



STANDING COMMITTEE ON HUMAN SERVICES

Hansard Verbatim Report

No. 10 — May 6, 2025

Published under the
authority of
The Hon. Todd Goudy
Speaker



Legislative Assembly of Saskatchewan

Thirtieth Legislature

Hansard and other documents of the
Legislative Assembly are available
online within hours after each sitting.
<https://www.legassembly.sk.ca/>

STANDING COMMITTEE ON HUMAN SERVICES

Michael Weger, Chair
Weyburn-Bengough

Noor Burki, Deputy Chair
Regina Coronation Park

Brent Blakley
Regina Wascana Plains

April ChiefCalf
Saskatoon Westview

Kim Gartner
Kindersley-Biggar

Barret Kropf
Dakota-Arm River

Hon. Colleen Young
Lloydminster

[The committee met at 16:01.]

Chair Weger: — Welcome to the Standing Committee on Human Services. My name is Mike Weger. I'll be the Chair. To my left I have Ms. Betty Nippi-Albright, chitting in for Noor Burki; Mr. Brent Blakley; and Ms. Vicki Mowat, chitting in for April ChiefCalf. On my right I have Mr. Kevin Kasun, chitting in for Colleen Young; Mr. Kim Gartner; and Mr. Barret Kropf.

Today the committee will be considering two bills, Bill No. 18 and Bill No. 19.

Betty Nippi-Albright: — Mr. Chair?

Chair Weger: — Yes?

Betty Nippi-Albright: — Mr. Chair, before we get started with these important bills, I have a motion I would like to move. It's an important motion for this committee to declare that the drug and overdose crisis is an emergency, and to task this committee with carrying out an investigation to provide recommendations to the government. I hope we can pass it today.

Mr. Chair, I move:

That in the opinion of the Standing Committee on Human Services the overdose crisis in Saskatchewan is an urgent public health emergency; and further,

That the Standing Committee on Human Services conduct an investigation into the overdose crisis in Saskatchewan and that the committee provide recommendations to the government on the policies to address the crisis.

Chair Weger: — MLA [Member of the Legislative Assembly] Nippi-Albright has moved a motion:

That in the opinion of the Standing Committee on Human Services the overdose crisis in Saskatchewan is an urgent public health emergency; and further,

That the Standing Committee on Human Services conduct an investigation into the overdose crisis in Saskatchewan and that the committee provide recommendations to the government on the policies to address the crisis.

Are committee members ready for the question?

Some Hon. Members: — Question.

Chair Weger: — Do members agree with the motion as read?

Some Hon. Members: — Agreed.

Some Hon. Members: — No.

Chair Weger: — The question before the committee is the motion. I would like to inform committee members that I will be exercising my right to a deliberative vote. Those in favour of the motion say aye.

Some Hon. Members: — Aye.

Chair Weger: — Those opposed to the motion please say no.

Some Hon. Members: — No.

Chair Weger: — I think the nos have it.

Vicki Mowat: — Can we have a recorded division?

Chair Weger: — A recorded vote has been called.

All those in favour of the motion please raise your hand.

All those opposed to the motion please raise your hand.

Those in favour of the motion, 3; those opposed to the motion, 4. I declare the motion defeated.

Today the committee will be considering two bills, Bill No. 18 and Bill No. 19.

Bill No. 18 — *The Regulated Health Professions Act*

Clause 1-1

Chair Weger: — We will first consider Bill No. 18, *The Regulated Health Professions Act*. We will begin our consideration with clause 1-1, short title. Minister Cockrill is here with officials from the ministry. I would ask that officials please state their names before speaking and please don't touch the microphones. The Hansard operator will turn your microphone on when you are speaking to the committee. Minister, please introduce your officials and make your opening remarks.

Hon. Jeremy Cockrill: — Thank you, Mr. Chair. Pleasure to be here today as we discuss *The Regulated Health Professions Act*. Joining me today to my left is Deputy Minister Tracey Smith; to my right, Tami Denomie. We also have behind us my colleague Minister Lori Carr as well as Norman O'Neill joining us today.

So I'll just start by making some opening comments regarding this Act. And you know, for sake of clarity, I think we can all understand the two Acts that we are going to be discussing today are really partnership Acts, although I understand that we will be discussing them separately. So please understand that comments made in regards to this first Act, you know, very much related to the piece of legislation that we're going to be discussing after this.

Governments grant self-regulatory status to professions such as lawyers, physicians, and registered nurses because these professions provide highly skilled services that can potentially harm the public if performed by an incompetent and/or unethical practitioner. In Canada and around the world there have been substantive changes in how self-regulating professions, particularly health professions, are governed based on the public's growing demand for more accountability and transparency from regulatory bodies.

Now in Saskatchewan today there is currently a great deal of variation between the 21 individual statutes regulating 28 health professions governed by 26 regulatory bodies. These statutes

define the province's existing regulatory framework. Now the inconsistencies in the current regulatory framework create challenges for regulators to effectively govern their respective members in the public interest.

As one of the last Canadian provinces to implement umbrella legislation, this proposal would bring Saskatchewan's regulatory framework of health professions in alignment with what is considered best practice across our country. Consolidating these statutes under a single umbrella Act would establish consistent and improved regulatory standards for all health professions regarding registration, governance, complaints, disciplines, public accountabilities, public representation, and bylaw-making authority. Greater consistency in these areas would in turn enhance public protection and confidence in both regulatory bodies and the health system as a whole.

The development of umbrella legislation will still require the drafting of subordinate regulations specific to each regulated health profession to address the unique features of each profession. This is consistent with the development of umbrella legislation in other provinces.

The ministry is continuing to consult with health regulatory bodies regarding the development of the proposed umbrella legislation to ensure that the legislation will provide them with the tools they require to effectively govern in the public interest. Thank you, Mr. Chair.

Chair Weger: — Thank you, Minister. I'll now open the floor for questions. MLA Mowat.

Vicki Mowat: — Thank you, Mr. Chair, and thank you, Mr. Minister, and to the officials who are attending today.

I think I have some specific questions around how the bill will be implemented and questions that have arisen through conversations with regulatory bodies. Many of them likely will not be a surprise to you. But there's still some outstanding questions around what this whole process looks like and has looked like. I have some questions around implementation. Can you speak to the estimated timeline for implementation of this project?

Hon. Jeremy Cockrill: — Thank you, Ms. Mowat, for the question. You know, we have been, I'd say, signalling and communicating to the sector that we expect this process really to last two or three years.

You know, obviously there's the content of the bill that we're discussing today, but really the meat of this whole movement is going to be in the regulations. Again we've started consultations on the regulations, you know, generally speaking, but then also about the restricted activity list as well as profession-specific regulations.

Now again, you know, in parallel to that at some point, you know, likely at some point next calendar year we'll start work on the sets of bylaws. Again I mean I still maintain there's 28 separate sets of bylaws that need to be created here for each health profession and then obviously getting into the standards of practice.

And then, you know, once we have everything done, then there's obviously kind of how we apply that within the health care system and some work to do obviously between each profession, the Ministry of Health, the Saskatchewan Health Authority, and other health care sector partners.

But again to answer your question, we expect two to three years for the whole timeline of this.

Vicki Mowat: — Thank you, Minister. What have the timelines looked like in other provinces?

Hon. Jeremy Cockrill: — So I guess I'll speak to the comparison from provinces that I'm aware of. You know, I believe BC's [British Columbia] process took 10 years. Manitoba is still under way, as I understand, in their process. I believe they're into their fifth year.

Again you know, we're hoping . . . You know, we see some real advantages to how the health system here in Saskatchewan is regulated. You know, we think that us working together with the various stakeholders in the sector, learning from what other provinces have done and maybe their mistakes or maybe kind of how their process was . . . You know, that's why we remain optimistic with a two-to-three-year timeline.

Again that will depend once we get into the meat of the consultations too, you know, and ensuring that stakeholders feel heard and, you know, certainly respected of course, as always, but certainly heard, and making sure that we're moving forward together with the regulations and bylaws that we view . . . that we can all say are good for the people of Saskatchewan.

[16:15]

Vicki Mowat: — You mentioned conversations with other provinces. What have you learned from other provinces who have went through this process already?

Hon. Jeremy Cockrill: — Perhaps I'll make a couple comments. You know, certainly we've observed and learned from other provinces that this process takes time, as I indicated in my previous answer.

You know, the other piece is really around how important engagement is with the stakeholders in the sector. And I mean like the first consultation on this bill goes back to 2023. We've been working with the stakeholders, certainly hearing their concerns. And you know, my understanding is there were some concerns with earlier drafts of the bill.

But you know, going back and forth with the stakeholders means that we're going to get to a better spot here. I think we've gotten to a good spot here, but certainly I think the process to how we got here, certainly we'll be taking that approach into consulting regarding the regulations and the bylaws. And again that has been productive, but it takes time to get to a place where everybody can be on the same page.

You know, I would just say too . . . I can't necessarily speak to this, but certainly the 28 regulatory bodies could. All the regulatory bodies are watching what has happened in other provinces and are certainly . . . They know their professions best.

So if you're with the college of pharmacy here in Saskatchewan, you're going to be watching what happened in Manitoba and British Columbia, taking, hopefully, what's good and leaving what isn't.

So I guess I spoke to what we've learned as a ministry from other provinces. But certainly all 28 regulatory bodies are going to be taking lessons from their respective colleagues in other provinces that have gone through the umbrella legislation process.

Vicki Mowat: — Have you folks talked to any of the regulators out of province as well about what their experiences have been like?

Hon. Jeremy Cockrill: — So the feedback that we've sought from people outside of the province would really be limited to, you know, number one obviously the other ministries right across the country that have already gone through this process, but also the national regulatory bodies — say, the CRNS [College of Registered Nurses of Saskatchewan] for registered nurses.

Now I will say that my understanding is that the feedback that we've received from the national regulatory bodies has been fairly brief just because, again, these regulatory bodies that are national recognize that the legislative frameworks in the provinces are all very different and unique. And I think they respect that.

But in terms of seeking feedback from other regulatory bodies in other provinces, I mean, we're really looking for something that's going to work here in Saskatchewan. And certainly again we would rely on, but I think it's also fair to say that the regulatory bodies in Saskatchewan are, I'm sure, speaking with colleagues in other provinces and understanding what's been done there.

Vicki Mowat: — The national bodies that you receive feedback for, did you seek that feedback out or did they come to you with that feedback?

Hon. Jeremy Cockrill: — Yeah, from the national regulatory bodies, that was sought out. And again what we have received back has been fairly brief in nature.

Vicki Mowat: — Which of those bodies have you received feedback from?

Hon. Jeremy Cockrill: — So again, you know, we've sought feedback from several national organizations via email. We haven't heard back from all of them, but certainly the associations that have gotten back to us would be the associations representing RTs [respiratory therapist], dental assistants, OTs [occupational therapist], natural health practitioners.

So again the feedback from national bodies has been very limited. And I think it'd be fair to expect, and again I hate to assume, but certainly I would imagine that our provincial regulatory bodies are seeking comment from their national regulatory bodies and their national associations as well.

Vicki Mowat: — Speaking a little bit about comparing our situation to other provinces and how long it's taken some other provinces, I had also heard that I think Alberta took 10 years to

do something similar as well, in addition to the examples that you provided. And I've heard that it took much longer than five years in Manitoba. Like people are saying like 20 years to me. Is that not the case?

Hon. Jeremy Cockrill: — It's my understanding Manitoba is not complete yet. Again I haven't spoken to the Health minister in Manitoba regarding this specific issue, but that's my understanding.

Vicki Mowat: — Okay. In terms of what makes us the same or different from other provinces, you spoke about being optimistic about a shorter timeline. Do you think it's realistic that there is this short of a timeline?

Hon. Jeremy Cockrill: — You know, I think Ms. Mowat, you're correct in saying it's . . . Sorry, I won't quote you; this wasn't your word. You know, it is an ambitious timeline, but I would say I think what gives us hope on this is again the productive back-and-forth that we've had with stakeholders thus far on it. There's a mutual desire from all parties involved to see this through and, you know, stakeholders and ministry alike both recognize that there's a need to move in this direction and quickly. Again — and speaking to the productive nature of the discussions thus far — certainly, you know, the ministry is committed to being proactive and collaborative to move this through as quickly as possible.

[16:30]

And I'll say that the ministry is also adding some legal capacity to our team, and so that will again add to I guess the volume of work that we're able to work through, you know, in concert with the Ministry of Justice, and obviously the legal counsels from each regulatory body. So certainly, you know, we see an opportunity here.

Again speaking to the constructiveness of the process thus far and the changes that we have been able to make, you know, back and forth with the regulators, if we get to a point where there's places of disagreement, we're going to take the time to make sure that we get to a good spot. Because at the end of the day this piece of legislation is all about representing the public interest in the best way. So certainly this is the timeline that we're aiming for, but want to make sure that both the ministry and the regulators end up in a good spot.

Vicki Mowat: — Thank you. Has a project plan been developed for this project?

Hon. Jeremy Cockrill: — So in regards to a project plan, we do have a draft plan that's been developed. Obviously once we get through the passage of this legislation — hopefully — and the legal capacity being added to the team, that draft plan will be finalized.

Vicki Mowat: — Thank you. Who is going to lead this work?

Hon. Jeremy Cockrill: — So this project, obviously being led by the ministry and specifically the partnerships, privacy and legislative services branch of the Ministry of Health. And some of those people are sitting beside me here and joining us.

Certainly I can say that there's been significant work within the ministry, not just in the PPLS [partnerships, privacy and legislative services] branch but engaging with other branches in the ministry. Some branches interact with the regulatory bodies more frequently. And so again, that's also been, I'd say, a parallel process over the last little while is, you know, this specific branch in the ministry gathering feedback from other parts of the ministry and making sure that what we're hearing and what's being drafted and introduced is representative of where the ministry would like to go.

Vicki Mowat: — Thank you. You talked about adding some legal capacity. Can you talk about what human resources are being added to the project in particular?

Hon. Jeremy Cockrill: — So you know, within the ministry there's a team in this branch that works exclusively on regulatory issues and engagement with the regulators.

When I talked about adding additional staff . . . So there's already two dedicated staff on this project within the ministry. Then we've added two term positions specifically for this project around policy and research.

The legal capacity that I mentioned earlier and that you asked about specifically, that will be a contract position. My understanding is that we do not have a contract signed as of yet.

And don't forget, you know, there's also capacity within the Ministry of Justice with their drafting folks. I can't speak to exactly how the Ministry of Justice is allocating staff resources, but my understanding is there's a couple of drafters specifically that are a part of this project. And so we're working quite closely with them, as any ministry would on a piece of legislation and the development of regulations.

Vicki Mowat: — Thank you. For the two term positions that you mentioned, what are the contract dates of those positions?

Hon. Jeremy Cockrill: — So the policy position, that's a two-year term. And then the research position is currently on a summer term, and then we'll start a new term come this fall. Certainly as the project progresses and develops, we'll look at extending those terms as needed as the project necessitates.

Vicki Mowat: — For the two-year policy position, how long has that person been working already?

Hon. Jeremy Cockrill: — So the individual filling the policy position, unclear on the exact date but sometime in January of this year. My understanding, the individual has had quite extensive experience in the health sector, working in the ministry and various other partner agencies as well.

Vicki Mowat: — In terms of the workload that's required here, talking about the capacity of the ministry team and the added capacity here, which tasks is the ministry prepared to assist with?

Hon. Jeremy Cockrill: — Sorry, Ms. Mowat. Maybe we didn't quite understand your question, or maybe you want to rephrase it. I mean in terms of assisting with the . . . I mean the ministry is running the project. The people I talked about, the two dedicated staff already within the branch. The two term positions, we've

added. The contract legal position we'll add. You know, obviously not to mention the work being done by other people in the ministry adjacent to the project.

I mean this is a key priority project for the ministry. So this is something that gets reported up through the deputy minister on a regular basis and then obviously to myself as the minister. So yeah, sorry, maybe I didn't quite understand.

Vicki Mowat: — So I can rephrase my question. Can you walk us through the workload that is required of the regulatory bodies to transition in order to be in compliance with this new legislation?

Hon. Jeremy Cockrill: — Okay, so the question is really in regards to kind of understanding what's required of the regulatory bodies?

Vicki Mowat: — Yeah.

Hon. Jeremy Cockrill: — Okay, thank you.

[16:45]

I think it might be really too early to be very specific around what the workload for each regulator looks like. Certainly we would request — as we have, you know, to get to this point — we would be requesting their participation from all of them on the regulations. You know, the heavy lifting will be in the regulations and then certainly the bylaws.

Now again we have regulators of various sizes, and so the College of Physicians and Surgeons, I mean, a well-developed organization, lots of capacity in that organization. A smaller regulatory body, for example, you know, massage therapists, just a smaller organization, right. So yeah as I said, certainly we expect the heavy lifting to really be around the bylaws. And that's where, you know, the work there for the various regulatory bodies is working with their respective memberships. And obviously there's a whole process within that to collect feedback and engage members that way.

As I said this is a priority project for the ministry, and understanding there's varying capacities within the bodies, you know. We want to be collaborative, as I've said, and be working with the regulatory bodies to move this along. So certainly as we get into the process more, get a better sense of the workload, I think there'll be some opportunities for similar regulatory bodies to work together and perhaps, you know, use some of each other's work when it comes to bylaws, as one example.

So certainly again the ministry will be collaborative and hopefully we see some collaboration between the regulatory bodies as well.

Vicki Mowat: — You identify that it's going to look different for different sizes of regulatory bodies, you know, so many different professions. Different regulatory bodies do different things and have different responsibilities as well. You're very aware of this.

Is there any consideration for tailored approaches to different regulatory bodies? And what might that look like in terms of the

support that they're able to receive from the ministry? You know, we're talking about like hundreds of documents having to be updated — like just so people can get a sense of how big this project is for some of these regulators — legal oversight being needed in so many different cases, especially with regulators that have been in practice for a long time.

Like there's quite a large body of work that's going to be required, and what consideration has been given to providing supports in those circumstances?

Hon. Jeremy Cockrill: — You know, again in response to your question, I think perhaps it's still maybe early days to give a definitive answer on that. You know, we have considered tailored approaches, and I would say that we would be receptive to that.

But again understanding that we want to be collaborative throughout this process, again as we get into meeting with all the regulatory bodies one on one, I expect that we'll hear, you know, specific feedback on what a tailored approach for individual regulatory bodies will look like. Certainly we're open to that. I mean keeping in mind, you know, we talk about the workload for the regulatory bodies, keep in mind, I mean all these organizations already have a set of bylaws, right. You know, there's been a good volume of work that have been done by these organizations in the past to get to where they are today.

So certainly open to tailored approaches. I think once we get into, again, those one-on-one consultations then we'll have an opportunity to hear more, and you know, make the determination on that.

Vicki Mowat: — I think one of the concerns that I've heard is about the ability of smaller regulators to do a very large volume of work off the side of their desk and not have any of their other duties suffer as a result of that work. And I think the timeline pressures factor into that. I'm sure you've heard the same thing.

And I think what folks are looking for is some assurances that there will be some balance on that front and support provided. And I think there is a question around how much of that work falls on the individual regulators and how much of it falls on the ministry.

Hon. Jeremy Cockrill: — You know, I'll just say as I said in a previous answer — and I've met with several of the regulatory bodies already — there is a variation in size and administrative capacity. Certainly understand that some colleges have thousands of members; some have tens of members. So you know, certainly can appreciate that there's going to be a difference in administrative capacity.

I think where we generally are is we've got 28 regulatory bodies, to my understanding, that are all, you know, supportive of moving in this direction. But yeah, certainly questions. Once we get into the drafting of regulations and bylaws, then we'll have a better sense. Or once we get closer to that point, we'll have a sense of capacity and then again how the ministry can work with those bodies to get to where we need to be at the end of the day for the members, at the end of the day for the public interest.

As I said, I know I perhaps sound like a broken record tonight, but we want to take a collaborative lens to this. And again we

have a timeline that we think reflects how important we think this piece of legislation is and the following regulations. You know, we'll be working ambitiously to work with these 28 groups to get there.

Vicki Mowat: — Has the ministry asked regulators to estimate what additional resources they would require to get this work accomplished within that time frame?

Hon. Jeremy Cockrill: — So yes, the regulators were asked about financial implications very early in the process, and as I said, generally speaking, the consultations on this piece of legislation go back to 2023. So early in the process certainly a range of estimates, you know, as we both understand, large and small regulatory bodies.

I think as we get into these more detailed discussions with the regulatory bodies, we'll be able to better flesh out with them, you know, resources required and that will inform the individual regulatory bodies and the decisions they make, and also the decisions the ministry makes throughout its budget process each and every year.

Vicki Mowat: — Have you been made aware of regulators hiring additional folks to assist them with their work on this project?

Hon. Jeremy Cockrill: — So the ministry hasn't heard that to date, that regulators have staffed up or added staff. Certainly that doesn't mean that they haven't, but as far as the ministry is aware that has not occurred yet.

Vicki Mowat: — If regulators have to seek out additional hours of legal advice, I think there are concerns that there is only a small amount of folks who do work in this field that would have the awareness of how to do this. And if everyone's trying to access those folks at the same time, that could add some pressures into timeline for implementation.

But in terms of costs, is there an understanding of how much this is expected to cost regulators as you look at those additional resources that will likely be required?

Hon. Jeremy Cockrill: — Not an estimate at this time. As I indicated in a previous answer, you know, we received perhaps some high-level, back-of-the-napkin type estimates very early in the consultation process. But certainly as we get into further one-on-one consultations we expect that regulators will be kind of quantifying the work in their own bodies, and you know, and then we'll have a discussion once we have some more detail. Hard to kind of work on, you know, a resourcing plan without kind of quantifying the scope, right, or the required work.

[17:00]

Vicki Mowat: — You mentioned contracting one legal individual and also relying on Ministry of Justice with some of the drafting. Can you clearly sort of identify which legal work would be the responsibility of a regulator and which legal work would be the responsibility of the ministry? Certainly I'm thinking folks that are working for the ministry would not be at the beck and call of the regulators. You know, where are those lines drawn?

Hon. Jeremy Cockrill: — I mean, I would emphasize still early days on figuring out some of these boundaries and how that's resourced.

Obviously, you know, the legal capacity within the Ministry of Health will prepare the drafting instructions to be sent over to the Ministry of Justice. But informing those drafting instructions will be our consultations with the different regulatory bodies. Certainly I would expect the regulatory bodies to likely have some internal legal capacity as they engage their members, and you know, provide their comments so that we can get those drafting instructions over to the Ministry of Justice.

I would say that there will likely be some utility or value in having that ministry legal capacity directly engaged with perhaps legal counsels from the regulatory bodies or, you know, a board or a smaller subset of, or a committee of members that are focused on this.

But I guess that's really probably the most I could say at this point around the breakdown of activity there.

Vicki Mowat: — What is the anticipated cost to government? Is there a budget for the project?

Hon. Jeremy Cockrill: — Too early to say at this point. Again, as I indicated earlier, some initial estimates, but those were very early days. And now that we've moved along a little ways, I expect that we will, as part of next year's budget process, begin to contemplate that and try to provide some more firm numbers for government.

Vicki Mowat: — In terms of the project plan, we have all these different regulatory bodies. Is there a desire to sort of start tackling them all at the same time? Is there an idea of which ones will be going first? Are there going to be a few at a time? What is that work expected to look like?

Hon. Jeremy Cockrill: — So the plan as it stands right now is to have kind of an initial contact with all 28 bodies by the end of June, kind of as a first touchpoint. Obviously that first touchpoint will kind of inform the project plan and kind of where we get into things.

I do think there may be an opportunity for similar professions or related professions to work more in concert with each other. I mean, take for example the dental professions. They currently reside under one Act. Like I won't speak for them, but it likely makes sense that there'll be some economies of scale of being able to do engagement with those regulatory bodies together, as well as those regulatory bodies being able to, when we talk about resources required, be able to access one resource instead of three resources, right?

So again, I won't speak for the regulatory bodies today, but certainly as we reach out to all of them before the end of June and have those conversations, we'll get a better sense of that.

Vicki Mowat: — A few more general questions here before my time comes to an end. Speaking specifically around the intent of the legislation, I know that when Bill 120 was introduced and passed, there was great attention toward modernization, some ability for, I think, a little bit more portability within the health

care professions. What does this legislation do to modernize and improve the professions that Bill 120 didn't do?

Hon. Jeremy Cockrill: — So to my understanding, Bill 120 required each regulatory body to make amendments to their own legislation. Again what this does is bring everybody together, have some standardization, you know, specifically around the areas of registration or complaints or governance and, I think, to have some consistency.

And while we recognize there's regulatory bodies of different sizes, I think it's in the public interest to have clear consistency in terms of how does a member of the public . . . how does the complaint process work with one regulatory body versus the other? I think it makes good sense, you know, for the folks that we represent, if they have a concern with a practitioner, having that consistency across the 28 bodies I think makes good sense.

There's also a piece of this too that as we seek to, you know, again within the health care system, encourage people of different professions to work in more collaborative models, this legislation will help I think move us further down that road. I think that's what our constituents are looking for is, you know, different models of care that can give them better access to health care, whatever that may look like in their community, large or small. I would say this piece of legislation helps us move down that road.

But really I think the core of it comes down to protecting the public interest. And part of the way that this legislation does that is provide some standardization and consistency.

Vicki Mowat: — Can you speak to the impact on processes that are already under way? I'm thinking of the scope expansion projects, scope modernization. My understanding is that changes in scope will have to be put on hold during the transition period and that there are a lot of questions about how that will work.

Hon. Jeremy Cockrill: — So I think it's important to note that this piece of legislation does not expand scope. It optimizes the current scope.

I will say that the work that's already under way to expand scope — whether that be on the pharmacy, and we've talked about some of the pilot projects there both in Swift Current and Weyburn as well as the point-of-care testing pilots happening in 50-some communities right around the province improving access to care for patients in those communities — that work will continue to go on with regulatory bodies.

And I think the government has been clear that we will continue to look for opportunities to use scope expansion to improve access to health care for people in communities large and small. Certainly when we talk about, you know, improving health care in rural and northern communities, I think there's some really exciting opportunities ahead for scope expansion.

[17:15]

That work will not be put on hold by this work and this project. You know, this is happening in the background. We've talked over the last hour here about, you know, the many complexities of the project. But while that work continues on — you know,

ministry, regulatory bodies doing heavy lifting — there's also other branches of the ministry and the Saskatchewan Health Authority and obviously those regulatory bodies and the corresponding professional associations that are all working, I'd say, trying to find opportunities for their members to offer more services.

This government's very supportive of that. We'll continue to work with all those stakeholders to expand scope where we can. And again, at the end of the day it's about the patients, and we see some opportunity there.

Vicki Mowat: — That's really good to hear. Thank you. In terms of the decision to use the restricted activities schedule, I wonder if you can speak to why this model was chosen. You know, what other jurisdictions use it, and provide a bit of an explanation of what the plan is for this.

Hon. Jeremy Cockrill: — So really the restricted activities model is, I mean, going back to ensuring, optimizing the current scope for all regulatory bodies. The legislation that we've seen in other provinces has something very similar to this, maybe just different names in different provinces. But you know, this is a model I think that we can optimize existing scope, again while protecting the public. So that's why we've chosen to go down this path.

And as I said earlier, this will be one of the places of heavy lifting for the ministry and the regulatory bodies.

Vicki Mowat: — Can you speak to how changes to restricted activities will be addressed? I'm thinking about, you know, changes in technology, which sometimes happen quite quickly. You know, will there be flexibility within this model to address that? And then if there are disputes between professions, who's the arbiter of restricted activities? What does that process look like?

Hon. Jeremy Cockrill: — Yeah, Ms. Mowat, you raise a very good point on being responsive to advancements in technology. You know, again, certainly the consideration of that and how that works would be in the regulations. And I think that does obviously — it being in regulations — that uncouples it a little bit from the legislative calendar, if you will, or the typical legislative process. So I think that does provide some sufficient flexibility for the ministry to adjust.

I think though that this is where, you know, when issues come up down the road regarding technology or disputes, we'd seek to have a collaborative approach with the regulatory bodies. I mean if there's technological advancements, certainly I think you could expect that the ministry would work with any affected regulatory body on finding a good spot where practitioners can feel like their profession is protected while still, you know, ensuring that patients have access and can be protected as that technology is used. That would be my hope.

You know, in regard to being the arbiter of disputes, this legislation does give the minister bylaw-making authority. And certainly while that is significant, again I would say that we would want to be working with the regulatory bodies to find a collaborative way to sort through issues. You know, when I look at that list of affected regulatory bodies, all of those professions

have important roles to play in the health care journey of us as individuals in the province.

So I think, you know, while we're seeking standardization and consistency, disagreements are sure to arise down the road. The minister will have bylaw-making authority under this legislation, but finding a collaborative approach would be our desired outcome.

Vicki Mowat: — I have a couple more questions. I want to ask about the situation that massage therapists are in. So their bill was passed in 2021 but hasn't been brought into force, and so it hasn't been proclaimed. And so I understand that with this legislation it would repeal *The Massage Therapy Act*, which has not yet been proclaimed. Like will that Act be proclaimed first? And what does that look like for them, I guess?

Hon. Jeremy Cockrill: — Yeah, with respect to massage therapists, you know, Bill 3 has received Royal Assent. It's just not in force, as you mentioned. That bill will need to be repealed as a part of this process.

Vicki Mowat: — So when . . .

Hon. Jeremy Cockrill: — And then, sorry, I should just say that's not unlike the other 25 pieces of legislation that will have to be repealed.

Vicki Mowat: — So just in terms of, like if they haven't . . . They don't have a college yet. If and when this bill is proclaimed, does that create a college for them? Or are we then having to proclaim legislation that is just going to immediately be repealed? I just don't understand what comes next under the circumstance. It seems a little complicated.

Hon. Jeremy Cockrill: — An order-of-operations question, more than anything, is that what I'm getting? Okay.

Again with respect to the massage therapists, you know, the intent would be to roll the work that has been already done into this process. And then obviously once this legislation is proclaimed, then that would establish them as a college with the bylaws and regulations.

And again certainly, you know, you identify a unique situation on the list. And so again, perhaps when we talk about, all the talk about collaboration, no more necessary than in that specific case just to make sure that we get it right as part of this legislation.

Vicki Mowat: — Thank you. In terms of that bill not being proclaimed for so long, I'm just wondering now when we expect this bill to come into force or if we expect that there will be a similar process of waiting.

I just feel like there was a lot of excitement and momentum about the passing of that bill, and then it kind of just deflated as it became a cumbersome sort of work project to get all of these things in place before the proclamation.

[17:30]

When do you expect that this bill will come into force, assuming it, you know, gets through all the stages here this spring in the

next couple weeks?

Hon. Jeremy Cockrill: — Yeah, well I'll just say, it will take likely a minimum of three years, two or three years to get to that point. Again we have to get through all the development of the regulations and the bylaws before we get to that point. And you know, again certainly recognize that massage therapists do play a crucial role in the system and represent an important mode of care for many people in the province.

And the timing is perhaps, you know, not intentional. It's just here is the opportunity to bring everybody together, standardize it in the name of public interest. So certainly we don't expect this bill to come into force obviously until all the regulations and bylaws are in place across all regulatory bodies, including the massage therapists in this case.

Vicki Mowat: — So I suppose a quick follow-up then. So is there an expectation that *The Massage Therapy Act* will be proclaimed in the meantime?

Hon. Jeremy Cockrill: — So the ministry will be meeting with the college of massage therapists later this month, you know, having discussions with them about obviously this piece of legislation, but also I would expect Bill 3 to come up as part of that conversation.

If everything is in order from a regulations and bylaws perspective, then I wouldn't see a reason at this point not to proclaim that, but obviously we have to make sure that that's in place in the meantime. But I think again, certainly we would look to that meeting and our engagement with them to get some specific feedback and see where they're at and certainly where their members are at in regards to that.

Vicki Mowat: — Thank you. I have no further questions, Mr. Chair.

Chair Weger: — Okay, are there any more questions or comments from any committee members? Seeing none, we will proceed to vote on the clauses. Minister Cockrill, you and your officials, if you want to spread your wings a little and stretch your legs, this may take us a little while.

This bill has 183 clauses. If the committee's in agreement, we can review it by parts and division. That'll save me asking you a question 143 times. So seeing no objection to that, that's how we will proceed.

Part 1, Preliminary Matters. Clause 1-1, short title, is that agreed?

Some Hon. Members: — Agreed.

Chair Weger: — Carried

[Clause 1-1 agreed to.]

[Clauses 1-2 to 14-1 inclusive agreed to.]

Chair Weger: — His Majesty, by and with the advice and consent of the Legislative Assembly of Saskatchewan, enacts as follows: *The Regulated Health Professions Act*.

I would ask a member to move that we report Bill No. 18, *The Regulated Health Professions Act* without amendment.

Kim Gartner: — I so move.

[17:45]

Chair Weger: — MLA Gartner moves. Is that agreed?

Some Hon. Members: — Agreed.

Chair Weger: — Carried. MLA Mowat, any closing comments?

Vicki Mowat: — I just want to thank the minister and all the officials for spending some time here with us today and shedding some clarity on the process. And please extend our thanks to everyone who's doing work on this. It's quite the undertaking. Just appreciate everyone's time tonight.

Chair Weger: — Minister, any closing comments?

Hon. Jeremy Cockrill: — Mr. Chair, just thank you and all committee members for the discussion here tonight, and all the support services for making these committee evenings happen.

Happy to share some details here, and obviously as we talked about, this is a project of significant size for the health care sector that is just kind of starting to get under way. But at the end of the day, when we think about how this can positively impact patients in Saskatchewan, certainly it's something that we're hopeful for, that we all see as patients benefit from. So thank you to the committee.

Bill No. 19 — *The Regulated Health Professions Consequential Amendments Act, 2025/Loi de 2025 corrélative de la loi intitulée *The Regulated Health Professions Act**

Chair Weger: — Thank you. We will now move on to consideration of Bill No. 19, *The Regulated Health Professions Consequential Amendments Act, 2025*, a bilingual bill. We will begin with consideration of clause 1, short title.

Minister Cockrill, you mentioned previously your opening comments from the last bill would apply, but if you have anything further to add, I will turn the floor over to you.

Hon. Jeremy Cockrill: — No comments to add from me.

Chair Weger: — Okay. Thank you, Minister. Any questions from any MLAs? Seeing none, we will proceed to vote on the clauses. Clause 1, short title, is that agreed?

Some Hon. Members: — Agreed.

Chair Weger: — Carried.

[Clause 1 agreed to.]

[Clauses 2 to 4 inclusive agreed to.]

Chair Weger: — His Majesty, by and with the advice and consent of the Legislative Assembly of Saskatchewan, enacts as follows: *The Regulated Health Professions Consequential*

Amendments Act, 2025, a bilingual bill.

I would ask a member to move that we report Bill No. 19, *The Regulated Health Professions Consequential Amendments Act, 2025* without amendment. MLA Kasun moves. Is that agreed?

Some Hon. Members: — Agreed.

Chair Weger: — Carried. Minister, any closing comments?

Hon. Jeremy Cockrill: — No. Thank you very much.

Chair Weger: — Thank you. Seeing no other closing comments, that concludes our business for today. I would ask a member to move a motion of adjournment. MLA Kropf has moved. All agreed?

Some Hon. Members: — Agreed.

Chair Weger: — The committee stands adjourned to the call of the Chair.

[The committee adjourned at 17:48.]