one component or a collaborative approach by a couple of components, be it the patient or physician or somebody else have collaborated to move more opioids or prescribe more opioids than they should. Is it the criminal element has found an illegal way to address this? We’ve heard stories over the years about stealing prescription pads and people filling them out and these type of things, but again the more safeguards that are in play, the better it is.

There’ll be questions around what is the impact that it will have on the physicians from a time point of view, from a report point of view, the same with the pharmacists from that point of view. They are smaller nuances I think can be worked out. I would think that most of these agencies would be welcome to more dialogue, more consultation about finding out how they improve their role and how they use the mechanisms they have or the infrastructure they have to make this less encompassing and to ensure that it meets the particular need that it was set out to do.

There are also issues here around how we move things when we get to law enforcement authorities. What real stake would law enforcement agencies play in this? What role will they play with the prescribers, with the dispensing? What role will they play once things are identified, once it becomes a legal matter, the process – and I know it’s outlined here in certain areas of the regulatory bodies that would then make decisions as to how they deal with what they think is an infraction. Do they then refer it to one of the police forces or to a legal entity to take it to the next level rather than it just being an in-house review and then respective punishment levied on that individual or that group of individuals? Does it become a bigger issue where it becomes a legal matter where police forces have to come in?

Then we talk about the access they would have to information. That becomes one of the fears
here. What we’re doing – and this is not about fear mongering, I want to make that very clear. This is about ensuring that all the components are thought out, so that information being shared on health information is relevant to exactly what the issue may be here. If it’s opioid abuse, fair enough. If it’s relevant to something else, well, then that health information has no bearing and nobody else should have access to that.

There are decisions that would have to be made there. There’s no doubt, the authorities that have a speciality in that particular field should be able to identify that, but I think there’s a little bit of work that needs to be done and a bit more consultation around those particular areas to identify what’s acceptable.

If we do an investigation in a particular area, what health information – if it’s about opioids, has something happened from an ailment previously? It may be a mental health issue before that. It may be something else relevant to your health over your lifetime. Should that information be made available, too? Is it a carte blanche that your health file is available to that entity for review and to whoever the minister may designate as their representative or the designate for inspectors when we talk about coming in doing audits and that?

Some of the entities haven’t necessarily said they have problems with this. What they’ve said is they need clarification. What would the rights be if all of a sudden an inspector can come into a pharmacy and say I demand this file? Well, which part of the file do you demand? Does it have anything to do with someone who had an antibiotic? Are the antibiotic ones also going to be added to these lists? Those continuums here need to be clarified, at the end of the day, exactly what it is the inspectors and the auditors would have access to, because then there’s a real challenge about your privacy. It becomes about your privacy.

People will tell you they would rather somebody know their income than to know what’s in their health file, because people are private around their health conditions. Now, if it’s something that’s illegal, if it’s something that’s been done without following proper regulations, I have no qualms here that that information should be accessible to the authority or a police force to investigate and identify whether or not there’s been a violation and then the appropriate action taken.

The fear I have reading this is there are many unknowns here. That’s the thing, there’s a lot of information here. I give credit, there’s a lot of clarification in some areas. There are a lot of acknowledgements in some areas, maybe not as much clarification in some others as to where does it start and where does it end in certain areas. When you talk about health information, it’s something that people are very wary of having the general public, or people who are designated within the general public, to be able to go and access that type of information.

So there’s a fair bit of clarification here that I will want some clarification in Committee, no doubt. I know there are a number of agencies out there who want some clarification. Only last night when I had a chance – only getting the briefing yesterday – to get my head around it and bounce it off some other people, just average citizens like the rest of us, who would want to know what impact does it have.

Again, I’ve got to be forthright and upfront. Nobody is averse to us finding a better mechanism to identify how we deal with opioids. Nobody is averse to putting a mechanism that prevents those who shouldn’t have access to it having access to it. Nobody is averse to finding a mechanism that ensures the few bad apples that we have in a particular profession are identified and dealt with harshly, because we know the impact this has. This is not just nickel and dime stuff. This is having a dramatic effect on people’s lives. There’s nobody averse to developing a collaborative approach to addressing the opioid issue.

There have been a number of issues that were thrown at me, particularly when it was noted yesterday in our briefing – and I shared it with a couple of citizens I spoke to last night – that this is not exclusive to opioids. There could be other drugs put on the table.

What are the mechanisms that are used to identify that these should be part of the monitoring list? They’re some legitimate questions, and I’m not an authority by any stretch or know anything even remotely close to
understanding how or why certain things would go on, but it was a little alarming when I heard we need to look at one that possibly could go on, it could be antibiotics. I need more clarification to understand where or how would an antibiotic – is it over use? Is it that it’s not fitting the needs now? Is it that we’re not prescribing in the right manner? I don’t know. These are things that worry me.

What worries me, too, is then what other ones get added without it being fleshed out fully to understand the impact? Do we willy-nilly start adding things? I would think that wouldn’t happen here, but my fear is there’s an open-ended process here that doesn’t prevent that.

So I think every now and then – and we’ve gotten caught in this House of Assembly, the present administration, the previous administration got caught with legislation that had holes in it. We were so caught up in doing the right thing that there were so many nuances to it, a few things slipped through.

Again, I went out to people in society and they threw little things at me that I wouldn’t have thought of and I got a briefing on it. There are people who have had no briefings but have been able to identify certain things just in asking questions.

There’s no doubt, that’s what this debate is all about. It’s for us to talk about what our understanding is of the particular bill, what our understanding is of the intent of the bill and what our understanding is of how the bill could be implemented.

While we do that in debate – there’s no doubt, I’ve sat here sometimes shaking my head. No way would I agree with a bill that was coming in. After the debate and the clarification and Committee questions and answers, I would nod and say: Yes, I get it now. I understand.

There’s always some apprehension here and there’s no doubt, there’s always – all of these are live entities. They’re continually being looked at. They’re continually being identified to see and evaluate it, and then we come back to the House and change legislation. This is a particular difference because this is the first kick at this.

We didn’t do what some jurisdictions did and already put it as part of one existing piece of legislation. I’m not averse to that. At this point, I have no problems with that. A piece of stand-alone legislation that addresses a particular need right now and particularly such a serious need, I have no problem supporting that.

There are some challenges here around part of the policing process, part of the access to the files, part of who has access to that, part of the designate, who, where, when and how the designates are going to be put in play, how the reporting process works prior, during and after and who the reporting comes back to. It’s here, but it’s in general context: may, shall. It’s a bit vague in some areas and I’m going to be looking for clarification.

The other thing is about the minister having full control over the whole mechanism. It’s only recently that we went the opposite. In one piece of legislation that we passed in this House recently, we took the minister out of it because it was felt you don’t want the perception that a minister could micromanage and have undue influence on a piece of legislation or a program or a service other than being responsible for the legislative part of it and ensuring that the information, the research and the coordination moves forward. That’s the general context.

I’ve been a minister. I understand that philosophy. There’s no doubt there are times I wanted to micromanage things that we did, but that doesn’t make sense. You can’t do that. To put it in legislation worries me. It worries me because a particular minister being able to do 20 things and make decisions on 20 things consistently in one piece of legislation, when there are agencies and organizations who have and have had for the last decade or century authority over these types of services, the providers who provide those, the input into legislation that monitor what they do and to the actual day-to-day interaction with the clientele that they’re trying to serve.

For a minister to be able to have carte blanche over that, I have some real concerns. Now, I’m open-minded; I can be sold if there’s a rational reason that’s different than my mindset. That’s fair enough. I’m open to that. No doubt, I think we’re all open to having that discussion on this
side of the House, but we need to get to that part of it.

I only bring that up again because it’s one of the few times I’ve seen it where the minister has so much control over a piece of legislation. It says here: “The minister shall (a) administer the program; (b) monitor the prescribing and dispensing of monitored drugs; (c) evaluate the effectiveness of the program; (d) provide information, professional consultation and assistance to the regulatory authorities relating to the prescribing and dispensing of monitored drugs; (e) monitor the use of monitored drugs; (f) educate prescribers and dispensers regarding the appropriate prescribing and dispensing of monitored drugs; (g) educate individuals on the appropriate use of monitored drugs; (h) report to the regulatory authorities on new and emerging prescribed patterns for monitored drugs; and (i) perform any other duties prescribed in the regulations.”

Now, these are normally – I’ve seen this in legislation, but it’s never the minister’s responsibility; it’s board chair, it’s the regulatory body, it’s a particular agency. To have the minister given full authority over all these things, obviously, as you read that, it’s pure micromanaging if the minister was to do that. I know no minister would ever do that. I would think that’s not the intent here. No matter what their skillset was, the time frame would never allow them to do this. These are things here that are somebody who solely, fully entrenched in doing that particular job. This would be somebody’s full-time job to do this.

Obviously, the Minister of Health and Community Services has a multitude of other responsibilities that would take them in other directions also in performing their duties. So that’s why I ask is it necessary to have this in here and what the intent was. As I went through some of the jurisdictions, I couldn’t see that that was the main philosophy here. I see the minister shall appoint a regulatory organization, a board, a representative to do exactly what’s outlined here. I see all that. I see the benefits of that. I see how that would be, in my opinion, a better way to move things forward because, from my philosophy, on a daily basis somebody or some group, or some organization or some board would have that responsivity. That board, particularly, would be made up of a multitude of people who have a vested interest here because they come from the regulatory bodies, they come from agencies that have set out, particularly, the responsibility around addressing opioid monitoring and the impact that it has.

I see a benefit from that, and that’s why I particularly like Nova Scotia’s. Not everything in Nova Scotia was perfect. I like the fact that we have taken some of our own approaches in some other categories here and other sections. I like that we’ve taken some from BC. We’ve taken some from Ontario. There are some there from New Brunswick. We’ve been encompassing those to do that.

The one I don’t see, the trend across the country, is that the minister has carte blanche. The fear in carte blanche is, again, and I mentioned earlier, what other drugs can be added. I think somewhere here it notes that minister would recommend to Cabinet additional monitored drugs to be added to the list. I have a concern about that, too.

I would think this is where the agencies and organizations, the authorities that have the speciality in that area, would be the ones that would make these recommendations, through research, through consultation, would identify exactly what the issues are. I would see also from public acknowledgement that these are the challenges we have. There’s been a trend in a particular drug, either being abused, misused or over prescribed as part of that whole process.

That would be, to me, a very functional process. I would think 80 per cent of the legislation we have here, where there’s a regulatory process of monitoring and reporting back and engaging and then making modifications to exactly whatever that program operates has, somewhere along the way, a monitoring board or agency who oversees all of that. Legislation that I’ve been part of, that’s normally how it would work. When you have legislation that is relevant to doing research, monitoring, overseeing, implementing, somebody has to do that. It’s not at the minister’s level.

I find this a little bit concerning, a little bit bewildering, but I’m open for clarification. I have no qualms on that, getting that clarification.
as to why the government decided to go this route. That will be curious. I know some other agencies have asked the same thing.

I do have another concern around – and I noted it earlier – the access to the information. I particularly would want to have some real clarification on how do we ensure that the opioid process, when a pharmacist goes in or a doctor goes in to review the file, and they both have responsibilities and access to it, because they do, the information that’s there that if, indeed, a red flag is noted and a designate, an inspector, an auditor comes in, what is it that they’re auditing. Are they auditing the whole health file? Are they going through everything relevant to somebody’s perspective? If that’s indeed the case, then I have a challenge on that, too. I have a challenge because that’s not the issue that we’re addressing right here.

If that’s a bigger issue that your health information now can be easily and readily made available to anybody, to a police force who comes in because somebody has been accused that you’ve been overprescribed medications, or you’ve overused them or you’ve illegally accessed them, then that’s a different story than what’s also in your health file. That may be relevant to people in your family. In your health file, doctors take notes and there are things there relevant to discussions that took place about situations of how your ailments occurred or things relevant to that.

I think we have to go back to a balance. The minister said this is at the beginning: This is about a balance. I agree. It’s about functionality and it’s about balance, the functionality of using the resources we have. The Centre for Health Information, the Pharmacy Network, a multitude of very highly trained professionals dedicated to their particular fields and their expertise to identify and weed out the very small proportion who are not following the regulatory and legal matters here, to identify better ways that we can help the particular patients, and that what this is about – or the particular citizens here. It’s about the fact that we’re identifying opioids because they’re having a major impact on our society and a major impact on individuals in our society.

This is a proactive approach here and I agree with it. It’s proactive because we’re now going to outline a strategy that first gets at the root of the situation here, how people have access to these opioids. Time frames – and I mentioned that earlier, who prescribes in this. Is there a mode? Is there a consistency here? Is there a different approach we can use?

The gathering of information is important because it will weed out those who are not following the process. But I’m thinking the information, too, can be better used through one of these regulatory boards or the board itself – I would think the advisory board – to identify other streams that may be added here. If we add this here, if it goes to the prescription monitoring, maybe there are other components there that can identify other issues that pharmacists and prescribers, doctors, deal with when it comes to better use of health, better interventions in our health-related supports.

There’s a whole mechanism here that should be used. I noted the minister talked about consultations, and no doubt the people that were involved in these consultations wholeheartedly have an expertise in these fields, wholeheartedly are committed to what they’re doing there, but I am hearing from a number of them, some who were involved in this. That while they want this to happen and they know it’s needed, that there’s still some consultation. There are still some things that need to be fine-tuned here to make this more effective.

It’s probably better that we delay it for a little short period of time to make sure it’s done right and meets its particular needs and it’s effective the day it becomes real and it’s in a real-time process. To start it and then halfway through have to come back and say this is not working the way we wanted it and then put everything slow. Once the momentum starts and you stop it, it takes a lot longer to get people on side again and keep moving things. So if we’re going to do it, let’s do it. Let’s fill in any of the gaps that may be identified.

There’s no doubt there’s some inclusion here with some other stakeholders, there’s no doubt of flushing out a little bit more of the definitions on some of these. Maybe these are not all the right approaches in some areas, but I’ve gone through it. A lot of this, a fair bit of this to me would fit the needs of what we’re trying to
address here, but there are a couple of challenges and I’ve outlined some of those. No doubt, some of my colleagues will outline some of the other ones that I haven’t.

I want to go back again, and there are two things I want to reiterate. I want to reiterate, first, my personal support for the philosophy and the process here and the intent of the bill. A majority of what’s in here, the regulatory components here are very efficient. They spell out exactly what would be engaged.

I do want to emphasize the challenges I have here around how we determine which drugs get added, outside of the opioids. I understand that and I understand why we’re going there and we’re going to label them in one category, and rightfully so. We need to do that. We need to immediately start looking at how we address that particular issue. So put them in that pot, that’s fine.

I have a fear of an open-ended process where at a whim or at somebody’s suggestion, Cabinet can decide there are other drugs going on that, without knowing exactly what process is followed there. Is it a set of recommendations from a board? Is there research done on something relevant to that?

So I’m going to want some clarification around what the process, the intent of the process, and what the plan would be from the minister and from the designate or a committee he may strike. Also, again, clarification around the ability to ensure that people’s information is not readily accessible to those, other than those who directly should have it, relevant to whatever that issue is.

In this case, the issue is around overuse, misuse, misdiagnoses when it comes to opioids. It’s an open-ended file that when an inspector comes in or an auditor, they take that and they have access to all of that. How are we going to ensure safeguards there around people’s privacy?

I’d like to know what the Privacy Commissioner’s view would be on this because, obviously, this is a new piece of legislation. I’m not quite sure what input he’s had to it. If he only got it yesterday like I did, I’ll be three weeks trying to figure out exactly what each clause means, or what the intent of each clause is. I’m hoping to find that out when we get to Committee because I’ll ask the minister in a number of cases to clarify exactly where some of those issues are.

I also have, as one of it is, again, a board. Somewhere along this process I feel there should be a board established, made up of the professionals. I don’t just mean the regulatory ones who will be the policing bodies to ensure if someone violated something that they’re punished properly, or it’s addressed in a manner that is befitting that particular classification or that particular profession.

What I’m talking about is an overarching agency, board, that would ensure that this legislation is being enacted, that it’s being monitored to find out if it’s meeting its needs, and then that there’s a set of recommendations coming back. Some of those might be recommending back to the minister, who in turn takes it to Cabinet, who in turn takes it to this House and says we want to add this list of other drugs because here are the impacts they’re having, here are the challenges we have or here are the concerns we have. All legitimate, no problem.

I have no problem with the process. I have a problem with who is responsible for certain components of the process here. One is the minister having full-fledged carte blanche control over it. The second is we don’t have a stand-alone, upfront board, organization that would have the regulatory advisory capacity to ensure that this House has more advice, more open debate, more recommendations as to how we improve this because it’s the first kick at this.

This again, as I mentioned earlier, is a living document. It’s going to grow, it’s going to be changed, it’s going to meet different needs. So we need some organization out there, some entity and a regulatory board that we have here, or an operational board, an advisory board that some other jurisdictions have to me would fit that particular need. Particularly, when we already have agencies who could suggest, or put somebody there who would come with the knowledge of how they could, from their stakeholder’s point of view, improve this piece of legislation and ensure it meets its particular needs. That’s another one of the issues I have.
The underlying issue here is about – we talked about assessing, improving, educating. I’d like to know a little bit more of how we’re going to do that. Is this a resource related thing we’re going to do? Are we going to develop better partnerships? Are we going to take it and run with it the way we should?

Are we going to now make this a living entity, so continuously every one of these organizations will have an open-door process to come in and recommend? Here’s what we found. Here’s how our members feel that they can better improve this piece of legislation and ensure that we as a society here and we as a government and we as the citizens of Newfoundland and Labrador can ensure that the challenges we have and the epidemic we have with opioids are being addressed. The best way to do that is to have open dialogue, have a process in place, but have those professionals who best advise government.

Mr. Speaker, I’ll have a chance to talk to this again in Committee.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Burin – Grand Bank.

MS. HALEY: Thank you, Mr. Speaker.

Mr. Speaker, it’s my privilege to rise in this hon. House today to participate in the debate on Bill 25, the Prescription Monitoring Act.

Mr. Speaker, I’m sure we have all heard the very sad stories of abuse and overdose related to the use of opioids. Our province is not immune to the opioid crisis, Mr. Speaker, people are dying from overdose.

In 2016, in Newfoundland and Labrador there were 57 hospital admissions involving opioid poisonings and 16 apparent opioid-related deaths. What may have been seen as a problem in other parts of Canada and the world is now on our doorsteps. Mr. Speaker, the deadly drug fentanyl is now on our streets.

We all have to recognize that prescription drug abuse, especially opioids, is a real issue that impacts the lives of Newfoundlanders and Labradorians every single day. We all have to do our part, Mr. Speaker. The provincial government, the Members of this hon. House, the public, our communities and our front-line health care professionals need to work at finding ways to reduce and address this very serious and real public health issue.

A Prescription Monitoring Program is a tool that can help address this opioid crisis. It can help improve the prescribing and dispensing of monitored drugs and controlled substances. It can support ways to lower or prevent the harms related to these drugs, Mr. Speaker, and it can help identify patients who may be at risk of addiction.

Every province in Canada, except Quebec, has some form of prescription monitoring. A Prescription Monitoring Program is not intended to prevent the use of opioids for legitimate medical purposes. There are many reasons why an opioid is the most appropriate treatment for a patient’s condition. The Prescription Monitoring Program, Mr. Speaker, is not meant to deter prescribers from making an informed clinical decision to prescribe an opioid. Rather, it assists prescribers by providing them with necessary and available information to make the best clinical decision for a patient.

Bill 25, the Prescription Monitoring Act, which sets out the legal framework for the province’s Prescription Monitoring Program, is another step in our government’s Opioid Action Plan. The Opioid Action Plan, which was launched in November of 2016, includes a number of initiatives aimed at addressing the opioid issue, including a new mandatory safe prescribing course for physicians, public awareness and education program on opioids, naloxone take-home kits and naloxone pop-up tents.

The Prescription Monitoring Program and Bill 25 will also meet one of the recommendations presented in the Mental Health and Addictions Action Plan, Mr. Speaker. The Prescription Monitoring Program will build upon the success of the provincial Pharmacy Network. The Pharmacy Network is a component of the electronic health record, which is commonly referred to as HEALTHe NL, that allows
HEALTHe NL is a private record of an individual’s health care information, available electronically to authorized health care professionals. It integrates information from many sources into a single lifetime record of an individual’s key health history and care.

As of this spring, all pharmacies in Newfoundland and Labrador were connected to the Pharmacy Network. The Pharmacy Network gives health care professionals access to a person’s medication profile. Mr. Speaker, when a prescription gets filled at a pharmacy, the Pharmacy Network stores information about a person’s medication history. The Pharmacy Network makes it easier for pharmacists and other health care professionals to make more important informed decisions about care and helps prevent harmful drug interactions.

Data from the Pharmacy Network shows that benefits are already being realized. There has been a decrease in adverse drug events, there has been a decrease in prescription errors and there are reduced duplicate prescriptions, Mr. Speaker.

The Prescription Monitoring Program will operate in tandem with the Pharmacy Network to detect an alert to questionable activity when a prescription is filled. For example, it is intended that the program will automatically flag where a person has visited multiple physicians or pharmacies within a defined period to get more opioids.

Other activities that may be flagged include where patients on an opioid-dependent treatment receive prescriptions for other opioids, where opioids are prescribed or dispensed in a supply of greater than 30 days and where patients attempt to create multiple patient profiles at multiple pharmacies.

With the program, there will be a stronger ability to identify excessive and inappropriate use of a number of serious drugs such as opioids, Mr. Speaker.

Bill 25 states that the objects of the Prescription Monitoring Program is to monitor, analyze and report information related to the prescribing and dispensing of monitored drugs in order to educate, support and assist individuals on the appropriate use of monitored drugs and to educate, support and assist prescribers and dispensers in appropriately prescribing and dispensing monitored drugs.

Monitored drugs will be prescribed in regulations to initially capture opioids. The Minister of Health and Community Services will be here to oversee the program. The minister will be responsible for administering the program; monitoring, prescribing and dispensing practices of monitored drugs; evaluating the effectiveness of the program; providing information, professional consultation and assistance to the regularity authorities relating to prescribing and the dispensing of monitored drugs; monitoring the use of monitored drugs; educating prescribers and dispensers about appropriate prescribing and dispensing of monitored drugs; educating individuals on the appropriate use of monitored drugs; and reporting to regulatory authorities on new and emerging prescribing patterns for monitored drugs.

This bill permits the minister to delegate his powers and duties and it is the intention that the administration of the program be delegated to the Newfoundland and Labrador Centre for Health Information. The centre currently houses a number of provincial electronic databases, including the Pharmacy Network, from which data and reports will be drawn to monitor and analyze the use, prescribing and dispensing of monitored drugs.

Under the bill, Mr. Speaker, a prescriber will be required to check a patient’s medication profile contained in HEALTHe NL prior to prescribing a monitored drug. Dispensers will be required to record the prescription in the Pharmacy Network and to check a patient’s medication profile prior to dispensing a drug.

Regulatory authorities who license and register prescribers and dispensers will be required to provide notification where the licence of prescriber or dispenser has been suspended,
Bill 25 highlights the importance of providing accurate information to prescribers and dispensers whose role it is to make the best health care decisions for their patients. As such, the bill states that a patient is not to knowingly provide false or misleading information to a prescriber or dispenser.

As I indicated earlier, the program has the ability to flag certain questionable activity, such as where a person has visited multiple prescribers or dispensers to obtain opioids. Where those activities are flagged, officials may have to reach out to prescribers and dispensers to seek clarification with respect to a prescription. The minister or his delegate may request information where it is reasonably necessary to achieve the objectives of the program.

Where the requested information is not forthcoming, Bill 25 authorizes an inspector appointed by the minister to attend at the place of business of a prescriber or a dispenser to access information and review documents in order to determine compliance with the legislation.

Mr. Speaker, except for the requirement that prescribers view a patient’s medication profile prior to prescribing a monitored drug, it is proposed that the majority of the bill will come into force on January 1, 2018.

SOME HON. MEMBERS: Hear, hear!

MS. HALEY: The requirement that prescribers view a patient’s medication profile will come into force six months later on June 30, 2018, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MS. HALEY: This delay in proclamation will allow time to work with those few prescribers who do not currently have the technology in place to allow access to the patient medication profile. It will also give prescribers the time necessary to build this requirement into their practice.

This phased-in approach is not dissimilar to the process undertaken with respect to a pharmacy’s access to the Pharmacy Network, Mr. Speaker. It is unfortunate that we have to come to a time in our province where we require a Prescription Monitoring Program.

SOME HON. MEMBERS: Hear, hear!

MS. HALEY: However, misuse and abuse of opioids is a real problem facing Newfoundlanders and Labradorians. We need to take action to protect our families, our neighbours and our communities from the forces of opioid addiction. Bill 25 is indeed an important step in that direction.
Mr. Speaker, I take this opportunity to recognize Mrs. Ruby Hoskins of Marystown on the Burin Peninsula. Ruby is a strong advocate and chair of the Stand Against Drugs Committee. I say thank you to Ruby for all the good work she has done and continues to do.

I am very pleased to support this bill and I ask all of my colleagues in this hon. House to also do their part and support Bill 25. Mr. Speaker, given the time, I now adjourn debate.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

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

MR. A. PARSONS: Thank you, Mr. Speaker.

Given the hour, I would suggest, with consent from my colleagues across the way, that we recess until 2 p.m.

MR. SPEAKER: In accordance with provisional Standing Order 9(1)(b), this House stands in recess until 2 o’clock this afternoon.

Recess

The House resumed at 2 p.m.

MR. SPEAKER (Trimper): Order, please!

Admit strangers.

I’d like to welcome to the public gallery today, Mr. Mark Brown, who will be the subject of a Member’s statement today. Joining Mark are the current and past chairs of the United Way, Tammy Davis and Kathryn Atkin.

SOME HON. MEMBERS: Hear, hear!

Statements by Members

MR. SPEAKER: For Members’ statements today we have the hon. Members for the Districts of Windsor Lake, Lewisporte – Twillingate, Fogo Island – Cape Freels, Conception Bay East – Bell Island, Placentia West – Bellevue, and Terra Nova.

The hon. the Member for Windsor Lake.

MS. C. BENNETT: Thank you, Mr. Speaker.

It gives me great pleasure to rise in the House today to recognize Mr. Mark Brown of Windsor Lake who was recently honoured by United Way.

In 2002, Mark started his work to establish a chapter of United Way in our great province. In 2005, United Way of Avalon was launched and then became United Way of Newfoundland and Labrador in 2009.

Mark has dedicated the last 15 years to United Way in many forms. He was the founding chair, is a member of the past chairs council and now his volunteer work has been recognized by the establishment of the Mark Brown Community Builder Award.

This Community Builder Award recognizes an individual who works to build stronger, more resilient communities through volunteering with United Way.

As a member as the past chair advisory council, I’m confident that Mark is excited to see United Way grow and create an even greater impact in our communities.

Thank you, Mark, for all your hard work to such a great organization.

As Mark would say: “Each of us has something to offer. Every little bit counts.”

Mark, we’re so grateful for your efforts.

Thank you.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Lewisporte – Twillingate.

MR. D. BENNETT: Thank you, Mr. Speaker.

I rise in this hon. House to recognize a good friend and an award winning singer-songwriter from Lewisporte, Mr. Terry Penney.
Terry’s accomplishments encompass multiple Music NL awards, including Male Artist of the Year, Songwriter of the Year and two-time Country Artist of the Year. Terry has also received recognition on the national and international music scene for his outstanding work.

Terry has captivated audiences from England, Ireland, the United States and various parts of Canada. Through his song writing and performances, Penney has given a strong voice to Newfoundland and Labrador war veterans since the release of “Normandy in Newfoundland” in 2002. Since that time, he has released several critically acclaimed songs inspired by our veterans.

On November 3, I had the honour of attending Terry’s eighth CD release, The Unforgotten: Stories of Newfoundland Veterans, which featured a literary collection of short stories, song lyrics, interesting facts and wartime photographs, as well as a full-length CD, featuring nine war-related songs written by Penney.

Mr. Speaker, I ask all Members to join me in congratulating Terry Penney on his past accomplishments and wish him much success in his future endeavours.

Thank you.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Fogo Island – Cape Freels.

MR. BRAGG: Thank you, Mr. Speaker.

Today I rise in this hon. House to highlight a milestone upcoming for a senior and her family from my District of Fogo Island – Cape Freels.

Leah Ackerman was born in Pound Cove, Bonavista Bay, on November 23, 1917. She was one of eight children born to the family of Spencer and Beatrice Green. At the age of 16, she travelled to St. John’s where she found employment working as a nanny for a family on Shaw Street.

Four years later, she returned home for the Christmas holidays where she met her future husband, Elisha Ackerman. They married on March 10, 1938 and moved to Wareham. Together they had 12 children and, from that, 25 grandchildren, 45 great-grandchildren and nine great-great-grandchildren.

Back in the day, Mrs. Ackerman held the highest level of education in the community. During the Second World War, mothers and wives would drop by her house to have letters from loved ones read. Mrs. Ackerman is known for her generosity, opening her door to many over the years.

Please join me in wishing Mrs. Leah Ackerman a very happy 100th birthday.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Conception Bay East – Bell Island.

MR. BRAZIL: Thank you, Mr. Speaker.

I stand today to recognize the passing of a very valuable educator and volunteer in my district. I speak of the recent passing of Mrs. Joan (Craig) Whelan of Bell Island.

Joan had served as a volunteer with a number of organizations over her 77 years, but it is her contribution to education on Bell Island where she made her biggest mark. Her nearly three decades as a teacher in the mainstream school system played an important role in mentoring and guiding hundreds of young students. Her advocacy for those who could not advocate for themselves, particularly those who needed an alternate approach to education and social inclusion, is a true testament to her commitment to her community.

As the founding member and the volunteer coordinator of Operation Sunshine for the past decade, she improved the quality of life for a number of special needs adults while providing services to the Janeway’s Neonatal Unit, the Boys and Girls Club and numerous other organizations.
Her energy and enthusiasm never faltered, even though Joan lived most of her life with physical limitations. Her dedication and commitment to her community will be missed.

Rest in peace, Joan.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Placentia West – Bellevue.

MR. BROWNE: Mr. Speaker, I rise today to recognize the honourable Mr. Vikas Khaladkar, a newly appointed Justice of the Supreme Court of Newfoundland and Labrador.

Justice Khaladkar’s professional resume is extensive and impressive. From appearing as co-counsel before the Supreme Court of Canada on a case which solidified the rights to provide persons detained or arrested with right to counsel, to serving as chair of the Project Management Team for the construction of the First Nations University of Regina Campus, to prosecuting MHAs as the Crown Attorney in the aftermath of the House of Assembly spending scandal.

His legal credentials are self-evident and his sense of justice is unshakable, but so too is his sense of community. As a resident of Sunnyside in my District of Placentia West – Bellevue, he became dedicated to the Heritage Committee and was always someone Mayor Snook felt the town could rely on. He also became known for his talented photography. In fact, one of his photos of the Hebron GBS at Bull Arm still hangs in my office today.

Mr. Speaker, I ask all hon. Members to join me in congratulating Justice Khaladkar on his appointment to the bench and wish him and his wife, Susan, all the very best.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for the District of Terra Nova.

MR. HOLLOWAY: Mr. Speaker, I rise today to acknowledge the outstanding contributions and leadership of Mayor Genevieve Squire.

Genevieve moved to Eastport in 1971 after completing her post-secondary education in St. John’s. Shortly after getting married in 1972, she was employed for five years with the Eastport Peninsula Committee for Development of Progress. For the next 31 years, Genevieve worked at the Terra Nova National Park as a financial specialist. In recognition of her leadership abilities, in 2003 she received the People Management Award.

Outside of her work, Genevieve has volunteered with various community-based organizations including the Eastport Peninsula Firettes, the Santa Claus parade committee, the Venture Credit Union, the memorial park and playground committee and the Gander Airport Authority. For the past 10 years, Genevieve has headed up the Eastport Seafest festival committee.

As a former Beaches Arts & Heritage Centre board member, she is among the shortlist of individuals who make up the Hall of Honour.

Currently in her fifth term on the Eastport town council, Genevieve is serving her third term as mayor.

Mr. Speaker, I ask all hon. Members to join me in recognizing community activist Genevieve Squire.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: Statements by Ministers.

Statements by Ministers

MR. SPEAKER: The hon. the Minister of Transportation and Works.

MR. CROCKER: Mr. Speaker, I am pleased to rise today to inform hon. Members of the completion of a significant piece of infrastructure that has strengthened the transportation network throughout Newfoundland and Labrador.

In October, the new Sir Robert Bond Bridge opened to traffic over the Exploits River in
Central Newfoundland. The bridge is a welcome addition to the region and makes travelling throughout the area much easier.

Mr. Speaker, I extend my thanks to local residents and businesses for their patience as they waited for this bridge to be completed. However, our work in upgrading road infrastructure in this region is far from over.

For the remainder of the season, the contractor will be working on demolishing and removing the old bridge. In addition, a contract for permanent approaches on each side of the bridge has been awarded. This project and work to upgrade and repave the interchange of Botwood Highway and the east exchange to Bishop’s Falls is set to begin next year.

Mr. Speaker, it is important that Newfoundlanders and Labradorians know that our government will provide significant highway improvements such as the Sir Robert Bond Bridge. This year, our department paved more than 600 kilometres of highway and replaced more than 300 culverts.

And we are currently inviting residents to identify provincial highways and bridges that should be considered in the second year of our five-year roads plan. We continue to provide infrastructure that is important to the travelling public of Newfoundland and Labrador.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

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

MR. PETTEN: Thank you, Mr. Speaker.

I thank the minister for the advance copy of his statement. Mr. Speaker, we are pleased to celebrate the opening of the new Sir Robert Bond Bridge and we welcome the completion of this project, which was another initiative started under our administration.

The old bridge was an important issue, not just for area residents, but for all members of the travelling public, and I know the completion of this new bridge was highly anticipated.

I’m so glad to hear the minister acknowledge the importance of improving the transportation infrastructure in our province, and I encourage him to release the scores for the province’s network of highways so that the residents of the province can see exactly where their request for roadwork rank on the Liberal’s five-year roads plan.

Thank you.

SOME HON. MEMBERS: Hear, hear!

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

MS. MICHAEL: Thank you very much, Mr. Speaker.

I, too, thank the minister for the advance copy of his statement. I’m happy the people of Central Newfoundland finally have their new bridge. I’m also pleased government is following its Five-Year Provincial Roads Plan – something we called on for years.

We have been asking for government to work climate change into their plans for repairing and replacing infrastructure such as culverts, drains and ditches. I hope to see the new initiatives in government’s upcoming Climate Change Action Plan.

Thank you very much, Mr. Speaker.

MR. SPEAKER: Further statements by ministers?

The hon. the Minister of Service NL.

MS. GAMBIN-WALSH: Mr. Speaker, I rise in this hon. House today to recognize the National Day of Remembrance for Road Crash Victims.

The third Wednesday of November is set aside each year for Canadians to remember those who have lost their lives or been seriously injured on Canadian roads.

Annually, more than 1,800 people are killed in road crashes in Canada and more than 160,000 are injured.
Mr. Speaker, it only takes a moment for lives to change forever because of a crash on our roadways. It also only takes a moment to make the decision to drive safely.

At an event this morning at RCMP Headquarters, I met with many people who are dedicated to raising awareness about road safety.

Service NL’s Highway Enforcement Officers, the RCMP and the RNC are doing valuable work to raise awareness and ensure the Highway Traffic Act is respected.

Groups like Mothers Against Drunk Driving, STAND for Hannah, the Save Our People Action Committee and Safety NL also provide valuable input to government as we all seek ways to make our roads and highways safer.

I call upon everyone here today to join me in thanking those who support and promote road safety in Newfoundland and Labrador.

Thank you.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Cape St. Francis.

MR. K. PARSONS: Thank you very much, Mr. Speaker.

I want to thank the minister for the advance copy of her statement. We also recognize the National Day of Remembrance for Road Crash Victims. Mr. Speaker, our thoughts are with those families, friends, individuals and communities that have suffered losses and have personally been impacted by road crashes.

I also would like to take the opportunity to thank those who keep our roads safe, particularly the RCMP and RNC, and those government and non-government organizations who work hard to improve and educate us about the importance of road safety and offer support to those affected by these tragedies.

Mr. Speaker, road safety is indeed a shared responsibility. We all can and must do our part to make our roads safer. Safe driving saves lives and we must all do our best to help ensure that everyone comes home safe.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

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

MS. MICHAEL: Thank you very much, Mr. Speaker.

I, too, thank the minister for the advance copy of her statement. My sincere condolences to the families of the many road crash victims in our province. I thank the many groups and agencies promoting road safety in our province.

I point out to the minister that casualty rates in this province are higher than the Canadian average. So we have much to do to ensure that the act is being better enforced and to improve the enforcement of speeding and distracted driving laws.

Thank you very much, Mr. Speaker.

MR. SPEAKER: Further statements by ministers?

Oral Questions.

Oral Questions

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

MR. P. DAVIS: Thank you, Mr. Speaker.

Yesterday during Question Period when the Minister of Finance was asked about job cuts, he gave somewhat of a fragmented answer. He referred to other than deputy ministers and some managers – and we know that most of them were replaced by their own Liberal friends. He talked about most of what we’ve achieved and talked about upwards of 600 positions in government. He also went on to make a comment that they’ve practised attrition.

So I asked the Minister of Finance: Can you table a list of positions that have been eliminated by attrition?
MR. SPEAKER: The hon. the Minister of Finance and President of Treasury Board.

MR. OSBORNE: I don’t have that information here, but I’ll certainly locate the information and provide it to the House.

SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you, Mr. Speaker.

We look forward to that. He had some numbers yesterday, so it shouldn’t be too long or too difficult to find.

Yesterday, again in Question Period, when attrition was being discussed, he talked about reductions in the public service.

I ask the minister: How much has been realized in savings as a result of your attrition plan, and what percentage of your payroll has been reduced?

MR. SPEAKER: The hon. the Minister of Finance and President of Treasury Board.

MR. OSBORNE: I can get those exact dollar figures for the Member opposite as well.

What I can say to the Member opposite is that we are focused on attrition within core government. We’re asking our agencies, boards and commissions to be focused on core government.

Mr. Speaker, I can say as well to the Member opposite: While his government grew the size of the public service by 20 per cent, putting the taxpayers of this province at risk, we will not be doing the same.

SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you, Mr. Speaker.

I remind the Minister of Finance that it was while he was a minister that government grew. I can tell you that during my time as a Cabinet minister and premier, we shrank the size of government, Mr. Speaker.

Mr. Speaker, there is some confusion over attrition. In 2007 Estimates, the Minister of Health and Community Services indicated that they were not following an attrition plan. But yesterday the Minister of Finance says they are using an attrition plan.

I ask the Premier: Can you confirm? Is that a government-wide attrition plan that’s being followed or just some departments?

MR. SPEAKER: The hon. the Minister of Finance and President of Treasury Board.

MR. OSBORNE: Mr. Speaker, what never ceases to amaze me with the Member for Topsail, the former premier of the province, is the fact that he’s never been honest with the people of the province.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Minister of Finance and President of Treasury Board.

MR. OSBORNE: Mr. Speaker, what never ceases to amaze me with the Member for Topsail, the former premier of the province, is the fact that he’s never been honest with the people of the province.

SOME HON. MEMBERS: Hear, hear!

MR. OSBORNE: He projected a $1.1 billion deficit in 2015, continued to have the people of the province believe that the number was $1.1 billion even through the election when he was making spending promises. I’ll tell him this as well where he’s not being honest with the people of the province, the budget grew from the time I was minister from $4-point-something billion a year to $5.4 billion a year. After that, you became minister and we got an $8.7 billion budget annually. Check your numbers.

MR. SPEAKER: Order, please!

SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you, Mr. Speaker.

I’ll deal with that in due course, as the minister likes to say as well.

On April 27 of this year, the current Finance Minister’s predecessor said: “What is missing from the attrition discussion and attrition plan … was a full and comprehensive workforce plan
which we intend to build as part of our zero base budgeting, Mr. Speaker.” That was the previous minister.

I ask the current Minister of Finance: Can you please provide an update on your predecessor’s plan of a full and comprehensive workforce plan?

MR. SPEAKER: The hon. Minister of Finance and President of Treasury Board.

MR. OSBORNE: I can tell the Member what our plan is. We haven’t had massive layoffs; we haven’t cut public services to a huge degree. We’re not asking agencies, boards and commissions to do that either. What we’re asking them to do is what we’ve done in departments, and that’s to find efficiencies.

In core government, we went from 9,000 – we reduced upwards to 600 positions in core government. We’re asking agencies, boards and commissions to do the same.

I didn’t hear any media announcements of mass layoffs because there were none. What we’re asking agencies, boards and commissions to do here is simply find efficiencies.

SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you, Mr. Speaker.

I appreciate some of that information there from the minister because they are asking agencies, boards and commissions to practice attrition. He referred to that yesterday.

Minister, what are the targets that you’re going to assign to agencies, boards and commissions? How many people will be replaced for how many people that leave?

MR. SPEAKER: The hon. the Minister of Finance and President of Treasury Board.

MR. OSBORNE: Mr. Speaker, that obviously varies by agency, board and commission, just as it varies by department. We can’t put a stringent, across-the-board number on this. What I will say, Mr. Speaker, is that we’re not looking to have an effect on the services that are provided to the people of the province, just as we didn’t through departments in government, but we need to find savings. We cannot ask the taxpayers to dig any deeper into their pockets.

If the member opposite is telling us that we shouldn’t look for efficiencies and we shouldn’t look for savings, why don’t you tell the taxpayers of the province what you expect them to do about it?

SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you, Mr. Speaker.

It almost sounds – every day the Finance Minister gets up, he’s asking for help from the Opposition and wants our assistance. Maybe he can’t figure that out himself. He’s the minister; he’s supposed to be leading the issue and the province here, Mr. Speaker.

In September of this year, the Canadian Association of Chiefs of Police asked the federal government to postpone the legalization of marijuana. They said they need time and money to train officers throughout Canada.

I ask the Premier of the province if he shares those concerns.

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

MR. A. PARSONS: Thank you, Mr. Speaker.

I’m certainly happy to stand here and speak to this very important policy decision that all governments across Canada are dealing with now in every province, territory and including the federal government.

The issue referenced by the Member opposite is one that we take very seriously and one, given that it’s at the core of what we do in Justice, is something I take very seriously.

This is an issue that was brought up at the latest federal/provincial/territorial meeting in
Vancouver. I don’t mind saying that I actually spoke to the federal minister myself, Ralph Goodale, at that meeting and said that this is an issue that is being brought forward by the Chiefs of Police.

That being said, we’re doing everything within our power, working with other governments to make sure that we will be ready. I am sure we will be ready for this legislation.

Thank you.

SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you, Mr. Speaker.

In an interview just last month, in October, the Finance Minister referred to marijuana discussion with his federal counterparts as being in the early stages. Now, with implementation scheduled to be just around the corner, I ask the Premier if he’s concerned with the lack of progress on a provincial plan regarding this very serious issue. We know where the federal government is and those federal concerns; we’re also concerned about the province’s readiness.

So I ask the Premier if he has any concerns about the progress of the provincial plan.

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

MR. A. PARSONS: Thank you, Mr. Speaker.

I appreciate the question from the Member opposite, as certainly this is a huge issue. It’s one of the biggest public policy shifts that our country has seen in decades.

The fact is our government will be ready. In fact, we are the second province to come out with an online consultation with the public – one of the greatest attended consultations that this province has seen – and I hope the Member opposite took the time to pass on his thoughts, as we invited all Newfoundlanders and Labradorians to contribute.

What I can say is that our government is certainly ready; we’ve been working on this diligently. There are a lot of people within government, through every department, that have been working on this, and we will be ready for the implementation of legislation here in the province and for the federal legislation.

Thank you.

SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you very much, Mr. Speaker.

I thank the minister. Manitoba’s provincial government has announced that private stores will sell marijuana, while the province will control distribution. Alberta has earlier announced their plan, as did Ontario. We haven’t really heard much about the plan here in the province.

We still know that it’s in the works, and the minister just referred to that. But do you have a plan yet regarding the sales and distribution?

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

MR. A. PARSONS: Thank you, Mr. Speaker.

Certainly every province has been working on this issue and certain provinces are in different states of readiness. Some provinces have gone ahead and announced their plan. Some provinces haven’t even done a consultation yet and are still going through that. It’s something that every government is working through.

I, as one of the co-leads of our intergovernmental department on cannabis legalization, think that we are ready as a government. We all as a Cabinet and caucus know that we will be ready and our plans will be announced in due course. We look forward to speaking publicly about them when that information is available.

Thank you.
SOME HON. MEMBERS: Hear, hear!

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

MR. P. DAVIS: Thank you, Mr. Speaker.

The Minister of Finance has rightfully stated the majority of costs related to implementation of the sale of cannabis will be borne by the province, including regulations, distribution, as well as justice, health care and social issues.

I ask the Premier: From the work undertaken by your government so far, what are those costs looking like? What’s the impact going to be on the province?

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

MR. A. PARSONS: Thank you, Mr. Speaker.

One of the issues that are being discussed is the revenue that will come from the legalization, as well as the expenses and costs that come with it. One of the misconceptions that we’ve been hoping to dispel is the fact that there will be a tremendous revenue stream with this. No doubt, there will be revenue that comes into every province and to the federal government, but when you’re introducing the legalization of cannabis, there’s also a safety side and a social consciousness that we need to have. So there will be significant costs borne when it comes to safety, when it comes to education, when it comes to health, when it comes to addictions. We will be doing everything in our power to ensure that we cover that off, also at the same time looking at the revenue that comes in.

Thank you.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Conception Bay East – Bell Island.

MR. BRAZIL: Thank you, Mr. Speaker.

Chemotherapy patients were turned away from their scheduled appointments at the cancer clinic in Grand Falls-Windsor, not because of lack of space but because of lack of nurses.

Can the minister give this House and, more importantly, cancer patients in Central Newfoundland an assurance that this problem will be resolved?

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

MR. HAGGIE: Thank you very much, Mr. Speaker.
I’m happy to rise to deal with this issue which arose yesterday. Through a communication error, essentially two patients were contacted in error to have their appointments cancelled. One of them was contacted before they got too far, came back and had their chemotherapy. The other one had a mutually convenient appointment rescheduled for either today or tomorrow, with no clinical impact.

I’ve asked Eastern Health who runs the cancer clinic service to look into why this erroneous call was made. As soon as I have that information, I’ll be happy to provide it, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Speaker: The hon. the Member for Conception Bay East – Bell Island.

Mr. Brazil: That’s good to hear, Minister, but the treatment, as one person rightfully described, is life saving, life extending. People cannot simply afford to miss appointments because of staffing that we originally thought, now with communications in Grand Falls-Windsor.

What other options do you plan to put in place to ensure this doesn’t happen in the future?

Mr. Speaker: The hon. the Minister of Health and Community Services.

Mr. Haggie: Mr. Speaker, the Member opposite is accurate. This was a communication issue; it’s obviously an HR issue and a policy issue. I’ve directed Eastern Health to fix the problem and I expect them to do so.

Some Hon. Members: Hear, hear!

Mr. Speaker: The hon. the Member for Conception Bay East – Bell Island.

Mr. Brazil: The Liberal Finance Minister stated: Our plan is working. Tell that to the sick who had to wait four hours for an ambulance, and tell that to cancer patients who drove hours for chemo and told to go home.

Mr. Speaker: The hon. the Minister of Health and Community Services.

Mr. Haggie: Mr. Speaker, appointments may be cancelled for a variety of reasons, not least of which at the interest and request of the individual patient. If the Member opposite has a particular time frame, say, from the beginning of the calendar year, I can get that information from the Cancer Care Program. I obviously don’t carry that kind of number around in my head at the moment, but I’d be happy to supply it for the House.

Some Hon. Members: Hear, hear!

Mr. Speaker: The hon. the Member for Conception Bay East – Bell Island.

Mr. Brazil: We’re being told that there are issues around HR; we’re told that there are issues around communications. Obviously, this has an impact on the quality of health care we get in Newfoundland and Labrador.

I ask the Minister of Finance: You claim that you’re looking at the health system as a place to cut; can the people of the province expect more situations like the one that we just talked about here in the House of Assembly in the future?

Mr. Speaker: The hon. the Minister of Health and Community Services.

Mr. Haggie: Mr. Speaker, I think the gentleman opposite is stringing dots together that don’t naturally lie that way. What I can tell him is that the aim of my department and this government since December of 2015 is to look at getting the best value we can from the dollars we’ve put into health care.

What we have managed to do is stabilize the hemorrhage, Mr. Speaker. We have managed to keep health care spending at a constant level over the last two years – an achievement which, in actual fact, is almost unparalleled in any other jurisdiction. At the same time, we have not compromised the level of service or the quality of care. We’ve done it by looking at how we
spend money and how we spend it wisely, and we’ll continue to do so.

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

**MR. SPEAKER:** The hon. the Member for Cape St. Francis.

**MR. K. PARSONS:** Thank you very much, Mr. Speaker.

Mayors across the province are saying how unfair and unaffordable the 50-50 cost-shared ratio on road construction projects is. Your government changed the cost ratio.

I’m asking: Are you considering changing the cost ratio again?

**MR. SPEAKER:** The hon. Minister of Municipal Affairs and Environment.

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

I thank the Member for the question because that is the decision we made, to leverage federal funding. There was a certain amount of federal funding that was there for water and waste water. As a government, we made water and waste water a priority for the government.

As you know – or you didn’t know but now you do know, there was $34.6 million left on the table because your government would not sign the contract. Mr. Speaker, what happened, we had to find a way to leverage the funding. We went to MNL; we explained the situation, why we had to do that.

We made water, waste water – if their finances improve across the province, yes, but I stood in front of the convention of 350 people and I said that we had to do it because we made water a priority for this government. We apologize, but it was done for the right reasons.

**MR. SPEAKER:** Order, please!

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

**MR. SPEAKER:** The Member for Cape St. Francis.

**MR. K. PARSONS:** Thank you very much, Mr. Speaker.

With everything else against them, Minister, where do you expect small rural communities to get the monies to be able to do their roadwork?

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

**MR. JOYCE:** Mr. Speaker, just to let you know, we were in consultation with MNL when we made those changes – 100 per cent.

If anybody opposite, that were in Opposition, had to be at the convention, which they weren’t this year – not one person showed up to the convention to listen to my explanation.

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

**MR. JOYCE:** Not one. Many from this side were there because we support municipalities in Newfoundland and Labrador.

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

**MR. JOYCE:** You would have listened when I stood up at the opening of the convention on Saturday morning, and I said here’s what we’re going to do. We’ve made the decisions, but we’re going to help in other ways. We’re going to piggyback on other contracts.

A good example, Meadows, they had a $300,000 contract; when we helped with the Department of Transportation and Works it was $150,000, Mr. Speaker – half.

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

**MR. SPEAKER:** The hon. the Member for Cape St. Francis.

**MR. K. PARSONS:** Mr. Speaker, I’m glad the minister mentioned MNL.

Your policies are having such a negative impact on roads in rural communities that even the former chair of MNL and now current federal nominee presented a resolution at MNL. The resolution, he wanted to make sure there was some kind of change in the fiscal.
So are you looking at changing it?

MR. SPEAKER: The hon. the Minister of Municipal Affairs and Environment.

MR. JOYCE: Mr. Speaker, we’ll consider any changes if it’s going to help when the fiscal situation arises. I said that publicly. I said it in front of the whole convention. If I was a mayor at the time presenting a resolution – we know, we’re in consultation on a daily basis with MNL, a daily basis.

I could tell you one thing, Mr. Speaker – the year before we made the announcement to change the cost-shared ratio, almost 20 per cent of the funding that was requested were for roads. When we changed the cost-shared ratio, almost the same amount was asking for the same. So municipalities can afford it because we’re helping municipalities with the extra cost that we can help through transportation by piggybacking on contracts.

If you were at the convention, you would have heard it and you would have heard the ovation I got when I said that, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Cape St. Francis.

MR. K. PARSONS: I’m sure you got a great ovation, Mr. Minister.

Listen, this is what MNL are saying. This is a resolution that was passed out there.

Do you think it’s fair?

MR. SPEAKER: The hon. the Minister of Municipal Affairs and Environment.

MR. JOYCE: Thank you, Mr. Speaker.

You asked, do you think it’s fair? I ask the Member, and you were aware of this, by the way. Do you understand that your government had a three-year program, 20 years you spent it all in the two years? The third year there wasn’t one cent for municipalities in Newfoundland and Labrador. Is that fair?

Mr. Speaker, what we did is we made water a priority. MNL agreed water is a priority. Mr. Speaker, because of that, we’re after getting hundreds of millions of dollars from Ottawa, because we’re leveraging funding from Ottawa. We’re using this fund. People understand we are helping. We are helping to ease the burden of the cost-shared ratio for the roads, and municipalities are well aware of that Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Cape St. Francis.

MR. K. PARSONS: Interesting answers from the minister. One minute he says: We didn’t spend it. The next minute he says: We spent it all and too much of it. You have to make up your mind, Minister.

It’s government’s responsibility to provide safe roads.

I ask the Minister of Transportation and Works: What do you think of the policy and the negative impact it’s having on provincial roads and roads in your district?

MR. SPEAKER: The hon. the Minister of Municipal Affairs and Environment.

MR. JOYCE: Mr. Speaker, what I’ll do for the Member, I like the Member, I’ll take him over to the department and I’ll give him a briefing. I’ll give him a briefing on the difference between the Small Communities Fund, which was $34.6 million not signed, and the $20 million a year for Municipal Capital Works. It is two different funds.

The Municipal Capital Works is totally provincial – totally provincial. The Small Communities Fund, which for some reason your government didn’t want to sign – $34.6 million wasn’t even signed. The money that was used for Capital Works for your government was spent in two years.

Putting out the applications – give us the application. There wasn’t one penny there to be spent. Is that the way you want people in municipalities to be living? You don’t know if
there is any money in the pot for it after the application?

MR. SPEAKER: Order, please!

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Cape St. Francis.

MR. K. PARSONS: I can assure the minister there were a lot of municipalities very pleased with what this government did, for damn sure, in our term.

SOME HON. MEMBERS: Hear, hear!

MR. K. PARSONS: There was a lot of roadwork done and a lot of water and sewer work done all over the province.

MR. P. DAVIS: You had a couple of standing ovations yourself.

MR. K. PARSONS: I had a great couple of relationships with the ministers, as a former mayor.

The policy of having such terrible roads in rural communities – I ask the Minister of Tourism: Do you think it’s responsible to have roads in such conditions when we want to do a good job on our tourism?

MR. SPEAKER: The hon. the Minister of Municipal Affairs and Environment.

MR. JOYCE: Mr. Speaker, too bad the Member wasn’t at the MNL convention. I have to say, if you’re so concerned about municipalities in Newfoundland and Labrador, why didn’t one of you show up, just one show up? You’ll be out there next year when there’s an election the following year to see who can run for your party. What a difference, Mr. Speaker.

The people in rural Newfoundland and Labrador, the vast majority of applications are for water. The vast majority is for water. So what we did is we listened to the communities. What we said was if that’s your priority, we have a certain amount of money. We can go and leverage the federal money, and that’s what we did, Mr. Speaker. That’s why you saw the Premier last year announcing $140 million for 140 projects across Newfoundland and Labrador.

Mr. Speaker, we’re working with our federal counterparts and we’re listening to the people and we’re providing safe drinking water.

MR. SPEAKER: Order, please!

SOME HON. MEMBERS: Hear, hear!

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

MR. HUTCHINGS: Thank you, Mr. Speaker.

In the initial court standing regarding Wabush Mines, the government remained steadfast on the $50 million reclamation or remediation fund that was required as part of the bid process; however, government relinquished that requirement instead of settling for millions less.

Can the minister explain why this happened?

MR. SPEAKER: The hon. the Minister of Natural Resources.

MS. COADY: Thank you, Mr. Speaker.

This is a very important question for the people of Newfoundland and Labrador because it has to do with reclamation of a Wabush Mines site.

Mr. Speaker, in the Department of Natural Resources we are very consumed and concerned about making sure that we have the monies and opportunity available to reclaim any site that mining takes place.

The Member opposite did read from the information that was provided, but, Mr. Speaker, the $50 million, we have secured $41 million from the new owners of Wabush Mines. The difference is some reclamation work had already been done.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!
MR. SPEAKER: The hon. the Member for Ferryland.

MR. HUTCHINGS: Mr. Speaker, I ask the minister: What was the amount of reclamation work already done?

MR. SPEAKER: The hon. the Minister of Natural Resources.

MS. COADY: Thank you, Mr. Speaker.

The Department of Natural Resources does a very thorough job of looking at reclamation plans, rehabilitation plans around mines. Mr. Speaker, we have a whole team of engineers and people that work very diligently. If the difference is between $50 million and $41 million, it is $9 million that have been completed in terms of what was required. It may not have been in terms of dollar value, but what was required. They work very diligently.

Mr. Speaker, we worked very closely with Tacora when they were making the moves towards the purchase of Wabush Mines to ensure the people of this province were protected and had a reclamation plan in place.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for Ferryland for a very quick question, please.

MR. HUTCHINGS: Just to clarify, if the minister could. She referenced $9 million. She said it may not have been $9 million, it could be other. I’m not sure what you mean.

Was $9 million worth of work done or was it not done? A simple question.

MR. SPEAKER: The hon. the Minister of Natural Resources for a very quick response, please.

MS. COADY: Thank you, Mr. Speaker.

I would have to check with the department to see what the total value was, but in terms of what was required to be done was the $50 million; therefore, if the difference would have been $41 million and therefore that’s where the $9 million came in, but I will check exactly what the difference in the amount was. I can assure the people of this province we made sure we had the funds available for reclamation.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

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

MS. MICHAEL: Thank you very much, Mr. Speaker.

Two years into their mandate, government is as dependent on oil revenues as the previous administration.

I ask the Premier: Where are the decisive actions and new initiatives and revenue streams he promised the people of this province?

MR. SPEAKER: The hon. the Premier.

PREMIER BALL: Thank you, Mr. Speaker.

I guess I would make mention, number one, the current administration we see right now with the current budget lines is really just north of 10 per cent compared to some 35 per cent, so I would challenge the reliance on oil. I’d ask the interim Leader of the Third Party at least to go and review those numbers because there is a less reliance on oil today than there was in the past.

Last November, Mr. Speaker, we outlined A Vision for Sustainability and Growth in Newfoundland and Labrador. The Member opposite has been following the progress that’s been made. It was, number one, to stabilize the financial footing in our province. We’ve been able to do that.

Secondly, was to work with many sectors. We’ve seen multiple announcements over the last year creating jobs for Newfoundlanders and Labradorians and investing –

MR. SPEAKER: Order, please!

PREMIER BALL: – in Newfoundlanders (inaudible).
SOME HON. MEMBERS: Hear, hear!

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

MS. MICHAEL: Thank you very much, Mr. Speaker.

Government says we have a spending problem; I believe we have a revenue problem. One way to tackle this issue is to create a fairer income tax system. During the 2015 election, government promised to review the tax structure to ensure it is fair to all residents, but it is still not done.

I ask the Premier: Will he tell this province what exactly he means and what did he mean by taxation that is fair to all residents?

MR. SPEAKER: The hon. the Premier.

PREMIER BALL: Thank you, Mr. Speaker.

This review is currently ongoing right now. I think in a release that went out when the names were released, the Schedule was part of that. Secondly, I would challenge her comment about the revenue situation in our province. As a province per capita to comparing us to every other Canadian province, we rank second. Newfoundland and Labrador ranks second in revenue generation on a per capita basis.

There is no doubt right now, Mr. Speaker, that there is a very challenging situation to deliver the much-needed services in our province. When you compare the delivery of services in Newfoundland and Labrador, this is where we rank first in most situations.

For the Member opposite to ignore the fact that it’s not expensive and this is not the most expensive place to deliver those services is completely wrong. The revenue problem in our province, I just said that, we rank second in the country so (inaudible).

SOME HON. MEMBERS: Order, please!

MR. SPEAKER: Order, please!

The hon. the Member for St. John’s Centre.

MS. ROGERS: Mr. Speaker, today the Minister of Health started debate on his new Prescription Monitoring Act, giving Members of this House less than 24 hours – less than 24 hours – for thorough review and consultation with relevant interested parties. This bill has serious implications for privacy rights, health care providers and patients. This is an affront to our democratic process.

Significant key organizations have not been consulted directly on the bill. The Newfoundland and Labrador Medical Association even issued a news release of their concerns.

I ask the minister: Will he table a list of organizations that he said were consulted on the actual proposed Prescription Monitoring Act?

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

MR. A. PARSONS: Mr. Speaker, I’m going to stand up and answer the first part of the question from the Member opposite calling the briefing process an affront to democracy.

Now, what I would suggest is first of all you may want to check with your colleague who didn’t share those sentiments yesterday when I spoke to her about that. The second thing I would say is that the Members opposite get a full briefing from departmental officials who will answer any question. If they have further questions, they just need to ask.

The fact is that this debate won’t just take today; it won’t just take tomorrow. We will take all the time we need to answer all the questions. And what I would say to the last part – it’s not my bill, but I’d say to the minister it’s a very good bill.

Thank you.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for St. John’s Centre for a very quick question, please.

MS. ROGERS: Mr. Speaker, it’s not about the briefing but about the time before debate starts, and he knows that. This bill would have been
Can the minister tell us if the Privacy Commissioner had any concerns about this legislation, and what has been done about those concerns?

MR. HAGGIE: Two things: one, the list of people with whom we consulted was extensive and it includes all those people who’ve made press releases today, just to set the record straight. The second bit around the OIPC, their recommendations are incorporated in the bill.

If the Member opposite had listened to my speech this morning, I actually referenced that fact. His input is in there. That’s why it’s all encased in the Personal Health Information Act and PHIA. They weren’t listening, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The time for Oral Questions has ended.

MR. P. DAVIS: Point of order, Mr. Speaker.

MR. SPEAKER: A point of order.

The Leader of the Official Opposition.

MR. P. DAVIS: Thank you.

I rise on Standing Order 49, Mr. Speaker, and I refer to O’Brien and Bosc under unparliamentary language. It refers to the use of offensive, provocative or threatening language in the House, and it also refers to the long-standing tradition of respect for integrity of Members. Personal attacks, insults and obscenities are not in order.

I refer to two comments made by the Minister of Finance in succession during Question Period today when he questioned the honesty of a Member of this House, namely myself, and actually named me in such way. Mr. Speaker, I ask that the Member apologize and withdraw those comments.

MR. SPEAKER: The hon. the Minister of Health and Community Services for a quick response, please.

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

MR. A. PARSONS: Yes, I’ll stand and speak to the point of order. I believe the Member opposite referenced the Standing Order and said something about offensive or threatening comments by the Member. I certainly don’t recall hearing anything offensive or threatening.

AN HON. MEMBER: (Inaudible.)

MR. A. PARSONS: Again, I hear the Member talking over there while I’m speaking. What I would suggest is he has every opportunity to stand and speak to his point of order when it’s his turn, so I would suggest to the Member – again, I just heard him say something out of earshot. I’m going to sit down and let him say it on the record and then I’ll continue the point of order. Please speak when it’s your turn.

Thank you.

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

MR. P. DAVIS: I never uttered a word or a sound, Mr. Speaker. He seems to be referring to me, but I never uttered a word or –

SOME HON. MEMBERS: Oh, oh!

MR. P. DAVIS: Thank you, Mr. Speaker.

I never uttered a word or a sound while he was on his feet a moment ago, but I’ll be more than happy to respond to his comments.

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

MR. A. PARSONS: I get confused and maybe it was the Member for Cape St. Francis that was over having something to say while his leader was talking. What I would suggest is I would like a reiteration from the Member opposite about the offensive or threatening comments that he alleges were made by the Minister of Finance.

MR. SPEAKER: The hon. the Leader of the Official Opposition.
MR. P. DAVIS: Thank you, Mr. Speaker.

The words are unparliamentary so I hesitate to repeat them, but I certainly will. Mr. Speaker, just a moment ago the Government House Leader commented on interruptions while he was on his feet and then I get a display like that from Members of the government who are supposed to be leading this province.

Mr. Speaker, his comments were: have never been honest and not being honest with the people of the province. What I submit to you, Mr. Speaker, is those comments are clearly unparliamentary. It is against the long-standing traditions of this House to use such language and I ask that the Minister of Finance should rise in his place, apologize and withdraw the comment.

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

MR. A. PARSONS: Yes, Mr. Speaker, and perhaps I have a different interpretation of the comments made by the Minister of Finance. I agree with what the Member is saying. It is one thing to make accusations and to call somebody a name, maybe to suggest that somebody is a lair, but also there’s nothing unparliamentary about suggesting that a Member is being less than honest, if that is indeed the case.

What I would suggest is that I’m going to have to leave it to the judgment of the Speaker to review the comments in the context that they were made. Certainly, I don’t think the Member made any unparliamentary comments.

Thank you.

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

MR. P. DAVIS: Thank you, Mr. Speaker.

Mr. Speaker, the comments weren’t suggestions; they were direct statements. Under O’Brien and Bosc it refers to the language or the tradition, the integrity of Members. It also indicates that if the words used or phrase used were provocative in nature – provocative means to create a discussion or debate, then it’s unparliamentary, and that’s exactly what happened.

It’s clearly a tradition in this House, Mr. Speaker, that to make such statements is unparliamentary and I stand by my request that it be ruled that way, Sir, by you and that he apologize and withdraw the comments.

MR. SPEAKER: Order, please!

I appreciate the commentary by both sides of the House and I’m going to take that matter under advisement. We will review Hansard and report back to this hon. House.

Thank you very much.

Presenting Reports by Standing and Select Committees.

Tabling of Documents.

Tabling of Documents

MR. SPEAKER: The hon. the Minister of Natural Resources.

MS. COADY: Mr. Speaker, yesterday during Question Period, I referenced a letter that was sent to industry concerning the generic oil royalty regime. I would like to table those documents.

MR. SPEAKER: Further tabling of documents?

Notices of Motion.

Answers to Questions for which Notice has been Given.

Answers to Questions for which Notice has been Given

MR. SPEAKER: The hon. the Minister of Natural Resources.

MS. COADY: Mr. Speaker, I’ve been asked in this hon. House the total amount spent with Wood Mackenzie by the Department of Natural Resources since I became minister in January of 2016. So from January 2016 until now a total of $20,000 has been paid to Wood Mackenzie.

Thank you, Mr. Speaker.

MR. SPEAKER: Petitions.
Petitions

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

MS. MICHAEL: Thank you very much, Mr. Speaker.

To the hon. House of Assembly of the Province of Newfoundland and Labrador in Parliament assembled, the petition of the undersigned residents humbly sheweth:

WHEREAS deaf and hard of hearing children in the public education system of Newfoundland and Labrador are not receiving full and equivalent access to a quality education because of the lack of appropriate full-time resources; and

WHEREAS from 1964 to 2010, deaf and hard of hearing children were provided with a full-time quality education in the Newfoundland School for the Deaf, but deaf and hard of hearing children currently placed in mainstream schools receive only a fraction of a school day with a teacher qualified to instruct deaf and hard of hearing children;

WHEREUPON the undersigned, your petitioners, humbly pray and call upon the House of Assembly to undertake an immediate, complete and thorough assessment of the supports in place for deaf and hard of hearing children by a committee of at least two independent and recognized experts in the field of deaf and hard of hearing education and to accept the recommendations of these experts, and in the interim take measures to honour the support commitments made to all current and future students upon closure of the Newfoundland School for the Deaf in 2010, to ensure that all deaf and hard of hearing children are provided with access to a quality education equivalent to hearing classmates, as well as access to sign language.

And as in duty bound, your petitioners will ever pray.

Once again, Mr. Speaker, I stand and offer well over 100 signatures here from different parts of the province; from St. John’s, from Gander I notice, and Glenwood areas around Gander, Musgravetown, Lethbridge, Canning’s Cove. From all over the Eastern part of the province, Mr. Speaker, into the Central part, people showing their concern for what’s happening to our deaf and hard of hearing children.

We’ll note that at the end of the petition it speaks to the need for sign language for these children, which is their language, Mr. Speaker. For a long time the teaching of sign languages to deaf and hard of hearing students has been restricted on the grounds that it would impede these children from learning a spoken language.

This is a recognized language of the deaf, Mr. Speaker. Many people who are deaf cannot speak a spoken language; they have to have their own language. This is now being denied them.

Thank you very much, Mr. Speaker.

MR. SPEAKER: Further petitions?

The hon. the Member for Conception Bay East – Bell Island.

MR. BRAZIL: Thank you, Mr. Speaker.

To the hon. House of Assembly of the Province of Newfoundland and Labrador in Parliament assembled, the petition of the undersigned residents of Newfoundland and Labrador humbly sheweth:

WHEREAS there has been an identified lack of mental health services in our province’s K to 12 school system; and

WHEREAS the lack is having a significant impact on both students and teachers; and

WHEREAS left unchecked, matters can and, in many cases, will develop into more serious issues;

WHEREUPON the undersigned, your petitioners, humbly pray and call upon the House of Assembly to urge government to increase mental health services and programs in our province’s K to 12 school system.

And as in duty bound, your petitioners will ever pray.
Mr. Speaker, I got to present this same petition last Thursday. Since then, I’ve had a multitude of individuals contact me, some professionals, some retired professionals, particularly some parents.

I had one agency that deals with issues around mental health saying that there’s a significant correlation between lack of services in our school system and the impacts it has on citizens in later years in their life, particularly around mental health. They proactively support us taking a proactive approach at an early age versus a reactive approach later in life, and for a number of reasons: one, the quality of life for these individuals and their families; their ability to be engaged in the community and be productive citizens; what it adds to the economy and the benefits from all of those engaged citizens as part of the process.

They’re saying this is not a very expensive, encompassing process. What it is here is a coordinated effort that’s needed between the Department of Education, the school district and the administration and agencies out there that have the expertise to do that.

Some of these agencies are in-house. They are through Eastern Health or the regional health authorities. They’re through the Department of Health itself. There are other departments of child, youth and family services. There are a number of line departments that have expertise and have programs. There are not-for-profit agencies out there that do due diligence and yeoman service to be able to offer service in that.

What they’re suggesting – and it makes sense the more I look at it, and coming from a bureaucratic background. It’s much easier if we collectively address a particular issue here than it is to be in our own little separate silos, working independently trying to solve the little component of that particular issue that we’re aware of or that we think that’s our expertise. Coming together would be a much more positive approach to doing what we need to do.

In this case, it makes sense from every aspect. If we can do it and do some interventions early, get the proper supports in play that are necessary, get the proper training for those who are dealing on a day-to-day basis with identifying some of the potential mental health issues that young people may be facing in life itself, identify the supports that are necessary and help coordinate that in our school system, what better way to do it than with a captive audience with people who are supportive of our education system?

Mr. Speaker, I’ll have an opportunity to speak to this again, as this is an issue that won’t go away until we start addressing it.

Thank you, Mr. Speaker.

MR. SPEAKER: Further petitions?

The hon. the Member for Conception Bay South.

MR. PETTEN: Thank you, Mr. Speaker.

To the hon. House of Assembly of the Province of Newfoundland and Labrador in Parliament assembled, the petition of the undersigned residents of Newfoundland and Labrador humbly sheweth:

WHEREAS the Adult Dental Program coverage for clients of the Newfoundland and Labrador provincial drug program under the Access and 65Plus Plans were eliminated in Budget 2016; and

WHEREAS many low-income individuals and families can no longer access basic dental care; and

WHEREAS those same individuals can now no longer access dentures;

WHEREUPON the undersigned, your petitioners, humbly pray and call upon the House of Assembly to urge government to reinstate the Adult Dental Program to cover low-income individuals and families to better ensure oral health, quality of life and dignity.

And as in duty bound, your petitioners will ever pray.

Mr. Speaker, this petition, as you know, is based on Budget 2016. We still talk about it, but it has a real impact on a lot of people, seniors and low-income individuals in our districts.
I think most Members in this House have probably dealt with one or more cases. It’s very sad situations when people are requiring this dental work. It’s not for cosmetic purposes a lot of times. These are very serious situations and probably a bit more serious than most people realize.

I spoke in this House on a situation in my colleague from Topsail – Paradise, his district actually the lady was from, but it became a more public issue. I’ve dealt with other less public ones. It’s a very difficult conversation because they need implants or they need specialized work with their teeth. It affects their eating. It affects their facial – this one lady, her jaw was moved. It’s all affected. It’s a huge impact on their overall health. It’s no longer this dental – you’re not going to an orthodontist to get your teeth straightened. This can be a serious health impact on those individuals.

It’s been removed, and it was removed as a budgetary item in 2016. There’s been a lot of outcry over this. We continue to ask the government to consider reinstating it because there’s been no change. Every case is viewed individually. Everyone has to go in, basically, on bended knee and beg the department for some assistance or some leeway. Most times there is very little help that comes out, unless they really push it and push it and push it. Then it’s only a portion of the cost.

The end result of all of this is you have seniors who are struggling, who have serious health issues as a result of their dental needs. We think government should really consider, this one in particular, to reinstate it.

Thank you very much.

Orders of the Day

Private Members’ Day

MR. SPEAKER: Order, please!

This being Wednesday, I now call on the Member for Baie Verte – Green Bay to introduce the resolution standing in his name, Motion 6.

MR. WARR: Thank you, Mr. Speaker.
all of whose departments deal with the issue that we have before us today or the motion that we have before us today.

I have to say, Mr. Speaker, with regard to my own district, I’ve had the opportunity to sit in meetings with parents, constituents, school boards and actually with the members of the Royal Canadian Mounted Police who – my home community and, actually, my full district are under the jurisdiction of the RCMP.

I talked earlier on, Mr. Speaker, about being passionate about safety because it was a big part of who I was or what I was in my early working career. I spent some time as a proud member of the Royal Newfoundland Constabulary and obviously had the opportunity to deal with some of this first-hand, especially speeding and, certainly, the safety in around school zones.

The rationale behind this Member’s statement is ensuring the safety of all students. It’s an important consideration for our government. The 30 kilometres per hour school zone speed limit will certainly help to ensure student safety across the province.

Mr. Speaker, I just want to mention the fact that speed limits in school zones are lower for an important reason: to ensure student safety. We all know that school zones, from September to June, are very busy areas at certain times of the day. When you look at people who are even going out and buying homes today, I mean everybody seems to want to buy a home in and around recreational facilities and educational facilities. They’re high-traffic areas and we need to ensure the safety of the people who are using those areas.

Mr. Speaker, a York University and Hospital for Sick Children study finds children face an increased chance of injury near schools during morning rush hour due to parents’ dangerous driving. Parents and school buses are dropping off and picking up children and crossing guards are directing traffic. I just want to go back to my earlier comment; I mentioned the fact that purchasers who are ready to purchase a home, like to purchase it in around educational and recreational facilities.

We find – at least I find in my own area, probably not as much in urban, but I know in a lot of the rural districts, children have a tendency to walk to school. As you get older, you see more children who are walking to school and, therefore, there’s cause for more safety issues when you see so many children.

Mr. Speaker, when children are struck by vehicles, their injuries often result in life-threatening or permanent damage. The faster a vehicle is moving, the greater the impact and the more devastating the results. Pedestrian-related injuries contributed to almost 12 per cent of all injury-related deaths of children younger than 14 years of age. On average, 30 child pedestrians younger than 14 years are killed and 2,412 are injured each year, Mr. Speaker. Children aged five to 14 years are at the greatest risk for pedestrian-related deaths. Children aged 10 to 14 years have the highest incidents of pedestrian-related injuries.

They often have difficulty judging the speed and distance of cars and believe if they can see a car that the driver can see them. And that’s not always the fact, Mr. Speaker. As well, children often assume a car can stop instantly; they have a limited peripheral vision and have a limited sense of danger.

And I just want to highlight an incident that actually happened to me in my hometown in 1990. I had just not long left the police force and moved back to my hometown to work for our family business. I’ll never forget it, Mr. Speaker. The incident happened at a school bus stop not far from my home. I want to go back – I’m using this incident because of the comment that I just made that children often assume that a car can stop instantly.

Anyway, I had an opportunity to witness an accident where a child was actually knocked down at a school bus zone in my hometown. I ran towards the child, Mr. Speaker, and actually my oldest daughter was at the bus stop, a grade one student at the time, and I remember seeing a Barbie bookbag underneath the car. I’ll never forget it. It’s a memory that will stay with me for the rest of my life.

I went to the child, and certainly thinking it was my daughter because she carried a Barbie
bookbag, but it was her best friend. Luckily for that child, Mr. Speaker, she had injuries but they weren’t life threatening. I certainly bring myself back to this on a continual basis.

I remember picking up that bookbag, Mr. Speaker, and taking it with me as the ambulance took the young child away. I kept that bookbag for a long time. In fact, when that child graduated grade 12, I presented her with her bookbag that she had when she was in grade kindergarten. I kept it all those years, Mr. Speaker. Like I said, it had a profound effect on me and this is why this bill is so important to me, this private Member’s motion is so important to me.

All of these factors, Mr. Speaker, that I had mentioned can result in devastating accidents that can be avoided with increased care and reduced speed. Over a five-year period, Mr. Speaker, in the City of Edmonton, Alberta, there were 176 injury collisions involving children aged 15 years or younger on collector or local roadways.

Interesting statistics: 37 per cent of those collisions occurred in areas that were designated playground zones; 20 per cent of those injured in those 65 collisions required hospitalization; and 99 per cent of the 65 injury collisions happened between 7:30 a.m. and 9 a.m., exactly when we either send or bring our children to school.

According to the World Health Organizations, speed has been identified as a key risk factor in road-traffic injuries, influencing both the risk of a road crash as well as the severity of the injuries that result from crashes.

Canada’s Safety Council, Mr. Speaker, also states that speed is a factor in 30 per cent of fatal crashes and 12 per cent of all crashes. Controlling vehicle speed can prevent crashes happening and can reduce the impact when they do occur, lessening the severity of injuries sustained by the victims. The higher the speed of the vehicle, the shorter the time a driver has to stop and avoid a crash.

Interesting to note, Mr. Speaker, a car travelling at 50 kilometres an hour will typically require 13 metres in which to stop, while a car travelling at 40 kilometres an hour, 10 kilometres less, will stop in less than 8.5 metres. An increase in average speed of one kilometre per hour typically results in a 3 per cent higher risk of a crash involving injury with a 4 per cent to 5 per cent increase of crashes that result in fatalities.

I want to talk to a bit about, when I was reading some of these stats and talking about stopping times, I couldn’t help but reflect on the fact that when we send our children to school, we send them from September to June. Mr. Speaker, I’d certainly like to highlight the province in which we live, Newfoundland and Labrador, of which we get six months of winter. The six months of winter are actually six months that our children, our grandchildren, our friends’ children, our students are in school or going to school.

Mr. Speaker, when you look at road conditions, road conditions within municipalities, some of our municipalities are better equipped to offer better road conditions than others on a timely basis. Certainly, one would have to think that when we look at the fact that we are going through winter months, the likelihood of an accident involving road conditions is more prevalent during that time of the year.

I wanted to highlight and to, I guess, demonstrate my desire – we talked earlier on about the inspections of vehicles. I guess when you look at what we’re talking about here, Mr. Speaker, we’re looking at vehicles, we’re looking at faulty equipment, and the two most prevalent would be brakes and tires. I certainly want to highlight that as well.

Probably, Mr. Speaker, in the essence of – I don’t have a whole lot of time here. I look forward to the debate. I’ll continue on with my part of the statement in my next opportunity to stand and speak to it, but I certainly want to listen to my friends across.

Thank you, Mr. Speaker.

MR. SPEAKER: The hon. the Member for Cape St. Francis.

MR. K. PARSONS: Thank you very much.

By the way, a good job by the Member across the way for Baie Verte – Springdale – or Baie Verte – Green Bay, I’m sorry; we used to call it
Baie Verte – Springdale at one time. This is a very important motion here today that the Member is bringing in.

I’d say that everybody in this House, especially parents of young children in Newfoundland and Labrador, understand the safety issues of sending a child to school. Understand that in the morning, you hope that when your child is either on the way to school or gets off a school bus or is driven by a parent, that child arrives at the school safe and sound, as we would say.

We have to do everything in our possible way to make sure the safety of our children is foremost. I know being a poppy now, I have two little grandchildren that I know when they go to school, I’m looking forward to it, but I know one thing, it will be a concern of mine that they get there safe and sound. That’s very important.

I think I’ll say to the Member: I think that’s the gist of your motion today and that’s the reason why you’re bringing it in. Any time we have an opportunity to do anything to make safety, and the safety of our children in particular, a part of what we’re doing as legislators, it’s very important.

Part of the WHEREAS here is about speeding in school zones; I’ll give some examples now when I do speak on notes, but just off the cuff here in the first of it, I’d just like to say that’s a responsibility of all of us.

The minister brought in a Ministerial Statement today about this being the remembrance day for road crashes in our province. It’s a national day, actually, right across Canada. Everyone is looking at today and recognizing the families, the individuals and the communities.

In our province over the last number of months, over the last year, really, in particular – and I know it happens year after year but we’re hearing more about it, about families. I can only imagine what devastation of a child going to school or anything like that.

This is a very important motion. It’s very important that we put it out there and people know we’re talking about it because that’s what slows people down.

As the Member also quoted from the World Health Organization, it says: “Setting and enforcing speed limits are two of the most effective measures in reducing road traffic injuries.” I would say also deaths, because we have to reduce them. It’s important that we make these changes.

Last night on the way home, after the Member put this motion forward, I went through my school areas, just to have a look and see what the actual speed limit was and it was 30 kilometres an hour. I was glad of that. I also spoke to different officials and I called the Town of Torbay in particular and talked to the mayor – I knew it anyway – just to make sure. That was a request from the municipality to the Department of Transportation and Works. The municipality requested that the speed limit – the speed limit in the area was 50, then it got reduced down by going to the minister’s office and asking them to reduce, and they did do that.

So just to let the municipalities know out there that there is a way – if any of you have a major concern that the speed limit is too high in school zones, the opportunity to approach the minister’s office, you can get it reduced down to 30. That’s what they did in these areas.

The other thing I was interested in last night as I drove through, there are two schools in my district that are on byroads. They’re not really on the provincial road, but they’re on side roads. They’re not up far enough to – actually one is probably about 500 feet and the other one is probably a couple thousand feet, so if there’s someone speeding on those roads, they shouldn’t. There should be enforcement there to make sure that they don’t do it, but they’re very short distances.

To the Member, I think we should define a school zone also because it’s very important that people know that you’re in a school zone. Sometimes the school is not right out on the main drag; it’s up off to the side a little bit. But again, we have so many young children walking back and forth to get to school. So the zone itself, we should make sure that the provincial road part of that zone should also be – and let people know how far it is and the distance for different school zones.
This also has to be done through Cabinet, I would imagine, and an amendment will have to come to the Highway Traffic Act, I do believe, to change the speed limits, to make it go down. I believe in 2007 – I could be corrected – that there was an amendment that came through that reduced it down to 50 kilometres in zones.

I’ll give an example now of schools in my area, just an example of how important this is. There’s a new school opened in Torbay and previous, the children in that area, they all took a school bus. So you’re talking kids in grade four, five and six. Actually, no, it’s five, six and seven. So these kids were used to getting on a bus, running up and getting on a bus; now all of a sudden they have to walk to school. So it’s something that they have to get used to.

As drivers in the province, we have to take notice of that, too. This is a new area – and I really have to applaud the Town of Torbay for what they did in this area because the new school opened and there was a major concern from the parents having to cross Torbay Road. Torbay Road has 17,000 cars a day travelling along it. What the Town of Torbay did – and actually to my colleague here, the Town Portugal Cove-St. Philip’s used the same person; they hired the commissioners. So in the mornings now in the school, because the school is a little bit off the main drag, like I said, the commissioner is there with the lights flashing. It’s another way to show people that you’re in a school zone. It’s very important that they do that.

Not only did they do that, through the Minister of Transportation and Works, I approached him and we did a crosswalk across a provincial road. The government doesn’t put in crosswalks, but they will allow – again, for other municipalities in the province – municipalities to do that, to give them permission to put crosswalks across.

Also in that particular area, they have some signage up. It’s good signage, I have to say. Signage is very important, as you know. They have an electronic sign. It’s amazing. I’m like everybody else, you come upon an electronic sign and the very first thing you’ll do when you see an electronic sign is look at your speed limit, see what I’m doing. So if you’re in a 30-kilometre zone or 50-kilometre zone and you see one of those electronic signs – and I’m sure every Member in the place is similar to what I am, the very first thing I’ll do is look down and see what speed I’m going. So they work – they work – so that’s another way of showing how things work.

Again, congratulations to the Town of Torbay for doing that because it’s very important that the town realizes the importance of safety in school zones.

Now, the only other thing – I know in the legislation that was passed a while ago under the Highway Traffic Act, sometimes you’ll see that communities will have an issue, not only communities, businesses, people trying to get to work and why are we going through a school zone in the summer months, for example, or we’re going through a school zone at 7 o’clock in the evening when there’s no school. They’re out for the summer or they’re gone in the evenings, the buses are all gone and everything else, but I know in most rural communities – and I know in my district a lot of things happen in the school zones in the schools, whether it’s in the summertime. I know that there’s a couple of communities down there that if it’s a rainy day, for example, the summer program gets moved up to the gymnasium.

And you’ll always see in the evening, it may be a band practice, it could be a soccer game. Usually you’ll see your schools are built around recreation facilities. So I believe and I hope it will be part of the legislation that it is always maintained. Because I believe that schools in most communities are really the hub of our community. I think that in those areas whether it’s a soccer game or it’s a band practice, or you’ll usually see the Scouts and the Cubs and the Beavers and the Girl Guides and everyone, that’s probably what they use too as those areas. I just wanted to mention that to the Member.

I also just want to speak a little bit on signage. I know the City of St. John’s and CBS and Mount Pearl do a fine job of the signage that shows crosswalks. The Torbay town council has also, actually at MNL, approached the minister and requested for a flashing light that comes on in the mornings. And they’re willing to put it in there, for a flashing light, so that people that come up – anything at all, again, they got the
signage there, the electronic signage, there are lots of signs there and there’s a crosswalk. But they figured this flashing light, when any children are crossing the thing, would also help. Any measures that can be done – and I believe they’re going to write a letter to the minister and I believe that the minister also told them that they will allow them to do it. So it’s important.

The biggest thing, though, I look at and while we put in the rules and regulations for this, and why we’ll have the speed limits – not in my area because this, like I said, most of my schools are a 30-kilometre zone. But the biggest deterrent from anybody speeding is basically having enforcement in place. It’s so important that we do have that enforcement in place.

I got to commend RNC because there’s occasions – and I’m sure with either the RCMP or RNC, they’re like myself, they’ll get complaints in their communities about speeding on a certain road or speeding going into a community or speeding coming out of the community. I’ve got a really good relationship with the RNC and I’ll call – actually the Member who presented this is a former member of the RNC and know a lot of the people that I would call.

Listen, we understand their resources are stretched right to the limit, but sometimes what you’ll see is that if you get the RNC – just talking to the RNC now because they’re the ones in my district – to have a presence in that place for a couple of mornings, if you know people are going to work too fast and stuff like that, they don’t even need to give tickets, honestly. If people know the RNC – it’s another way to slow people down. That’s the biggest thing we have to do, but the presence of any law enforcement, I think, plays the biggest role in anything of slowing people down. That’s where we have to be.

We have to educate people. I don’t know how much more you can educate people with the signage and everything else we have in place. We also have to work with our law enforcement agencies and make sure their presence – like you said, when you’re looking at children going to school, you’re looking at probably 7:30 to 9 o’clock, and in the evening again, depending on the school, probably 2:30 to 3:30, but the presence of law enforcement really plays a huge role in that. That’s a big part of it.

I think it was a VOCM story; I’m not sure, whatever. It really bugged me this year when I saw that there are people actually passing school buses. Honestly, they’re not in our school zones, no matter what. The one thing you do when you put a child on the bus, you hope that people have respect enough that when they see the bus’s lights flashing, they see that arm coming out, that you stop.

They’re little children; they’re excited about getting out of school. I probably used to be the most excited person ever to get out of school running across to be able to do whatever I had to do. I know all the little children today are excited about getting home.

Please, anybody coming up behind a bus, don’t pass that bus. It’s so wrong. They’re not looking. They do not look and they’re excited about getting home, whether they have a hockey game or they’re going to Girl Guides, or they could be out just playing in the snow or whatever. It’s a time of evening where they’re excited and they want to get home.

For anybody to do that, it’s wrong. If anybody sees it, take down their licence plate number and report them. It’s unbelievable that someone would do it. I saw the VOCM story and I was just blown away that people actually did that. I know whenever I see a school bus, the one thing I look at is to make sure those lights are flashing or whatever.

I notice my time is gone. I’d love to speak on this for another 15 minutes if I could. It’s very important and I really believe that anything we can do to make our children going to school safer, we have to do it.

Thank you very much, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER (Reid): The hon. the Member for Terra Nova.

MR. HOLLOWAY: Thank you, Mr. Speaker.
Like the previous two Members have spoken, I’m certainly pleased to stand in this House today and speak in favour of the private Member’s resolution which aims to set the maximum speed limit of 30 kilometres in school zones.

I thank the Member for Baie Verte – Green Bay for bringing this forward. I think we’re all going to be surprised if we all don’t agree that this is the right move that we’re talking about today.

Mr. Speaker, we all know the zones around our schools right across this province are very busy and often very hectic. We know that, where possible, parents are dropping off their kids to school while they’re on their way to work. This, in addition to the number of school buses we have that are arriving at our schools each morning, further increases the congestion that students and teachers and support staff and visitors experience each and every day.

Even when we think about some of our K to 12 schools, as our young people are of age and getting their own driver’s licence, they are also driving to our schools which further complicates that congestion that students experience when they’re trying to get to class.

My comments today, Mr. Speaker, I’ll preface by saying that I was a former school board trustee. So I spent a lot of time in the schools in the old Vista school district. I had some first-hand experience of what was really happening as kids are trying to arrive to school, and as everybody else is trying to get to school, all at the same time. Of course, those traffic congestions further complicates the safety that is happening around our schools.

Mr. Speaker, the public would be certainly aware that since we formed government in November of 2015, we’ve taken a hard stance on road safety in this province. As a rural MHA, I travel my own district, the District of Terra Nova. I’ve certainly seen some bizarre behaviours, and I know that’s a bit of a choice word, but I have seen bizarre behaviours of some drivers. I do stress that some drivers on our roadways do some very strange and odd things. They pass on double-solid lines, they head out into oncoming traffic, they pass on blind hills. I’m sure all of us here today have witnessed many of those things that really put others at risk because of those poor driving habits.

Just a few days ago in this House, the Minister of Service NL introduced Bill 13, which proposed amendments to the Highway Traffic Act. These amendments aim to further improve public safety. An increasing compliance of those are drivers who drive without a valid licence, who fail to provide proof of insurance, who have illegal vehicle modifications or, in the winter, fail to keep their cars and their trucks free of snow and ice, further impacting the drivers visibility. Of course, some of those same vehicles are arriving at our schools and that puts many of our students at risk.

As a government, our interest in road safety and the safety of our citizens is paramount. That’s why we’ve been taking these bold steps with new legislation that has come forward. While today we’re talking about the private Member’s resolution, we’re hopeful that this will also turn into some legislative changes in the time to come.

Just a few short months ago, amendments were also made to the Highway Traffic Act to strengthen the impaired driving laws. Amendments expanded on the vehicle impound program, making it mandatory for a peace officer or a police officer to order the vehicle of an impaired driver to be impounded. It is our hope that, by doing so, we will further reduce the ability of an impaired driver to commit repeated impaired driving offences.

Mr. Speaker, in that legislation, we also included that drivers less than 22 years of age would be required to maintain a blood alcohol content of zero per cent. I raise these things today because as we talk about this private Member’s resolution, all the things that we’ve done to date have been with the aim of improving the safety of our communities, our schools and improving the lives of the people that we serve.

Mr. Speaker, we cannot take any chances. We must be vigilant in our approach to public safety. Introducing changes to the legislation and laws that govern us will only improve how we act and make us more responsible to ourselves and to each other.
This private Member’s resolution is another step in the right direction. While we have started to address the safety of our public roadways and our highways, we must also turn our attention to the safety around our schools. There are 258 schools in this province, Mr. Speaker. In thinking about the composition of these schools, we have to remind ourselves that our schools today are also changing. In rural communities, students are travelling from other community to get a good, quality education. Many of these buildings are K-12 schools, which mean we have children of all ages.

In our urban schools and in, I would argue, many of our 20 growth centres around this province, we have heavily populated schools. Today, many of the students attending these schools also lead complex lives. That further likely complicates the safety of everybody who goes to these buildings, all of which makes the need for better safety measures so critical at this time.

I’m reminded of the challenges of a particular school in my district: Riverside Elementary. There are 725 students and I know the Member for Conception Bay East – Bell Island has stood in this House and talked about that school on many occasions. I, too, have been to that school on many occasions.

This school is located in a small neighbourhood. There’s a narrow roadway that leads to the school. There’s a narrow roadway that leads away from the school and there are houses that line each side of those roads. It’s a residential area. In the morning, we have parents who drop off their kids. We have buses that are coming. We have visitors to the school, and safety has been a significant issue.

There’s a parent group that’s been ongoing for the last couple of years that I’m aware of and one of the things they asked me about recently was could there be some safety monitors or could there be some crosswalks installed to further improve the safety of the students who are attending that school.

Now, while it’s already been referenced, that typically is not the responsibility of government, if within a municipality that could be addressed. So on their behalf, I’ve gone to the local municipality and now this group is encouraged to write to the municipality and ask them if they could put in a crosswalk. So others are starting to recognize that we need to improve the safety around our schools.

As you can imagine, that school itself is a very busy place. In busy places when we are often distracted by the challenge of getting to work on time, arguing with our kids about homework that’s not completed and trying to sort out another busy day for any family, the attention to a child crossing the road can be missed. Unfortunately, Mr. Speaker, that’s when accidents occur.

We know that when a child is struck by a vehicle the injuries to that child can often be life-threatening and may cause permanent damage. The faster the vehicle is moving the greater impact and the more devastating are the results. None of us ever want to witness a situation like that.

Just thinking, for a moment, about a close call that you’ve had and I’m going to take us a little bit away from thinking about a child being struck, but things that become very real to us: moose-vehicle collisions. You think about an accident scene when the driver was not lucky enough to escape hitting a moose, thinking about the loss of life or the serious injury that has taken place. We often say to ourselves that high speed is a contributor in such of those accidents.

Mr. Speaker, we often hear the message on the radio and the television reminding us to slow down at night and to have your moose eyes on. We also need to slow down in our school zones so that we give children, our children, every possible chance to arrive at school and to return home each and every day free of harm.

On average 2,412 students are injured and 30 child pedestrians younger than the age of 14 are killed every year. Moreover, children between the ages of five and 14 are at the greatest risk of pedestrian-related deaths. That’s a staggering number. If we look closer at this age cohort, children between the ages of 10 and 14 have the highest incidents of pedestrian-related deaths.

We may ask ourselves: Why does this happen? Studies show that children in this age group
have difficulty judging the speed and the
distance of an oncoming car; therefore, they
often make mistakes and feel that they can get
out of the way in time. Think back when you
were young, you were playing in the streets and
you saw an oncoming car, you thought I’ve got
lots of time. Drivers are driving faster these
days; the time adjustment and the anticipation
are no longer there.

Children who fall in this age group also believe
that if they can see the driver, the driver can see
them. Mr. Speaker, that is simply not true.
Drivers, too, have a lot on the go. They are
distracted by many things: sounds on the radio,
conversations with other people in the vehicle,
slippery road conditions, as has been referenced
already, and the list goes on. All of these things
add to the safety of our children.

According to the World Health Organization,
speed has been identified as a key factor in road-
traffic injuries, influencing both the risk of a
road crash, as well as the severity of the injuries
that result from the crash. The Canada Safety
Council also states that speed is a factor in 30
per cent of fatal crashes and 12 per cent of all
Crashes.

Now, Mr. Speaker, 15 minutes is not going to do
me, as the Member opposite also said. I still
have some pages to go, so surprise, surprise. I’m
just going to move on and say that when we
think about what’s happening across other
jurisdictions, we see that other provinces have
already moved to reduce the speed in our school
zones to 30 kilometres an hour. We see as well
that is happening within some municipalities in
this province. Other jurisdictions, other
provinces that still have 50 kilometres an hour
are making considerations, or have
considerations to reduce it to 30 kilometres an
hour within municipalities or if children are
present.

The private Member’s resolution today speaks to
our need to move to 30 kilometres per hour, and
I think that is the right move for us to do for the
safety of all our kids. Mr. Speaker, as I conclude
my remarks, I reiterate that this is a move in the
right direction. School zones are busy places.
Children, by their nature, are often distracted
and can be unpredictable in their behaviour,
even if that behaviour impacts their safety. We
must take some steps to further ensure their
safety. So I’d certainly be voting in favour of
this resolution today and I’d suspect all
Members in this House will do the same.

Thank you so much for the opportunity to stand
and speak to this resolution.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for
Conception Bay East – Bell Island.

MR. BRAZIL: Thank you, Mr. Speaker.

It is indeed an honour to stand and speak in
support – and I want to make that very clear
upfront – of this private Member’s resolution
that has been put forward by the Member for
Baie Verte – Green Bay and seconded by the
Member for St. George’s – Humber.

This is indeed a very important issue and it hits
home for all of us because all of us, somewhere
along the way, have a school in our district.
Some are a little bit more fortunate that it’s on
the rural roads where it is in the municipality
where the municipality has the control over the
speeds.

What I will say is speed is dangerous, speed
injures, but more particularly, speed kills. And
that’s the danger here. All of that is senseless
when it’s not necessary. We have an ability to
stop that. We have the ability to curb the safety
factor here and the danger we put our young
students in front of. We can do that starting with
things like this.

A private Member’s resolution is an opportunity
to bring it to the forefront, but it has to be taken
to the next level. We need to change the
Highway Traffic Act to reflect that the change
can be made without being too encompassing for
a particular area. It can be done without having
to take a long time frame to ensure that the
process is put in play. We can learn from places
we’ve already done it.

My hon. colleague here for Cape St. Francis has
talked about while he has a main thoroughfare
that’s a provincial road, they did find a way, in
co-operation with the municipality, the province
and the department, to put a crosswalk there, to
put proper lighting, to put proper signage. That’s what this becomes, the most important thing.

When I was minister of Transportation and Works – in the last few months when we were seriously looking at how we could do this – in some schools we implemented this and worked with the municipalities. Some of the data shows – and rightfully so, I mean I question every bit of data, too. But if somebody can show me the evidence, then we have to take that into account and realize we have to find alternate ways or accommodating ways to ensure that safety is paramount here.

In some cases, our engineering officials would explain and look at the Transportation Act of Canada and the research that they do concerning speed bumps, reduction of speeds, coming from one speed zone to another speed zone and the impact that has on people suddenly stopping and a higher correlation of rear-end accidents and what impact that has.

All the evidence after that showed if you lead into it, if you have proper notice, proper signage, proper lighting, proper education, you can ensure that if you could go from one speed zone to another, you minimize the potential impact for that particular driver or group of drivers who are distracted, who are not paying attention.

When you add into that, particularly where we’re talking about where we want to impose a new regulatory process here about speeds around school zones, then you realize that we need to even be more proactive. We need to put more signage further, letting people know that you’re about to enter a school zone, letting people know that you’re about to enter an area where there’s a reduced speed limit, having flashing lights to identify people.

Maybe even the stationary radar signs, which a lot of our communities have now and are a real eye-opener – because we all sometimes drive around a little heavy footed when we’re driving. Cars are made now so silent, so easily accessible in the sense of their acceleration that you don’t realize the speed you’re doing until one of these lights start flashing.

The biggest fear I get, I drive through my district in Portugal Cove-St. Philip’s and, unfortunately, it’s a main provincial road, but it’s a snakepit. It goes down and up hills and it turns in and out because it was a cow path 150 years ago and you’re limited with what you can do in straightening the road for sightlines, in what you can do from eliminating hills and turns, but we have put in play three of the radar detectors. Just as you go around and you don’t realize and it blinks and tells you you’re doing 58 and you should be doing 50, that blinking light, automatically, it’s radar for your brain because then automatically you can see everybody – the brake lights come on everybody’s car because they didn’t realize it.

These are not people intending to endanger anybody by speeding or intending to break the law, but just inadvertently because the way vehicles are made – it was mentioned by my colleague here for Terra Nova, people get distracted and they’re not paying attention to their odometers anymore and things start moving in a different mode. What has to happen here and what we’re doing here – and there’s an old cliché. In Transportation and Works it was always told to me, add 10; 50 is 60 where people think they can operate their vehicle at that speed in a safe zone and still be able to stop properly; 40 is 50; 30 would be 40.

You look at your distance of your sightlines, you look at the configuration of your roads, you look at the number of people travelling on it, the number of cars, you look at intersections; but if you take into account that we’re going to be looking at this in school zones, multiply that by 10, the distraction factors, the number of people who are going to be travelling, people who are in a hurry because parents are dropping off or coming out of schools.

Normally, don’t forget, schools are in our most heaviest rush-hour times, early morning, evening times, and that has a major impact on people’s attention span and their patience. Sometimes people make really stupid mistakes, particularly around buses.

We’ve seen people cut on the inside of a bus to go around them and the dangers that are affected to that. We know that the RNC will tell you they’ve given out tickets – amazing. We all do stupid things in life, but then there are the idiotic things that some people do. When that means you’re now taking into account a danger, an
increasing danger 50-fold, because no kid is expecting there’s a car coming on the inside of a bus, nor is a bus driver, so that adds a little bit more of an issue around that.

If we go back to the intent of this private Member’s resolution, about lowering the speed limit, there are a multitude of reasons why I support this. One is, again as I mentioned earlier, the unfortunate, misconceived conception is that we can add 10 to everything we do and still be safe in what we do. If that is indeed how some people think, well 30 becomes 40. At least we have a little bit more leeway of being able to stop. Maybe when people realize that, they’ll go back to the 30 reality of stopping in those areas.

The other big thing here is we have to prepare people; we have to let people know what’s happening. We have to let people know you’re in a school zone well in advance as they’re entering it. We have to let people know, we’re all about bricks and mortar in our society, lights flashing, signs coming at us, gives us a better understanding that what we’re about to enter into is something we should be aware of. Because we’re distracted, our cognitive ability to be able to think 10 different things at a time, we have to think about the most important thing. As we go through a school zone, it’s about safety.

Having this here now gives municipalities the ability to work with the province and the Department of Transportation and Works and say: Do you know what? We want to make a safe zone. We can now collaborate on crosswalks. We can collaborate on better signage. We can even look at better ways to doing sightlines.

I’ve had municipalities approach me when I was minister and say: There’s a new building here. There’s a new school going up here. Can we now cut some of these trees out for sightlines because there’s an intersection? I’ve always said: Look, take it out. If it’s not our land, we’ll find whoever is the landowner to ensure we do that because it’s based on our centre of the road in, our 30 metres. We’re going to take that to ensure safety is paramount here.

As we look at those types of things, we have to keep in mind the valuable asset that we have to keep safe. Students are distracted just as much as drivers are now with cellphones and iPads and all the things they’re doing as they walk. In our day, you walked, you may have had a stick or you kicked a can, but at least you were looking in the right direction. Cars were louder; you could hear them coming. There were less cars on the road. The understanding about safety and all of that was different then.

One of the Members here had mentioned the fact that some of the key areas now where new schools are growing are in heavy traffic areas that didn’t exist before. So the infrastructure is not there for it. The Member for Cape St. Francis had talked about that, the Member for Terra Nova, some of these are really right in the midst of neighbourhoods, but now in areas where there are main thoroughfares, where there’s traffic constantly coming and going and the population has dramatically increased.

In my own district, we have Portugal Cove-St. Philip’s, which is basically a full, round circle. There are 55 streets in the middle of it, but there’s only one main thoroughfare to go around. As you come down Portugal Cove Road, not only do you have the traffic of everybody who’s going from St. Philip’s, who may be going to Paradise, who may be going to CBS because the Outer Ring Road is backed up, you got people who are impatient, they’re not familiar with the road configuration and now they’re passing a major school with 700 students.

You have people coming down Thorburn Road, a major thoroughfare, who may be going anywhere. Add in the fact that we’re talking at least 600 cars a day are travelling in one of those two directions to the Bell Island ferry. Now, when you’re on a schedule, people are even more impatient because there’s a time frame they have to meet. So, again, in those cases, their 50 might be 65. The stopping distance from a 65 to a 50 is a big difference – higher safety factor.

You reduce that to a 30. You let people know with flashing lights. You let people know with prop signs in advance and you do what we all agreed here, you put enforcement there. You give a couple people a few tickets in advance and have that flashing light there, one of those police cars pulling somebody over, I can guarantee you that will be a deterrent. If the
deterrent about keeping kids safe is not enough, I can guarantee you money out of their pocket will remind them of what’s at stake here. So these are all simple things that can be done, but to do that we need to do the first thing: reduce the speed limit.

We have a new school that we just opened in Portugal Cove-St. Philip’s on Thorburn Road, which is a main thoroughfare. While we managed to get Transportation and Works to agree to put a crosswalk – the town put a crosswalk – we don’t have flashing lights there at this point. We do have one sign saying school zone, but to me it needs to be back, to prepare people, with flashing lights, and the speed limit is still 50 going through it, which is particularly a major dangerous issue there.

We don’t have turn lanes to make it work the way we need to. We’ve got people coming from CBS, Paradise, all through Portugal Cove-St. Philip’s, Bell Island, coming Thorburn Road early in the morning and we got kids trying to walk across the street. We have no sidewalks. So it’s a very high-traffic, dense area with a speed that normally is not conducive at the best of times, let alone when you’re in a school zone.

So at least if we knocked it back to 30, gave the municipality the responsibility, or the ability, or we as a province took on to say we’re going to put additional signage up, we’re going to prepare people for what is coming and we put up our radar detector so people would know and realize it as they’re approaching it, that not only am I doing 60 and I’m in a 50, but I’m going to be doing 60 approaching a 30 zone, at least they start slowing down, to be in that safe zone.

There are ways that we can mitigate any danger to our students in school zones. We mitigate the danger to students and we’re also mitigating the danger to the drivers who are coming in any direction; and the moms and dads and aunts and uncles and grandparents who are turning in and out, dropping off their kids and picking them up; to the bus driver who, obviously, every day has the responsibility of carting 50 to 200 students, depending on their routes, back and forth to schools at any given time.

We’ve heard that from the bus driver’s association about speeds in school zones. We’ve heard it from municipalities. We’ve heard it from the public interest groups about safety. We’ve heard it, particularly, from engineers in municipalities that are growing and have heavy traffic volumes, with limited road configuration in the way of being able to address with turn lanes or lights and these types of things. So we need to be able to find a mechanism, an immediate mechanism, which at least starts to address that from a safety point of view.

Reducing the speed limit in school zones is ideal.

Now, I’m going to take it a bit further and I probably would have made an amendment, but I think if we can move this forward there are other discussions. Particularly in my district, and I think everybody has it, I also have a major number of daycares and preschools. Fortunate enough or unfortunate, depending on how you look at it, in Portugal Cove-St. Philip’s there are three all in maybe 400 feet from each other on various sides of the road. It’s a heavy, congested area where there are buses stopping at given times, kids have to cross one side of the road to get to one daycare and vice versa on the other. It’s still our students. There are schools, preschool and daycare. It’s all part and parcel of it. Don’t forget, a number of our kids do after school programs at these facilities, so they are being dropped off.

I’m in the process now, and I’ll be meeting with the Minister of Transportation and Works, particularly in Portugal Cove-St. Philip’s, to ask is there any way we can reduce the speed. This is the road that goes to the ferry, the closest to the ferry. So you’re going to have the highest volume of traffic, higher speed, and it’s a snake canyon, for want of a better phrase.

If we can reduce that, put up proper signage, at least we know in our own minds we’ve done due diligence to improve safety on those roads, and that’s all we can ask. We ask people to follow the law. We can enforce it a little bit better by having more enforcement to send a message to those who inadvertently may not be paying attention, or those who deliberately think they can violate safety rules and regulations that are put in play by fining them. I know we’ve talked about – there are a number of new fines that have been implemented here or going through
the House for discussion. So that’s a deterrent. It’s very important.

If we do reduce the speed, we have the ability to do two things: make people aware this is a vulnerable area, that’s why the speed is down to 30. Nobody wants to travel 30 because they think 30 is crawling, but if it’s based on a principle that here you’re going to have a big influx of people who may not be paying attention for an immediate area, if you want to improve safety you could do that.

The second is from an enforcement point of view. It’s very easy to send a message to somebody who is doing 60 and 70, and we’ve seen them 80 in 30 kilometre zones, by giving them a hefty fine. I guarantee you the next time they come down and see that flashing light and that sign, they won’t be long making sure they’ve gotten to the proper speed limit.

Mr. Speaker, I want to thank the Members who put this forward and say that I will be definitely supporting this, and do ask that you look at how we can also encompass daycares and preschools because safety doesn’t just start at six or 16; it starts when kids are coming off buses or getting prepared to know about getting on buses.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER (Reid): The hon. the Member for Harbour Grace – Port de Grave.

MS. P. PARSONS: Thank you, Mr. Speaker.

It certainly is an honour to always stand in our places, of course, and represent our great districts. I represent the strong district, I’d like to say, of Harbour Grace – Port de Grave.

I would like to commend my colleague, the Member for Baie Verte – Green Bay, on bringing forward this private Member’s resolution.

Mr. Speaker, for our viewers at home, of course, our constituents who tune in to watch, a private Member’s resolution is an opportunity for a Member who is not in the Cabinet to put forth a resolution, and to influence potential legislation here in our House of Assembly. I will reiterate this PMR, and it is:

WHEREAS safety for all students is an important priority; and

WHEREAS speeding in school zones is still a prevalent issue in our province; and

WHEREAS according to the World Health Organization, setting and enforcing speed limits are two of the most effective measures in reducing road traffic injuries;

THEREFORE BE IT RESOLVED that this hon. House supports the Government of Newfoundland and Labrador in setting a maximum speed limit of 30 kms/hour in school zones.

Mr. Speaker, I will reiterate and review a lot of the things my colleagues have already said here today, but we can’t say enough. We can’t emphasize enough exactly how paramount and how important safety is for our young people.

We have a number of school zones across our province. In the district that I represent, of course, which is located just an hour outside of the capital city in Harbour Grace – Port de Grave, there are a number of schools. I have Ascension Collegiate, which is a high school, and that happens to be located on the Conception Bay Highway. I’m happy to say the speed limit is actually 40 kilometres in this particular school zone. These are older students or mature students, Level I, II, III, grade 10 to grade 12.

Of course, as I mention often here in this House of Assembly, my very important school – all schools are important – but Coley’s Point Primary is quite near and dear to my heart. I’m happy to say this particular school is located off the Conception Bay Highway, the main drag, over in Coley’s Point, in the municipality of Bay Roberts. I’m happy to say the speed limit is 30 kilometres in Coley’s Point Primary. That’s our most vulnerable school population. We have kindergarteners, kindergarten, grades one, two and three here at Coley’s Point Primary.

AN HON. MEMBER: You should have had it years ago.
MS. P. PARSONS: Absolutely, and I’m happy to say to the Member, of course, that Coley’s Point Primary is committed and we will have that school for those students in that district.

St. Peter’s School in Upper Island Cove, the community of Upper Island Cove, we also have a school zone with a 30-kilometre limit there. St. Francis School in Harbour Grace, I’m happy to say the speed limit there has been reduced to 40 kilometres per hour.

I will take a minute now to talk about St. Francis School. I actually attended St. Columbus, which is in the same parking lot on the same property as St. Francis School. That school is located along the Conception Bay Highway. As we know, it’s a main thoroughfare throughout the Conception Bay North region for the riding of Avalon. It’s across the street; it’s adjacent to the old courthouse.

Those of you who are familiar, of course, with the courthouse, it is located on a very dangerous turn on the Conception Bay Highway in the Town of Harbour Grace and traffic just come by it. They’re coming up from Carbonear, off the Veterans Memorial, sometimes doing 70 kilometres. Let me tell you, not only our Members here on this side of the House, I’m happy to see as well that the Members across the way agree with this PMR, but parents are very adamant and very vocal about the safety of the children in school zones.

For example, we know the 1.6-kilometre rule is a very contentious issue across our province, in some areas more than others. We know it was implemented years ago by the previous administration, if I’m not mistaken. Meaning the 1.6-kilometre rule, the busing has been eliminated in that area for our young vulnerable children, so more children are on our roads now.

Our school times have even changed. They’re out earlier. Now with the daylight savings time, it’s actually dark when those little kids are out there. So parents are adamant, I have to say.

I speak with the parents from Harbour Grace regularly, and they are very adamant and concerned about the safety of our children. They’ve lobbied the municipal government of Harbour Grace, the Town of Harbour Grace for a school change. I’m happy to say, I’ve been working with councillors down there and the mayor and we have some signage in place. We just implemented those speed-radar signs. When you’re driving through a particular zone they’ll flash and let you know your speed. Parents want more. We need to take every effort we can with regard to signage, with regard to crosswalks and even speed bumps where possible.

St. Francis School in particular is located, as I say, along the Conception Bay Highway, which speed bumps are not to be enforced for various reasons, but I’m happy to say that limit has been reduced. The town has been working toward that. We’ve had meetings with the Department of Municipal Affairs and Transportation and Works. I always say by working together we achieve the greatest results. So that certainly is great to see, but we need to do more. With this PMR today, I’m looking forward to the support of all Members across the way. I’m confident we’re going to get that.

Again, to talk about the signage, an individual I know was recently penalized with a speeding ticket. Let me tell you, this person was going through the school zone and didn’t realize the speed limit had changed. So that’s the question, the signage. We need that signage there, whether it be the lights, whether it actually be signs themselves, but not knowing until – this happened to be in the metro region. This wasn’t in the District of Harbour Grace – Port de Grace. As a matter of fact, it was in the metro region when this happened.

Fortunately, a member of the RNC, the Royal Newfoundland Constabulary was there to pull that driver over. I was told that ticket was a minimum of $300. I was told by the driver – and this isn’t even the highest amount they’ll have to pay. The penalty, apparently, it can be upwards of $800, $900.

Then, ironically, the same driver, within a month, was pulled over again in a different school zone within the metro region and again another ticket compounded with that. It’s not funny, I must say, but let me tell you when drivers are penalized with such a hefty fine it certainly will serve as a deterrent. We have to do everything we can. It’s the least we can do to protect our young children. My colleague across
the way also talked about having the speed limit dropped and decreased where there are daycare centres, and that’s also very important.

I would encourage motorists and drivers all across our province to be careful and to certainly drive the proper speed according to conditions. For example, I, myself, we talk about the Veterans Memorial, obviously this is not a school zone, but this highway is a contentious highway. It’s been making the news for all the wrong reasons lately. I have a personal friend actually who lost their life on that highway some years ago. There are many collisions.

Just last night, Mr. Speaker, I left our hon. House to attend an event in my district and I was on the Veterans Memorial. It was actually between Roche’s Line and Makinsons. We remember last night, the road conditions; it was horrible. It was a black night, a rainy night and it was really hard to see. As we know on the Veterans, we don’t have passing lanes, which is a challenge in itself. There are no passing lanes on the highway. We do know the speed limit is 100 kilometres per hour. I was driving according to the conditions. I was driving about 70, between 70 and 80, and, to my surprise, here was a moose right in my tracks, literally about 10 feet away from my vehicle. I slammed on the brakes, of course, I put on my emergency indicators and this moose stayed in the road.

Let me tell you, the adrenaline, it’s mind blowing. Those large animals are there and you don’t see them until it’s too late. They are white on their legs and that’s how I was able to see this animal. A driver pulled out and passed me. I was stopped abruptly on the highway and I guess a driver was impatient pulled out, passed me and almost hit the moose, Mr. Speaker.

Again, we can’t reiterate it – we just passed some legislation, the hon. minister had brought it in about the Highway Traffic Act recently, but we need to do as much as we can to encourage safety and to practise safety measures on our highways, especially in our school zones.

Mr. Speaker, this certainly is a very positive private Members’ resolution. This should have been done, in my opinion, years ago, but I am very happy to say that it is this government that is putting forward this private Member’s resolution, so I look forward to the co-operation of all Members on this.

Having said that, Mr. Speaker, I certainly will take my seat and allow some of my colleagues to get up and also speak to this very positive private Member’s resolution.

Thank you, Mr. Speaker.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: The hon. the Member for St. John’s Centre.

MS. ROGERS: Thank you very much, Mr. Speaker.

I’m very happy to stand and speak to this private Member’s motion on speed reduction in school zones. This private Member’s motion calls for a reduction in school zones to 30 kilometres per hour. I’m sure that every Member in this House sees this as something they can support. I certainly can support it and will support it.

We have seen so many traffic fatalities in the province in the past while. As the Member for Harbour Grace – Port de Grave talked about Veterans Memorial, I also was on Veterans Memorial Highway a few days ago and somebody was passing in a no-passing zone and coming towards us and we almost got hit as well. It really is scary. We know it’s all about speed and distracted driving and sometimes, though, also the roads themselves.

I certainly can support this. I’m actually surprised, Mr. Speaker, that at this point in our history this is still an issue. One would think that we already would have tackled this issue. Although lowering speed limits is a very important issue, particularly in school zones, the other thing, the other key issue for this is enforcement. We can have all the legislation that we want. We can post signs that say the speed limit is 30 kilometres an hour, but if there is no enforcement, it is meaningless. Enforcement is a key issue to this because, again, in this House we would support this concept. In our larger communities, people would support this as well.

As it stands today, unless otherwise posted, the speed limit in schools in this province is 50 kilometres per hour.
In addition to the fines, convictions for passing a school bus while loading or unloading children is still a serious issue in this province. It’s six demerit points. I believe we have about 12 points on our licence. If you have 12 demerit points, you lose your licence. It’s suspended. I do believe that we have to look at: How are we going to enforce this? Without enforcement, it is meaningless.

So let’s look a little bit at why providing resources for enforcement is as important as the measure that we are debating here today. We have been here before; we’ve been debating this issue in this House before. This is not a new issue. It’s an issue that’s been around for a while and ever so important.

In 2010, before my time here in this House, the then Government Services minister raised the fines for speeding in a school zone from a minimum of a $100 for a first offence, up to a maximum of $1,500. So that was seven years ago, Mr. Speaker. The Minister of Education at the time said he hoped that stiffer fines will curb the speeding in school zones, adding that speeding in school zones is completely unacceptable. I believe that those of us in this House believe that speeding in school zones is completely unacceptable. He hoped that the higher fines would reinforce that fact. And so here we are, seven years later, still trying to prevent speeding in school zones.

In May of 2016 – I was in the House – I spoke to an amendment to the Highway Traffic Act, which brought in two measures, the second of which was raising the minimum and maximum fines for passing a school bus and for school zone speeding. There were three specific driving violations that were being addressed by that legislation: speeding in a construction zone, we’ve all seen the signs posted for that; speeding in a school zone; and passing a school bus stopped with red lights flashing.

In 2009, the English School District had a pilot project that placed 10 cameras on its buses so that would enable the buses to take a photo of the vehicle and the plate number so that if, in fact, a vehicle were to pass a stopped school bus with its red flag out, that there would be a record of that car and that licence plate. So that was a good deterrent, but this resulted in 16 charges and five convictions. Officials were not sure how many charges there were before the pilot project started because records were only kept for 18 months.

Again, I believe it’s not just about posting the signs or even posting the fines, but enforcement, how are we going to make sure – because we know that it is speed that is causing the majority of the accidents in our province and unfortunately the fatalities in our province.

So at the time, in 2016, I supported these amendments, but I also said I would like to see those rules enforced 24-7. If we’re in communities where there are schools on our main streets or on our major roads in rural communities as well, why would we not enforce that speed limit 24-7? We know that children are in after-school activities, sometimes in the evenings, sometimes on the weekends. So we must provide and instill a culture of 30 kilometres an hour in school zones, whether it be a Saturday, whether it be a Monday morning, whether it be a Friday night because children are occupying those schools. It gets us into that habit that school means slow; 30 kilometres an hour in a school zone at any time, not just during what are seen as regular school hours.

We have seen, in some of our communities, staggered school hours for some of our students due to population shifts, et cetera. So why not enact this legislation to cover 24-7? There’s no harm to it. It doesn’t cost any more money. It puts in the minds of drivers, habitually, in a school zone, you slow down to 30 kilometres an hour – easy. It takes the guessing out of it. Again, I believe that the benefit of doing that would far outweigh any – I can’t imagine any negative aspect of that. It would imprint in our minds that school zones are 30 kilometres an hour.

Sometimes our kids, if they’re on sports teams, they’re in schools up to 6 o’clock in the evening. Sometimes it’s on weekends. Sometimes, if there’s a play going on or a basketball game, our kids are in basketball tournaments at schools and they rush out and they’re excited, our kids don’t necessarily look both ways and it isn’t safe. When our kids are at the school, it’s not safe to have speeds over 30 kilometres an hour; that’s what we’re saying. Our kids are using our
schools much later than just the actual days that they’re in their classrooms.

There’s been a terrific experiment at Beaconsfield Junior High just recently where the administration is opening the school on Friday nights. Last month, on a Friday night, saw 225 people at the school’s Open Gym Community-Building Initiative evening. That was just this week up from 100 to 120 that they had averaged so that’s growing.

We’re seeing – particularly if government is encouraging more physical activity – more community activism and involvement in the schools, the schools will be used and that’s a good thing, but that means our children are going to be in the school area, in the school zone area in the evenings and the weekends. Let’s keep them safe.

If children, during the regular school hours, know that drivers are very cautious, that the speed limits are lower, they’re a little bit more laissez-faire about their own safety. So let’s ensure that they are safe 24-7.

Why would we not do that? There is no good reason not to do that. I believe that this private Member’s motion comes out of a concern for our children and a concern for their safety. It makes sense. Let’s do it. Let’s make this even stronger. Let’s make our communities even safer for our children.

The Beaconsfield Junior High school experiment showed a tremendous showing of teachers and parent volunteers on hand to receive the students, including their entire student council, as well as a local musician, to encourage the students. Guidance councillor, they were all involved. Let’s do it. Let’s keep our kids safe 24-7.

Today, the government thinks this motion calling for lowering the posted speed limit will do it, but it will only do it if it’s enforced. People who speed don’t slow down because of signs. They’ll slow down if they know there’s enforcement and that’s what we need.

There are a number of ways to do that enforcement. Maybe he may speak to that, the Member for Baie Verte – Green Bay. It will be interesting to hear what he might have to say about that.

It may take some resources to our law enforcement folks in order to ensure that there is enforcement of this because we’ve dealt with this issue a number of times and here we are yet again. We had slowing down to 50 kilometres an hour in rural areas.

So how are we going to enforce this? It may take some additional resources. I dare say it won’t take a lot more, but we may need some and we may need some creative ways of doing enforcement in this area.

Without giving law enforcement agencies the resources to enforce these limits – as we have seen from past initiatives – they are not going to be as effective as we want them to be. The Legislature has passed measure after measure to protect young people in their daily commute to and from their schools, but we do find ourselves back here in the House talking about this. That’s why we’re doing that today because the Member has seen a need in his community and a lot of us see that need in our own community.

Passing a school bus with the red lights flashing is still a serious public issue, despite the fines and the new rules. So it’s about enforcement. Wouldn’t it be interesting if there continued to be a camera on the back of every school bus to ensure – and that if people knew.

When I was a young girl, my cousin, Debbie, who was six years old, was killed by a driver who passed a stopped school bus. She got off the school bus. The red flag was out. She walked to the front. She went to cross the street and she was hit and killed. The devastation for our family around the death of Debbie was horrendous, and we all know that. We all know how difficult that is. We all know how important it is to keep our children safe on the roads, whether going to and from school or when they’re doing extracurricular activities in school.

Maybe what should happen is that the fines should be stiffer. Maybe a suspended licence for the first offence, 12 demerit points right off the bat if you pass a school bus that’s stopped.
This September the RNC reported it had received several complaints of drivers passing stopped school buses on Commonwealth Avenue in Mount Pearl. It’s still happening. We have the legislation. We have the fines. It’s still happening. So what we want to do is we want to stop it from happening. What are the best ways we can do that?

Manitoba, last year, announced between $40,000 and $60,000 to help police, including the RCMP, in some cities conduct a targeted enforcement campaign in designated school zones through the month of September. Maybe that’s what we can do. Do a targeted campaign in September and do a targeted campaign in January. They recognized the need for enforcement as an essential part of protecting our children as they go and come from school.

By all means, let’s lower the speed limits. Let’s make them 24-7 so it’s imprinted on all of our minds that school zones mean 30 kilometres an hour. No ifs, ands, or buts, at all times, but let’s also give law enforcement the resources they need to give this new law teeth.

Thank you very much, Mr. Speaker. I’m very happy to have been able to speak this. I hope that the Member opposite will consider a 24-7 approach to this particular piece of legislation.

Thank you very much.

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

**MR. OSBORNE:** Yes, point of order, Mr. Speaker.

I made comments earlier that I withdraw.

**MR. SPEAKER:** Thank you.

The hon. the Minister of Education and Early Childhood Development.

**MR. KIRBY:** Thank you, Mr. Speaker.

I had a lot written down here to say. I’m not going to have a whole lot of time to get through it all, but if the Members across the way will indulge me, Mr. Speaker, I’ll –

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

**MR. SPEAKER:** Order, please!

**MR. KIRBY:** – have a few things to say about this.

The Member for Baie Verte – Green Bay came to me and he proposed this private Member’s motion. We’ve been doing the private Members’ motions a little bit differently than in the past. These motions are basically germinating with our Members of the House; the private Members are coming up with ideas and pitching them to their colleagues in our caucus. That’s how we’re prioritizing the issues that we’re bringing forward in the form of private Members’ resolutions.

The Member for Baie Verte – Green Bay came to me and asked me about this. I thought it was a good idea to have a discussion about this. I say to the Member for St. John’s Centre who just spoke: Members, as long as you have a seconder, you’re always welcome to put in an amendment; that always makes the debate a little bit more interesting as well. So in the future if you have suggestions, you’d like to see the motion change, you can always make an amendment to that effect.

I heard the Member for Cape St. Francis talking and he said his grandfather and it hit home for me. My son is six and a half; he’s in grade one. He goes to school and it’s something certainly that comes to my mind every now and then. He goes to school in Torbay. That’s the school where my wife teaches. And it shocks me sometimes; I drop him off there some days or I go out to the school and it’s like a racetrack there in front of the school. It’s amazing how people do not adhere to the current posted speed limit in the school zone as unfortunate – and one of these days, I keep saying, somebody is going to be injured as a result or worse.

One of the things that I’ve found to be most effective is those digital displays. That does require more resources on behalf of municipalities or Transportation and Works or whatever. When you see, you’re driving along – the other day I remember I was driving down in a school zone. I was approaching a school zone and one of those clocks were up and I
immediately checked my speed. I sort of thought to myself, now that would be great if the Minister of Education got caught speeding in a school zone. But I was able to check myself by looking at that digital display, and that’s one of the things that I think has been really, really effective.

Again, it all comes back to behaviour. One of the things that I learned – because we’ve had a lot of discussion about busing – as Minister of Education that I didn’t know when I was a critic in Opposition, is that folks often say at the district where they plan all the bus routes, they say – and principals and administrators will say this as well – the buses are more full in the evenings, in the afternoons, than they are in the mornings. And that’s a behavioural thing. You can sort of speculate as to why, but in many instances parents are not availing of the busing that’s available for their children in the mornings for whatever reason, because of scheduling or what have you or preferences for whatever time they leave, get things underway in their homes in the morning.

The problem that causes is more congestion on school parking lots in the mornings, especially as we’re hitting up against the time that school is to begin. So again, it’s a behavioural thing. If we thought about those behaviours – I know there’s one school out in Paradise and I’ve gotten quite a bit of feedback from concerned parents about the congestion on the parking lot because of all of those parents showing up in their private vehicles, as they’re approaching the beginning of the school day. And that is a subject of concern.

That’s why I think reducing the speed down to something closer to 30 would make more sense, because you already have congestion and then you have the whole business of distracted driving. We know from research that people aren’t as alert in the mornings, so you have an additional complication there as well. We have issues around distracted driving, period. We’ve been talking a lot about that particular issue because we’ve had fatalities on our motorways, unfortunately a significant number of them this year. So there are a whole variety of different things going on here. We have the research.

The Member for Stephenville – Port au Port came to me and said in such-and-such a municipality over in his part of the province, the municipality has mandated that the school zone speed be 25; that’s the maximum. So we already have areas in the province where it is lower.

I could go on, but I see that – no, I still have time, correct?

MR. SPEAKER: Yes.

MR. KIRBY: Yes.

I think we already have precedent in areas of the province where people are willing to accept this, because I think that’s really the thing. I’ll go back to my comments about behaviour. If you’re driving – and most of us, the commuting public if you will, who are going to work, dropping our children to school, entering into and leaving school zones, that’s our routine. We do that all the time. So once you get acclimatized – when it comes to these digital displays, they don’t need to be permanently erected in a school zone.

If you put it there at the beginning of the school year, you could move it around, you could have it there periodically, people will check their behaviours against it. We’re creatures of habit. Once we get used to doing things, like slowing down to whatever the mandated limit is, we just sort of naturally do that out of concern.

The whole business around the 24-7, whether that’s something that should be done, there’s no question that there are school activities happening outside of whatever the time the school day is Monday to Friday. There’s no question about that. I wonder about in the, sort of, late hours of the night or early morning and so on, if that is practical, but who knows how much traffic there really is in that respect.

One of the other things that we see in the news all of the time, and it happens every year when we start into the school year – I suppose we expect people to follow the rules, but we have to understand in a lot of instances people move into an area or they might get a new job or something’s different in their life where all of a sudden their commute is now in a school zone, the route includes a school zone. This habit that people have of passing school buses – and as the
Member was saying, somebody passed on the inside of the school bus. We’ve known for a long time that we have to do certain things, stop when there’s a school bus stopped and letting children off, or allowing them on. That’s been an established fact; it’s been an established law for a significant amount of time.

We have as a province, as a jurisdiction, put a whole lot of money into the retrofit of buses, of buses that have features that help to ensure safety, like those arms that go out that prevent children from walking in a more hazardous way around buses. There are other features.

The whole business around the video cameras – we’ve heard about video cameras on buses, not just for this purpose for almost like a photo radar, if you will; we’ve also heard about it in terms of the context of anti-bullying and so on. We have heard calls before for video monitoring equipment.

There was a report that was done by the previous administration that talked about school busing and that was one thing that featured prominently in it. I guess the question really boiled down to is there research that would indicate that would be effective. It would be a cost-effective way of dealing with the problem because it would be potentially a significant expense, and then whether or not it would do what I’ve been suggesting, which is to encourage people to change their behaviour in the end. That’s yet to be known, but I’m certainly open to any research that folks might have associated about that.

I guess the other thing I would say about my own district, and my adult life I’ve spent it here on the – though I’ve travelled the province a lot, I’ve spent my adult life here in the City of St. John’s, effectively, and the Northeast Avalon. With all of the commuting that is going on today, just take Portugal Cove-St. Philip’s alone. It’s a community that’s grown by leaps and bounds. The same thing goes for Torbay and the sort of adjacent areas out there, just massive growth – Paradise. We have all those people driving down Thorburn Road, all these additional people driving down Thorburn Road, coming down Torbay Road, so a lot more congestion.

With all due respect to the City of St. John’s and all the sort of adjacent municipalities in the Northeast Avalon, our motorways, our streets, city streets are really not yet able to accommodate that significant change in commuter traffic patterns. So you see a whole lot more traffic just by virtue of the fact that people are going to work and taking that particular path.

Over there by the Avalon Mall, we have two schools just right there in my district in the Baird Subdivision, Leary’s Brook Junior High and Larkhall Academy, both there on Larkhall Street. There’s a tremendous amount of traffic coming down that road. There are a lot parents who walk with their children to school. I’ve been over there and volunteering at school programs, meeting with the folks and I see that all the time. There’s a lot of traffic in the area and not everybody, unfortunately, follows the rules.

We did have a couple of years ago, a tragic pedestrian fatality just right there in that area. That person was crossing the street and, unfortunately, was hit and died as a result of the accident. That’s just one example. There are lots of other examples of that on the Northeast Avalon. I would hazard a guess that you would see similar patterns in Mount Pearl, in Conception Bay South, all the areas around the Northeast Avalon where you’ve seen a huge population concentration over the past 12 to 15 years. So it makes sense with that.

I just think the other thing we would have to do, should the government decide to heed this motion, should it pass the House of Assembly today, is we would need to do some consultation with municipalities, with other partners who are affected, implicated in this, that we don’t go and put legislation in effect without making sure everybody is on board. That would include, like I said, municipalities. That would also include law enforcement as well because they have a significant stake in the game.

If you look at what was going on over there around Topsail Road, Cornwall Avenue earlier in the school year, once a parent was able to videotape the person who was the offender, the police showed up and were able to – to coin a phrase – arrest that behaviour to make sure that
person stopped that. Also, it helped to create public awareness throughout the province, but ultimately when it boils down to it, if a digital sign or changes in the speed limit or public education campaigns don’t have the desired effect, then we have to use the penalty of ticketing, a clampdown by law enforcement in order to make sure the rules are followed.

I’ll just leave it at that, Mr. Speaker. Thank you very much for the time.

SO**ME HON. MEMBERS:** Hear, hear!

MR. SPEAKER: The hon. the Member for Baie Verte – Green Bay, if he speaks now, will close the debate.

MR. WARR: Thank you, Mr. Speaker.

I’m not going to take too much time. I just want to finish off on some remarks that I was making at the beginning of the debate, Mr. Speaker. I was talking about road safety and speeding. I was talking about winter road conditions and the need to make sure our cars were properly fit when they’re on any highway, let alone in municipalities and school zones and the need for continued vehicle inspection is certainly something that’s important to me as well.

I just want to add into that, Mr. Speaker, speed limits in school zones vary across Canada. Alberta and British Columbia have set speed limits in school zones at less than 30 kilometres an hour with additional fines applying to those who speed in school zones.

As we talked and listened to all Members across the floor and to my colleagues on this side as well, I think everybody sort of reiterated that concern. I just want to highlight some of the things my colleagues had mentioned. I’d certainly like to thank the Member for Cape St. Francis, the Member for Terra Nova, the Member for Conception Bay East – Bell Island, the Member for Harbour Grace – Port de Grave, the Member for St. John’s Centre and the Member for Mount Scio and the Minister of Education and Early Childhood Development for taking the opportunity to speak in favour of this private Member’s resolution.

I want to highlight some of the concerns that some of the Members had talked about. The Member for Cape St. Francis had talked about defining exactly what school zones are.

Mr. Speaker, for those who are listening at home again, I should probably take the opportunity to read the motion again. It says:

WHEREAS safety for all students is an important priority; and

WHEREAS speeding in school zones is still a prevalent issue in the province; and

WHEREAS according to the World Health Organization, setting and enforcing speed limits are two of the most effective measures in reducing road traffic injuries;

THEREFORE BE IT RESOLVED that this hon. House supports the Government of Newfoundland and Labrador in setting a maximum speed limit of 30 kilometres in school zones.

That was the private Member’s motion that was put forth. Defining school zones is certainly important, Mr. Speaker, and certainly the larger the sign, the better it will be for the travelling public to notice and realize that they are entering a school zone and it’s time to bring your speed down.

I certainly liked his comment with regard to the community of Torbay in his District of Cape St. Francis. I commend that community as well, Mr. Speaker. He talked about hiring commissioners to go out and enforce – not actually enforce, but to be there almost like a school zone sign person. I grew up in my own hometown having people on crosswalks with the signage and stopping the traffic. That was a great idea; I commend the community.

We’ve heard just about every Member talk about electronic or digital display signs. I know they have that in my own town now coming into one of the school zones. It’s still a 50-kilometre hour zone, and that’s why I certainly want to see it brought back to 30. But to highlight the comments of the Members here, the electronic and digital sign displays certainly work.
Crosswalks: I have communities within my district that are advocating for crosswalks. Actually, it’s a main thoroughfare and I’m talking about the community of Baie Verte. Some of the places that children and students choose to eat are across Highway 410 in Baie Verte, which is a main thoroughfare going through that town. I’ve had an opportunity to speak with the CAO, Mr. Brian Peach, just at the MNL convention and he talked to me about the need for bigger and larger signage, more signage and crosswalks.

Everybody here has talked about the need for enforcement. I certainly commend members of the Royal Newfoundland Constabulary and the Royal Canadian Mounted Police. I can talk to my own district, Mr. Speaker. I have 42 communities in my district. We have two detachments of the RCMP in covering off 42 communities. We have seven community schools within those 42 and, as much as you’d like to see police presence in all of those communities, certainly it’s not possible. I do see the need for more enforcement and that’ll be part of this initiative going forward as well.

I know that there were some Members who spoke about lighting within school zones as well and the need for better lighting. The Member for Conception Bay East – Bell Island brought up the distraction factor. I certainly agree with the concept of if you’re going at 40, you think you’re going at 50.

We talked about sightlines and the impatience of drivers. I want to make mention of the fact that if there are issues with impatience, I suggest to drivers and parents of school-aged children, or grandparents, leave 10 minutes earlier. Especially if you’re looking out and it’s a nasty day outside – I did speak earlier on about the fact that for six months while schools are open we’re into winter months. So I’d encourage people who are taking their children to school to leave a little earlier and make time for traffic issues, certainly in and around metro especially, and for the rest of the province, make time for weather issues as well.

Mr. Speaker, I certainly wanted to draw your attention to or draw the House’s attention to – I’ve had the opportunity just this week, when I introduced the private Member’s motion, to actually drive around the City of St. John’s and the City of Mount Pearl as well – three different areas that I recognized where four lane parcels of roadway are within school zones were at Macdonald Drive, Ruth Avenue in Mount Pearl and Mary Queen of the World in Mount Pearl, as well.

Mr. Speaker, those are four-lane roadways. They are at 50 kilometres per hour. Certainly, they are well signed. I did notice they are well signed, but I would certainly recommend those school districts as well come down to the 30 kilometre per hour zone which is what we are trying to recommend here.

Mr. Speaker, I want to go back to one of my stories when I was in the force. I noted that in 2014 a 15-year-old boy was struck by a car in Conception Bay South while walking home from Frank Roberts Junior High School in Foxtrap.

I remember I had the opportunity when the RNC took over the community of Conception Bay South, I spent my first seven months policing in the district. One of the first things I would do on working a 4 to 12 shift, or if I was working an 8 to 4, that would be the last place I would go before I’d end my shift. If I was working a 4 to 12, it would probably be the first place I would go, and that was to the school, Queen Elizabeth high on Foxtrap Access Road, to ensure I placed a radar there because it was an area known to the police for the travelling public not to be recognizing the fact that they were in a school zone. I can’t remember if it was a 70 or an 80 kilometre per hour zone, coming into a 50 kilometre per hour zone in that particular area of Conception Bay South.

I can tell you, Mr. Speaker, back then you could have a field day writing tickets for vehicles and certainly drivers who paid absolutely no attention to the fact that they were entering a school zone. I would like to think that’s after getting a whole lot better there. Again, I commend the local forces for the work they do.

Mr. Speaker, in closing, I certainly appreciated the opportunity on my own government’s behalf to bring this private Member’s resolution forward. Again, I thank all Members and all
colleagues who took the opportunity to speak to this motion today.

Mr. Speaker, I respectfully ask for the support of the House. With that, Mr. Speaker, I’ll take my seat.

Thank you.

SOME HON. MEMBERS: Hear, hear!

MR. SPEAKER: Is it the pleasure of the House to adopt the motion?

All those in favour, ‘aye.’

SOME HON. MEMBERS: Aye.

MR. SPEAKER: All those against, ‘nay.’

This motion is carried.

It being Wednesday, and in accordance with Standing Order 9, this House stands adjourned until 1:30 tomorrow.