

Legislative Assembly of New Brunswick

Oral Questions



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[Translation]

GASOLINE PRICES

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): Thank you very much, Madam Speaker. Good morning.

[Original]

Madam Speaker, in this House, we have talked about the risk of cutting the cost of carbon adjustor to retailers' revenues, to the viability of stores remaining open, and to the availability of gas supply all over the province, especially in rural New Brunswick. One thing that we have not talked about is the hit to provincial revenues. Can the Minister of Finance get up on his feet and tell us what the number will be from provincial revenues for cutting the cost of carbon adjustor?

Hon. Ms. Holt (Fredericton South-Silverwood, Premier; Minister responsible for Official Languages, L): Thank you very much, Madam Speaker. Thanks to the member opposite for the question. I think the focus that the opposition has on the cost of this maneuver is interesting because it actually means that New Brunswickers won't be paying \$84 million for gas. These are the people who are struggling with the cost of living right now. They're looking for a government that cares about helping them get by and pay their bills. So, our government, as we have done on a number of occasions... We sacrificed \$90 million in revenue to take 10%, which is equivalent to the provincial tax, off power bills. Now, we're directing that \$84 million in savings to New Brunswickers, with a gas price that is going to be 8¢ lower on December 1. We always keep New Brunswickers at the front of our minds and do our work in service of them and their ability to get by.

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): Well, thank you, Madam Speaker. The reality is, I'm trying to get to what their math is and figure out why they believe this is going to happen. They're doubling down on 8.24¢. We don't believe that this is actually going to flow to the consumer, so I'm trying to understand their thought process and how they got there, but we're not getting there.

It is through revenues from taxpayers that we pay for the services that we all cherish and need: health care, education, infrastructure maintenance, and so on. This government is already running a \$668-million deficit. So, if the cost of carbon adjustor is 8.24¢ per litre when fully implemented, as the Premier is doubling down on, how much will removing it hit the deficit?

You know, it's one thing to say that we're bringing affordability to New Brunswickers. Again, we don't believe that's going to be the case. However, we're trying to establish whether the government has done the homework to know what the potential hit to revenues could be. That's all we're asking this morning: How much is this going to cost? Thank you, Madam Speaker.

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[Translation]

Hon. Ms. Holt (Fredericton South-Silverwood, Premier; Minister responsible for Official Languages, L): Thank you very much, Madam Speaker.

[Original]

I find it incredible that the member opposite continues to diminish the value of trying to help New Brunswickers and reduce the price of gas for them. He said: Well, on one hand, it might be this, but... He's more concerned about the collective bottom line than New Brunswickers' bottom line, and we know that the province has the capacity to shoulder things that New Brunswickers cannot right now. We have done the calculations. It's always dependent on usage and outcomes, but we know that the cost to the province is somewhere between \$8 million and \$10 million. That is a cost that we are prepared to bear to keep \$84 million in costs off New Brunswickers who are struggling right now.

[Translation]

It is incumbent upon us to prioritize New Brunswickers. I don't understand why the opposition member doesn't want to help New Brunswickers. However, our government wants to help them, and we will do so every time we have the opportunity.

[Original]

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): She just keeps doubling down, Madam Speaker, because there is no guarantee that this is going to flow down and actually help people. I finally got the number. I had already done the math, Madam Speaker. It is between \$8 million and \$10 million. But at the end of the day, we don't believe that this is actually—

(Interjections.)

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): Easy now, Premier. Easy now.

We don't believe that this is actually going to help the people of New Brunswick. Here's the thing. If this isn't going to flow down to New Brunswickers in the way the government members say... They promised 4¢. They promised it. There is the provincial tax on gas. That is a set price, a per-litre price, of 10.87¢. They could take the 4¢ off of that. They already took \$90 million off electricity. This would cost, based on consumption, about \$40 million, but it would guarantee—guarantee—that New Brunswickers see that hard 4¢ reduction that they're promising. With the stroke of a pen, as she likes to say, they could do this. Will the Premier reconsider this, rather than risking gas supply and retailers in New Brunswick?

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Hon. Ms. Holt (Fredericton South-Silverwood, Premier; Minister responsible for Official Languages, L): Thank you very much, Madam Speaker. Well, it's interesting that the opposition members now want to work in half measures. They're talking about \$40 million. We're talking about \$84 million of benefits to New Brunswick by reducing the price of gas. It's even more interesting to hear that the member opposite is concerned about the cost to government when his government, while he was in power, proposed the largest cut to revenue ever with a half-billion dollar promise to sacrifice revenue from the HST. The fact that he's concerned about \$8 million to \$10 million when his government was prepared to give away half a billion dollars in revenue is pretty rich.

We're going to remain focused on finding all the ways we can to help New Brunswickers with the cost of living. We've been doing that by reducing the price of gas, freezing their property tax assessments, making the RSV vaccine free, and providing breakfast in schools. At every turn, we are looking after New Brunswickers and what is in their best interests. We will continue to do so.

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): Well, that's a \$300-million fund spent, \$152 million in tobacco revenue gone, and a \$668-million deficit, and there is nothing better for New Brunswickers, Madam Speaker. That's Liberal math.

HOSPITALS

Madam Speaker, I have a question for the Minister of Health. The minister has a constituent who was at the top of the list, waiting for a nursing home. This person, under this government's direction, was moved from the regional hospital into St. Joseph's Hospital.

This government then decided to freeze any movement of seniors from St. Joseph's into nursing home beds, thereby creating a situation where she's no longer able to access a bed that she would have been able to access had she been left at The Regional.

I remind the minister that seniors are still being moved out of The Regional because of the actions of this government. This senior is stuck. We all believe in equitable treatment and health care in our health care system. The actions of this government have caused inequality for this patient and many others. What is this minister going to do to remedy this situation? Thank you, Madam Speaker.

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, we have 84 net new doctors, as well as 214 net new registered nurses and 201 licenced practical nurses, for a total of 415 new nurses in this province. That helps us provide community care, hospital care, ambulatory care, and collaborative care clinics so that people don't get into our hospitals and don't get into a situation where they can't get out.

I won't speak about this case specifically, but I feel empathy for that person who can't get to where the care they need is in the community. You're wise to raise this point today. We all

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care for senior people who are in our hospitals. I'm glad that we are working collaboratively with Social Development to develop a plan. We'll get those people, and this individual, out into the community sooner rather than later.

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): There was absolutely no answer for these patients who have been moved and are now frozen in place by the actions of this government. The government members could just take anybody that they took from The Regional and put into St. Joseph's, move the folks in St. Joseph's out first, the way they should have, and then just continue that flow, but there was absolutely no answer from the minister, Madam Speaker.

These government members are engaging in a communications exercise around the patient wait list. They'll tell anybody who listens how their changes are removing people from the wait list today, but the facts tell us something completely different. In the past six months, over 10 000 people have been added to the wait list of people looking for a doctor, increasing the wait list from 114 000 to 124 000 people. Things are getting worse, not better as the government promised.

These government members promised "Change in motion", but they didn't say they are driving in reverse. How can this minister justify the wait list getting longer and people waiting even longer for a doctor? Thank you, Madam Speaker.

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, thank you for the good news. There are 10 000 more New Brunswickers. People don't come with their doctors when they arrive. That is a challenge. We have a growing population. Yesterday, I had an opportunity to speak to people who, generally, don't email me, but they're glad that they've been taken off the list. We are putting effort into our communities and supporting primary care. We have a very attractive contract with our doctors and nurses, who are helping get people in our communities off that list.

The numbers that we are quoting are a little bit old. We look forward to the Health Council's report on where we are. We're not done there. We look forward to getting people rostered and attached to primary care in a growing number in the succeeding years. Thank you very much.

[Translation]

Mr. Hogan (Woodstock-Hartland, PC): Thank you very much, Madam Speaker.

[Original]

I think the Health Council's newest number is 10 000 new New Brunswickers who are without a family physician. That's a problem.

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I have a question for the Minister of Health regarding the deplorable conditions in our emergency rooms and the fact that patients are on stretchers in hallways for days, being robbed of their dignity, with people going by and no one being able to move them so they can get the care that they so rightly deserve as New Brunswickers. It's not the fault of the staff. They certainly are hard-working. They certainly are top-notch. I want to know what this minister is doing to alleviate and eliminate the problem with waiting in our emergency rooms.

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, thank you for the question. I have a close family member who spent time in the ER, I'll say, very recently. What I want to report is that this person received top-notch care in the emergency department for a significant medical problem. An admitted patient in the emergency department who does not have access to the floor still gets superior care by our emergency room staff. The second thing we're doing is trying to improve the well-being of the community so that people do not need to go to the emergency department.

Lastly, I'd like to report on a question you asked me last time. Yes, there was a Fire Marshal complaint in one of our hospitals in the past few years, but it was not in the emergency department. It was in another area of the hospital. The complaint was rectified, so it's no longer an issue. Thank you.

Mr. Hogan (Woodstock-Hartland, PC): Thank you very much and thank you to the minister for that answer. I wasn't questioning the quality of the care people receive when they get out of the emergency waiting room. I, too, have had a family member—more than one—in the emergency department recently. You know, one was there for several days. She got top-notch care, the best they could give. However, seeing what's happening in our emergency rooms is unacceptable. I'd like to know how many of our hospital wings are not currently occupied by patients.

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, to the member opposite, I don't know exactly how many wings are either not occupied by clinical care or are perhaps being used for other reasons right now.

I do empathize. In fact, yesterday, I was invited to be a person waiting in the emergency department for an extended period. I've accepted that challenge. I'm going to go to one of our emergency departments to see what it really feels like to be there for extended hours. I have a lot of empathy for anybody who has to wait for such a long time. We're all impatient. Then you add on a medical problem and some seniority to the people who wait in our ER rooms. I think it behooves us to try to feel that. You know, we already work hard to try to keep people out of there, but I think we need to walk the walk sometimes. Thank you.

Mr. Hogan (Woodstock-Hartland, PC): Thank you, Madam Speaker. I commend the minister for committing to spending time... I know he has already spent time in the emergency department in his previous life and knows what that looks like. I would invite

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every single member of this Legislature to sign a confidentiality agreement and spend 48 hours in the emergency department to see exactly what happens. Maybe we can then all work together to try to improve it. I think that's really important.

Back to the empty wings in our hospitals and all these extra doctors, nurses, and LPNs that we've hired, I really want to know how many wings are not being occupied by acute care patients and whether or not we can provide the service that people so rightly need and alleviate part of the problem in emergency departments by opening these wings. I would also like to know when the minister is planning on looking into that and when he's going to make that happen. Thank you, Madam Speaker.

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, the numbers I referred to earlier... Registered nurses and licensed practical nurses go a long way to being able to open wings. In fact, the main reason we don't occupy all our wings is staffing. We're working hard not only to improve the staffing of the wings that are open but also to consider other ones that we could open. To the member opposite, I don't know the number of wings in all our hospitals, all our facilities, that are not currently being used for acute care. I think it's an important issue, so I will look into this further. Thank you for the challenge.

Ms. Scott-Wallace (Sussex-Three Rivers, PC): Thank you. It feels like the people of Sussex keep getting bamboozled by this government. This past spring, they were stunned when the Minister of Health stood in this House and declared that the Teladoc virtual care did not add one minute to ER hours in the Sussex hospital, and, just like that, after a few months in use, he killed the pilot project that was getting rave reviews from nurses and patients. These constituents were no longer sitting for hours in the emergency room waiting to see a doctor for non-life-threatening issues, yet this minister said there was no value.

It now appears that what's good for the goose may not be good for the gander. Shockingly, the minister is now saying that the very service he claims wasn't good enough for Sussex may now be good enough to improve ER coverage for the hospital in Sainte-Anne-de-Kent. Same equipment. Same Teladocs. How can the minister explain this to the people of my riding who were cheated out of the virtual care that was supporting their wellness?

Surely, their health is important, too.

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, I am glad to rise for this question. For Teladoc, you need to know the prerequisites for it to help with overnight care. There has to be a doctor in the community who is able to come in.

We have looked at Teladoc in other communities, such as Grand Manan, which, as you well know, is a blue riding today. Teladoc is working quite well there. The doctors are able to go home at night and sleep while Teladoc helps look after that community, giving 24-hour care. So Teladoc does work with the right prerequisites.

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In Sussex, Teladoc helped the doctors who were working during the daytime by helping them see more of the Level 4 or Level 5 not-so-acute patients. Yes, it helped alleviate the burden on the doctor who was doing the day shift, but it did not help one minute with overnight care in the community of Sussex. Thank you.

Ms. Scott-Wallace (Sussex-Three Rivers, PC): Thank you, Madam Speaker. There are also doctors who live in Sussex who would be there in those overnight hours and who could support... I know the minister is shaking his head, but I know a couple of them. Anyway, we'll have that conversation later.

Horizon Health said it had a plan to return ER hours at night to the Sussex Health Centre by this past summer. The Health Minister killed that plan. Therefore, one would think that would mean that he had a different plan to return 24-hour service to the Sussex ER, but it's been crickets.

Meanwhile, residents of Sussex continue to call an ambulance if something goes terribly wrong so that they can be rushed to the Saint John Regional Hospital. As any paramedic will tell you, the problem is that there is no ambulance waiting in Sussex for something terrible to happen after 8:30 p.m., when the lights go out at the ER. What is the minister's plan? Please, I've been asking for many months. What is his plan to return ER hours to the very busy Sussex Health Centre? Or has it been forgotten, as you seem to make haste in finding solutions for other parts of the province?

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, I would like to thank the member opposite for recognizing the value and hard work of doctors who live and work in Sussex. We meet with them, and they offer suggestions.

One of the things that we are putting into place is a negotiated contract with our physicians that looks after ER care, perhaps better than we have in the past. We are doing that. We trust our RHAs to continue working very hard to provide 24-hour care in Sussex. This is not something I axed. It's something I have supported in the right community at the right time. I'm looking forward to our RHAs providing 24-hour care in Sussex, a community that requires this. Thank you.

Ms. Scott-Wallace (Sussex-Three Rivers, PC): Thank you, Madam Speaker. I'd love to know when Sussex will be the right community at the right time. I'd love to know that.

At election time, this government said it would be the answer to the prayers of the people of Sussex and that it would return 24-hour emergency services in record time. This hasn't happened. Then, it hauled Teladoc away despite overwhelmingly positive feedback from patients who were so appreciative of this service.

There's one additional election promise that still has constituents waiting as well. In August of 2024, in her promise to create 30 new collaborative health care clinics, Premier Holt said

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that, if she were elected, Sussex would be among the first and that the clinic would open by the end of 2025. We have watched photo ops everywhere else, but there's been nothing for Sussex yet. That deadline comes next month, Madam Speaker.

I'm pretty sure I know the answer, but I want to hear it from the Health Minister. Will the people of Sussex at least have their promised new collaborative care clinic by the end of 2025, since they're getting the shaft in so many other areas?

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, the member opposite is correct. Sussex is on our list. In fact, Sussex is in a position on our list where it already has a variant of a collaborative care clinic in the Family Medicine New Brunswick clinic. We have been waiting a little bit to see what our new contract with physicians will look like to see whether it's appropriate for them, collectively, to move into a collaborative care clinic.

We have been on hold because they have been on hold to see what we are doing better for primary care. We are doing that, and the doctors are voting on it this week. We look for positive results, and then we will share that with the physicians in Sussex so that there will be a collaborative care clinic, as has been promised by our government. Thank you very much.

CONFLICT OF INTEREST

Ms. S. Wilson (Albert-Riverview, PC): Madam Speaker, my question and follow-ups today are related to Liberal conflicts of interest and perceived conflicts of interest. Yesterday in question period, we spent some time discussing conflicts of interest and perceived conflicts of interest. It seems that, whenever we have a Liberal government, this topic is in the public domain. I expect we will be discussing conflicts as long as this government is in power. The Minister of Public Safety has sponsored a bill entitled *An Act to Amend the Liquor Control Act*. While we find this bill to be quite favourable and a good step forward for craft breweries, wineries, and distilleries in our province, I do have a simple question: How many ministers have recused themselves from conversations about this bill due to conflicts of interest?

[Translation]

Hon. Mr. Gauvin (Shediac Bay-Dieppe, Minister of Public Safety; Minister responsible for la Francophonie, L): Thank you very much for the question. It is very important. When we were thinking about the bill, we wanted to help New Brunswickers and our producers. Doors are open throughout New Brunswick to all the provinces. It's a topic our Premier talked about in Ottawa when she was there with the other provincial Premiers.

When we talk about the *Liquor Control Act*, it will be very important for us to ask questions that will help producers in the province. A certain minister recused himself from the

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discussion when it was time to talk about it. That then is the answer to the question: a minister recused himself from the discussion. Thank you very much, Madam Speaker.

[Original]

Ms. S. Wilson (Albert-Riverview, PC): Madam Speaker, the former Liberal Premier and former boss of the current Premier took a hard line on perceived conflicts of interest. I understand this Premier does not like to be reminded that she was the junior to Premier Brian Gallant in the last Liberal government, but it is a fact. I understand this Premier does not enjoy being compared to her previous boss as far as her skills as Premier are concerned. I can assure this Premier that when it comes to handling perceived conflicts of interest, she is no Brian Gallant.

Madam Speaker, my question for the Premier is simple and clear: How does she justify claiming to be accountable and transparent while taking zero action on perceived conflicts of interest? Her previous boss didn't mess around with this matter. Why doesn't she take a lesson from him?

Hon. Ms. Holt (Fredericton South-Silverwood, Premier; Minister responsible for Official Languages, L): Thank you very much for the question, through you, Madam Speaker. I find the line of questioning and the references to past Premiers interesting, because I'm fairly sure there isn't one person on the other side of the House who wants to be compared to their former Premier. Well, maybe we will see whether there are one or two in the future.

Our government has taken a very clear stand on this. On the very first day of our jobs in office, every single member of our team went through the process of declaring conflicts of interest to the Integrity Commissioner—completing those documents, making sure they were reviewed, and getting approval to act in ways that were within their authority. That has been the case. Recusals happen as a matter of course. We have an incredible team of ministers who are extremely involved in their communities and in this province. They are working day and night with their hearts, their souls, and their minds to serve the people of New Brunswick. It is the strongest political team this province has ever seen.

Ms. S. Wilson (Albert-Riverview, PC): Well, thank you, Madam Speaker. You know, this Premier may want to compare herself to our Premier, the former Premier, when it comes to fiscal responsibility. This government seems to have perception as its ruling guide, its shield, and its sword—its substitute for results. That's why allowing perceived conflicts of interest appears out of character. In fairness to the current Premier, Premier Gallant took two weeks before the perceived conflict of interest of the day was resolved. So, this Premier has some time left to live up to the standard set by her former boss.

My final question today is this: Has this Premier reached out to the former Liberal Premier for guidance and advice on perceived conflicts of interest? If not, why not?

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[Translation]

Hon. Ms. Holt (Fredericton South-Silverwood, Premier; Minister responsible for Official Languages, L): I appreciate... Actually, I'm not sure if I appreciate the question, because I believe this room should be a place where we ask questions to which New Brunswickers want answers.

I'm sure New Brunswickers want to know what we are doing to ensure affordability and to help our province solve the economic problems we're facing.

Yesterday, I attended the Conseil économique du Nouveau-Brunswick business of the year banquet to celebrate the people who are working hard during the difficult economic period we're going through.

The Junior Achievement of New Brunswick gala took place the night before. We're working together to grow our economy so that New Brunswickers have good well-paying jobs and can live here. Our government is working to improve the quality of life for New Brunswickers. We're not hearing any questions from the opposition members because we're doing the work transparently without any conflicts of interest...

[Original]

HEALTH CARE

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): Thank you very much, Madam Speaker. I'd like to go back to one of the answers from the Minister of Health. When I asked about the increase of 10 000 people on the patient wait list, he said: Well, there are 10 000 more people in New Brunswick.

Well, I fact-checked that, Madam Speaker. In the first quarter of 2025, there was a net loss of 101 people. Perhaps the Minister of Health would like to correct himself and actually tell the House, and tell the people of New Brunswick, why there are 10 000 more people on the wait list. I can give him some of the reasons: Doctors are leaving, nurses are leaving, the system is crashing, and more people are waiting for a doctor.

Those are the facts. Those are the numbers. These are not our numbers. Those are the numbers, Madam Speaker. There are 10 000 more people on the list, yet the members opposite are saying that they are taking people off. Square that equation for us, Minister of Health. There has been a net loss of 101 people, but 10 000 more are on the wait list. Can he explain why we are going in the wrong direction? Thank you.

Hon. Mr. Dornan (Saint John Portland-Simonds, Minister of Health, L): Madam Speaker, to the member opposite, there are 84 new doctors—not leaving. Some 214 net new registered nurses is not a decrease, and there are 201 LPNs. That's 499 new health care providers. That is not a loss.

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Madam Speaker, health care people are not leaving New Brunswick. They are coming here. We have a good contract with nurses. We will have a good contract with doctors. Physicians from other provinces, including Quebec, are looking at us. They're signing up, and they're calling our colleges. We have a net positive influx of health care providers around the circle. It's only going to get better. Thank you very much.

Mr. Savoie (Saint John East, Leader of the Official Opposition, PC): Thank you, Madam Speaker. Once again, no answer. These numbers very clearly—very clearly—tell us we're going in the wrong direction. The minister can talk about the doctors and nurses that are being brought in, but it's not working because there are more people on the wait list.

I am giving the government members an opportunity to explain that. If they can give a valid reason, maybe New Brunswickers will understand. If they're just going to say: Well, here are our talking points, and we're going to stick to them and not actually give New Brunswickers confidence that we're drilling down into the real reasons we've added 10 000 people... We know it's doctor retirements. We know that doctors are leaving. Say that. Tell people this: We understand that there are 10 000 people, and we are going to do better.

That is why we're here every single day, Madam Speaker. It's not to recite numbers that are clearly not giving the results that people need. There have been 10 000 more people on the wait list in six months and a net loss of people in the province. Why are we going in the wrong direction?

Hon. Ms. Holt (Fredericton South-Silverwood, Premier; Minister responsible for Official Languages, L): Thank you very much, Madam Speaker. I'll speak as plainly as I can so it's clear to the member opposite. This government is doing better on health care than the previous government. We have taken 10 000 people off the waiting list for care. Today, 10 000 more New Brunswickers have access to a primary care doctor or a nurse practitioner in clinics all across the province. Those people are getting better care today, and that is more than the previous government did.

Do you know what else is more than the previous government did? Our recruitment results. We added 84 net new doctors in our past year in government, which is 30% more than that lot was able to achieve at their previous time in government.

We have improved health care for New Brunswickers, and we will not stop, because we put very clear goals in place. We are creating those collaborative care clinics. We are achieving the attachment of patients in New Brunswick. That's what better looks like.

Madam Speaker (Hon. Ms. Landry): The time for question period has expired.