

Legislative Assembly of New Brunswick

Oral Questions



June 1, 2022

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HEALTH CARE

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, on May 13, I asked a couple of questions of the Minister of Health in regard to the mysterious increase in the number of deaths last fall, between September and October. There were 423 deaths over and above normal, based on Statistics Canada numbers. The minister said then that she did not know how to explain it and that it was anecdotal. She said that her government is very transparent, but she also said at the time that she could not explain the numbers at that moment and had asked her department to look into it. It is now three weeks later, and I would like to ask the minister whether she can now provide additional information to explain the incremental number of deaths last fall.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, I appreciate the Leader of the Official Opposition bringing this forward again. So while I cannot get into all the details, what I can say is this. Staff and I certainly have had a good conversation about the study that is being done. These numbers are provided by Statistics Canada, and they are also subject to change over time. What happens when a person is deceased is that Statistics Canada is dependent on the medical records and the physician death certificate being forwarded and on all that information being validated. At this time, there does not appear to be anything outside what we are deeming to be the normal process. So I understand the concern, but we have more information to validate.

Mr. Speaker (Hon. Mr. Oliver): Time, minister.

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Speaking of more information, Tara Moriarty, associate professor and infectious diseases researcher at the University of Toronto, said this in the report that she brought forward and that was requested or mandated by Statistics Canada: “excess deaths in New Brunswick are likely COVID-19 cases that went undetected by the province because of inadequate testing and tracking of cases”. She also added that “Some deaths are caused by the virus directly, but some can be caused by other factors such as medical procedures delayed or canceled because of pandemic restrictions”. So she is providing some indication of the unfortunate incremental number of deaths last fall, between September and October. I cannot believe that the minister cannot provide more information. Could you please do so?

Mr. Speaker (Hon. Mr. Oliver): Time.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, everyone who is admitted to hospital is tested for COVID-19. I believe that everyone who has passed away in hospital has been tested for COVID-19. It is tracked. And many people who are in hospital with COVID-19 are not in hospital for COVID-19.

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So I guess I am asking the member to just spit it out. If he knows something that I do not, then I am happy to hear it. But we are not going to fly by the seat of our pants and respond to something without having the proper data.

You know, Public Health has had a lot on its plate, but I will tell you that testing for COVID-19 has not been the real problem throughout the whole COVID-19 experience.

(Interjections.)

Mr. Speaker (Hon. Mr. Oliver): Order.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): We have seen a decline in testing right now, but it has not been the story throughout our COVID-19 experience. So, Mr. Speaker, I think that we have a lot to deal with.

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, the minister obviously cannot provide additional information. Maybe she does not know, but maybe she should say so if she does not know and not try to put the onus on the opposition to provide the information.

What we are saying here is what has been reported. It has been reported in the media and through a legit researcher mandated by StatsCan. We offer our condolences to the families and friends of these 423 New Brunswickers who lost their lives last fall.

I guess I will ask the minister this question. You said on May 13 that your department would look into this. It has been three weeks. Maybe that was not enough time. I will give you a chance here. Just tell us when you will be able to provide—not for us but for these families and New Brunswickers—information in relation to these deaths. What happened?

Mr. Speaker (Hon. Mr. Oliver): Time.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, maybe the member opposite would like to tell me what deaths have not been qualified because I do not know of any deaths that have not been qualified with a cause of death. So I do not know what the member opposite is alluding to.

You know, Public Health has had a couple of years of working with COVID-19. We now have a suspected case of monkeypox in our province. We are trying to be as productive as possible, but the member is alluding to something being wrong. We do not have any causes of death, which I am aware of, that have not been qualified.

So what he is alluding to is just... He needs to come clean, Mr. Speaker. I do not understand where he is going with this.

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CORONAVIRUS

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Well, I guess that when the minister is on the defense, she goes on the offense. But I really hope that the minister will actually come clean and provide some additional information on this matter, sooner rather than later. We are not trying to insinuate wrongdoing. We are just trying to get additional information and facts.

Now, yesterday, there was an update on COVID-19. Every Tuesday, we get an update. One of the areas we noticed was that there are five newly hospitalized people who are infected with BA.4, this new subvariant. We know that the European Centre for Disease Prevention and Control has said that this variant—as well as BA.5, by the way, and we would like to hear from the minister as to what that variant is all about—is of concern. Can the minister give us additional information about BA.4 and the impact that it is having in New Brunswick in regard to COVID-19 and this pandemic?

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, the latest subvariant of Omicron has been detected in our province since about mid-May—since early May. We have said throughout our COVID-19 reality and, certainly, since we lifted restrictions publicly on March 14—and everyone knows that our hospitals are still under restrictions—that COVID-19 has not gone away. We have made that very clear. And there will be variants as we continue through this process.

Across this country, we rely heavily on the Public Health Agency of Canada to keep us informed on the progression of such variants. At this time, BA.4 and BA.5 are still being monitored. We are relying on the data from other countries to help guide us. But what we do know is that the very best protection for all New Brunswickers is to get vaccinated and to follow and mitigate their risks in preventing...

Mr. Speaker (Hon. Mr. Oliver): Time, minister.

[*Translation*]

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, it is clear that vaccination is the most likely and legitimate solution. I will admit that this government is not doing much to inform people or to try to convince more New Brunswickers to get their fourth dose when they are eligible. The same certainly goes for the third dose, because a significant number of people have not yet received it.

That being said, we learned yesterday that the government has decided to eliminate the long COVID-19 registry. We know that long COVID-19 has long-term consequences for infected people. At least, that is what preliminary analyses are showing us. I would like to ask the minister why the government eliminated the registry at this time. It provides

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insight into how many people are infected and a better understanding of the consequences of long COVID-19.

[*Original*]

Mr. Speaker (Hon. Mr. Oliver): Time.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Well, it is interesting that the opposition is talking about COVID-19 and health today because the Premier took their thunder away yesterday.

(Interjections.)

Mr. Speaker (Hon. Mr. Oliver): Order.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): You know, Mr. Speaker, we have talked about long COVID-19 before. I think that it is important for the public to know that we do not even have a definition of what long COVID-19 is yet. So, again, we are relying on the Public Health Agency of Canada to help guide the entire country on this. Provinces are moving forward, actually this month, with a roundtable discussion to help understand how we define long COVID-19 and what we can do, strategically and together, to support those who are living with long COVID-19. But this is a process, Mr. Speaker. We are with the other provinces across the country on this.

Mr. Speaker (Hon. Mr. Oliver): Time, minister.

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, the question was, in simple words: Why did you decide to get rid of the registry for long COVID-19? Why did you stop registering people? More and more people are getting infected. We obviously do not know all the statistics because the testing is not happening and, certainly, people are not registering as much. But there are more people infected. You just have to talk to people in different communities. Why did this government decide to stop the registry of long COVID-19 cases? The registry would give a larger sample for researchers and medical people to be able to do more adequate research on the effects of long COVID-19 on these people.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): For a Liberal opposition, it certainly likes to mansplain. The issue, Mr. Speaker, is that it takes longer than one minute to give a full picture.

I am not about to let the member opposite insinuate, for one, that government made a decision to stop the registry at all. Here is what happened, and I spoke to it about halfway through COVID-19. Actually, the member used to be a member of the all-party Cabinet COVID-19 committee, and he left.

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(Interjections.)

Mr. Speaker (Hon. Mr. Oliver): Members, order.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): But, you know, there are some things that we talked about then. In this House, I talked about the fact that Horizon started a project in Moncton. Mr. Speaker, there has been nothing formalized. There has been nothing formalized with Horizon or Vitalité because we do not yet have a national understanding of what long COVID-19 is. The researchers would know that we need that in order to start something definitive.

Mr. Speaker (Hon. Mr. Oliver): Thank you, minister.

[*Translation*]

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, if I were still part of the all-party COVID-19 Cabinet committee—I do not even know whether it still exists—we would not even be able to ask questions here, in public, to enable New Brunswickers to better grasp and understand the challenge posed by COVID-19, since all discussions took place secretly, behind closed doors. At least, now, we can ask questions, which are, in my opinion, legitimate and valid, so that people can better understand what the government is doing, but also what it is not doing, with regard to COVID-19 and its management.

It is clear the government has given up on that. The long COVID-19 registry has been eliminated. The government said this: It is over. Why can the minister not at least explain herself? I will give her the half hour she will need to do so. Explain to us why you eliminated it.

[*Original*]

Mr. Speaker (Hon. Mr. Oliver): Time, member.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, I think that the opposition members are tone-deaf and that they are certainly not in tune with the struggles of our regional health authorities over these last several months. The regional health authorities have been keeping the doors open. They have gone through staff absenteeism as a result of the Omicron variant. They have gone through human resource management issues. You know, we are short of nurses because of past policies, Mr. Speaker.

All I am saying is that if he is expecting me to click my fingers and give him a full recount of why we are doing this... There is not even a definition of long COVID-19 yet. My goodness, let's let the researchers start doing their work. They have been preoccupied with an enormous amount of work in trying to keep the doors open. This is not about...

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Mr. Speaker (Hon. Mr. Oliver): Time.

HEALTH CARE

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, last December—I think it was December, but it has been so long because no action has happened since—the same minister announced a pamphlet on how to address some of the health care challenges that we have in the province. It was mostly based on bringing in new technologies to try to have scheduling for remote virtual visits to provide access to medical professionals. We know that eVisitNB, on which the minister based her strategy and pamphlet, seems to have some hiccups, to say the least.

Can the minister tell us what is going on with her strategy? When you look around, you see that her strategy is clearly not working. There are big problems in health care.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, I am sorry that we have not solved the world's problems in six months. That is obviously what the opposition thinks it can do.

What is happening with the health plan? The Primary Care Network is being worked on and is progressing nicely. The nurse practitioner clinics are open.

I have always maintained that there is still a place in this province for virtual appointments, but we cannot lose the in-person practitioner and patient experience. It cannot happen. Do you know what? With respect to the technology that he is talking about, there have been some problems with eVisitNB lately. We have talked, and its staff have assured me that they are working those bugs out. I agree that we want this to be seamless, but we are not going to fix this in six months, Mr. Speaker, and we are probably not going to fix it in one year. We tabled a health plan that begins and ends in our mandate, and we are committed to it.

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, the minister is trying to fix the bugs in this new technology, and she just said that having in-person visits is the most important piece of our health care system. However, her pamphlet or strategy never even mentioned that more health care professionals need to be hired and put into the system. I would like to get from the minister the complete list of all the health professionals in this province and the different categories of professionals. As well, in how many of these categories do we have a number of people—health professionals—missing, and how many are missing in each category? Right now, the in-person visit is a problem. People do not have access to health professionals because they are not recruiting and hiring any.

Mr. Speaker (Hon. Mr. Oliver): Time, member.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, for those who do not have a primary care provider, it is a big issue. It does not matter that 90% of

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New Brunswickers do have a primary care provider. We also know that many people cannot access their primary care provider in a timely fashion. That is what our health plan is addressing. That is what this is all about, and if the opposition members think that ship can turn around in six months, well, maybe someday they are going to get the opportunity to fix all the problems in the world.

You know, we are making genuine strides that New Brunswickers will feel. We have done that with mental health. My goodness, we have done that with mental health. And we can continue to do it with primary care throughout this province. The system is being worked on. It is progressing. But, Mr. Speaker, I am not going to move in their direction.

Mr. Speaker (Hon. Mr. Oliver): Thank you, minister.

[Translation]

Mr. Melanson (Dieppe, Interim Opposition Leader, L): Mr. Speaker, this is the same minister who said that, within six months, everyone who did not have access to a physician or a health care professional would finally get it. She has not delivered on her commitment. This is the same minister who received 21 recommendations on mental health. These 21 recommendations were to be implemented before March 31. Only 7 of the 21 recommendations have been implemented, Mr. Speaker.

The minister is talking through her hat. When we look at reality and facts, we see that, since becoming Minister of Health, she has never met her own objectives. She cannot deliver on her commitments. The health care system is falling apart. We are looking at various hospitals and long-term care. People working in these sectors are working extremely hard today. They are working tirelessly to do the best they can to provide quality services to people. However, the minister is not taking on her responsibilities. Explain to us what you are doing to improve the situation, Madam Minister.

[Original]

Mr. Speaker (Hon. Mr. Oliver): Time.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Mr. Speaker, we are accountable. I know that I have not met some deadlines. I am imperfect. But do you know what? We set those deadlines, and then in January, we had shutdowns. Health care staff and the Department of Health have been working on numerous issues related to COVID-19. I know that they do not want us to use that as an excuse, but I am going to tell you this.

(Interjections.)

Mr. Speaker (Hon. Mr. Oliver): Order.

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Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): There are many, many people who are working 12- and 14-hour days not only to address the immediate needs for the day but also to plan for our future. The work has been continuing, and it is ongoing. They are making strides that I am very proud of.

They can stand here and attack, or maybe, maybe, they would like to start offering solutions. We are going to make up those 800 nurses that they lost during their four years in government, but it will not happen overnight, Mr. Speaker.

[*Translation*]

PUBLIC TRANSPORTATION SYSTEM

Mr. K. Arseneau (Kent North, G): Thank you, Mr. Speaker. Following my journey to Fredericton by public transportation, I first realized how dysfunctional our public transit system is.

Before starting to find solutions, it will be very important to find out who, within government, is responsible for this file. When we ask the Minister of Transportation and Infrastructure, she tells us that it is the Minister of Social Development. He tells us that it is the Minister of Local Government and Local Governance Reform. Then he passes the buck to the Minister of Transportation and Infrastructure, who then refers the file to municipalities and the regional service commissions.

My question is extremely simple, and I hope I can get an extremely simple answer. My question is for the Premier because he is the one responsible for Cabinet. The Premier is responsible. So, here is my question for the Premier: Who is responsible for public transportation?

[*Original*]

Hon. Ms. Green (Fredericton North, Minister of Transportation and Infrastructure, PC): Thank you, Mr. Speaker. Before I answer the question, I would first like to say to the member opposite that I very much enjoyed the video that you shot. Thank you for sharing that with us. It did illustrate some downfalls in our community transportation in New Brunswick.

As the Minister of Health said, sometimes, the systems are imperfect. In relation to community transportation, maybe the way the system is set up is a little bit imperfect. The member opposite is correct. There is some responsibility around community transportation in the Department of Health, there is responsibility in the Department of Transportation, there is responsibility in the Department of Education, and there is responsibility in the Department of Social Development. But the important thing, Mr. Speaker, is that we recognize this, and we are working together on a solution for

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community transportation in New Brunswick. The province acknowledges that we have work to do as a team, and we are doing that work. Thank you.

[*Translation*]

Mr. K. Arseneau (Kent North, G): My simple question did not get answered. I am told the responsibility is spread around and people are working on the file. When we sit around a table, someone must be responsible for ensuring the files are moving forward. I want to know who is responsible for this file.

While the government is having fun passing the buck from one department to another... By repeatedly saying that it is everyone's responsibility, it becomes no one's responsibility. Mr. Speaker, there are people in our communities who do not have access to essential public services. Some communities struggle to attract newcomers, who are looking for these services.

The minister did not answer my question. I am going to ask it again: Who is responsible for bringing everyone in government together behind a public transportation project?

[*Original*]

Mr. Speaker (Hon. Mr. Oliver): Time, member.

Hon. Ms. Green (Fredericton North, Minister of Transportation and Infrastructure, PC): Thank you, Mr. Speaker. Those were a lot of words around a small question. But it is a difficult question, because the member is right. There are responsibilities in a number of departments. This is a problem that has developed over decades. This is not something that is new to this government. This is a problem that has been there for many, many years. We have acknowledged that this is an issue, and we are working as a team to come up with a solution to put community transportation within one department where we will all contribute. It is important that we all sit around the table and work on what the solution is province-wide. The first step is to acknowledge that there is a problem. The next piece is to find a solution to the problem.

You know, the member opposite has spoken a lot about his concern regarding community transportation. He has never once asked to sit down and talk to me or any other members about community transportation. I would invite him to do that. Maybe he has some solutions that he would like to share.

Mr. Speaker (Hon. Mr. Oliver): Time, minister.

Mr. K. Arseneau (Kent North, G): That is not true. And I know that is unparliamentary.

(Interjections.)

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Mr. K. Arseneau (Kent North, G): And so I will take back those words, but let this be known.

[*Translation*]

Mr. Speaker, we have been discussing this issue and asking the government to take a stand for years. We tried to find out in the House, in committee, who is responsible for this.

[*Original*]

Right now, there are people who rely on public transportation. It is a cost-of-living issue, it is a climate-crisis issue, and it is a tourism issue. It is an issue for many departments. We get that. They do not. We are looking to know who the person is who is responsible for this file. I asked two questions, and I still have not received an answer, Mr. Speaker.

The minister talks about temporary foreign workers. Okay, there is not much time left. Specifically, what are you guys waiting for, to do something?

Mr. Speaker (Hon. Mr. Oliver): Time.

Hon. Ms. Green (Fredericton North, Minister of Transportation and Infrastructure, PC): Wow. Thank you, Mr. Speaker. That was quite a response to my answer.

I will continue to say that this is a multidepartment responsibility. We are working very closely together to come up with a strategy for community transportation. We are working very closely with our colleagues at the Economic and Social Inclusion network. They have a community transportation system in place to help seniors and others to get to doctors' appointments and other things that are required for them, so they are part of this discussion as well. We will continue to work together for a solution for public community transportation.

It should be noted, too, that I had a very good conversation with the federal Minister of Transportation around this issue in New Brunswick. We are a bit unique because our population is very spread out. Although we have passed 800 000 people, we are still not a huge province. This is an important issue, and we have recognized that it is an issue. We are working on this and reinvigorating our discussions around it, and we will come back with a solution when we are ready to present it.

Mr. Speaker (Hon. Mr. Oliver): Thank you, minister.

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[*Translation*]

HEALTH CARE

Mr. D'Amours (Edmundston-Madawaska Centre, L): Mr. Speaker, there is such a serious shortage of health professionals that it has become impossible to identify all the negative impacts it has on New Brunswickers. It is not only one region that is losing out anymore, but the whole province. Oncologists are leaving the Moncton region where thousands of people in the province went to get cancer treatments.

What concrete steps will the minister take to ensure that new oncologists come in and pick up the slack? Mr. Speaker, what we need are clear and precise answers. Will the minister present us with a plan today to solve the problem?

[*Original*]

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): I appreciate the question, and I believe that the CEO of Vitalité certainly gave some very good comments on Francophone radio yesterday to address this.

Mr. Speaker, physicians come to the province, and physicians leave. We can assume they are leaving for one reason, when, in fact, there are many, many reasons for which they might be leaving. Absolutely, Vitalité has assured us that it has a contingency plan for this. I know that Horizon has also offered any assistance that it can provide when these oncologists leave in the summer. So it is certainly very important that the services to those who are receiving treatments and support be continued, and Vitalité is certainly addressing it.

As for recruiting, we are in a position that is no different from that of any other province in this country. Our ongoing recruitment efforts are extensive, and they are continuing.

[*Translation*]

Mr. D'Amours (Edmundston-Madawaska Centre, L): Mr. Speaker, it is clear that the minister does not have a plan. She just said it: She knows that physicians are leaving the province. If she knows it, why has she not planned anything to make sure there are enough physicians here in New Brunswick?

The serious shortage of family physicians, Mr. Speaker, means that many seniors have to pay out of their own pockets for prescription dispensing or form renewal. People living in seniors' homes have to meet their needs on just \$135 a month. Since there are not enough family physicians, seniors must pay out of their own pockets to get their prescriptions renewed.

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What is the minister's plan to ensure seniors have a family physician and no longer have to spend money they need for their minor personal expenses?

[Original]

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): Well, I have enjoyed my time today, and I appreciate all the questions. I am not sure what the member opposite is asking because, this year, we put in place that pharmacists could renew prescriptions and we pay them for that.

(Interjections.)

Mr. Speaker (Hon. Mr. Oliver): Member.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): So I am not sure what the member is referring to...

(Interjections.)

Mr. Speaker (Hon. Mr. Oliver): Member, please allow the minister to speak.

Hon. Mrs. Shephard (Saint John Lancaster, Minister of Health, PC): We can certainly answer any direct questions on an actual problem that he, as an MLA, has run into. I am certainly very happy to advise on that. But, Mr. Speaker, we have been providing alternative ways for people to get primary care access and prescriptions on a very timely basis. Our pharmacies are one of our very, very best places to go to when in need of a prescription refill. Thank you, Mr. Speaker.

Mr. Speaker (Hon. Mr. Oliver): The time for question period is over.