



STANDING COMMITTEE ON HUMAN SERVICES

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STANDING COMMITTEE ON HUMAN SERVICES

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Saskatoon Willowgrove

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Regina Elphinstone-Centre

Mr. Ryan Domotor
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Mr. Muhammad Fiaz
Regina Pasqua

Mr. Derek Meyers
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Mr. Hugh Nerlien
Kelvington-Wadena

Ms. Alana Ross
Prince Albert Northcote

[The committee met at 17:15.]

The Chair: — Well good afternoon, colleagues and officials. Welcome to the Standing Committee on Human Services. My name is Ken Cheveldayoff, and I will serve as Chair of the committee. Committee members present are . . . We have one substitution. Vicki Mowat is here substituting for Meara Conway. Welcome, Vicki. Now we have Mr. Ryan Domotor, Mr. Muhammad Fiaz, Mr. Derek Meyers, Mr. Hugh Nerlien, and Ms. Alana Ross.

I'd like to advise the committee that, pursuant to rule 148(1), the 2021-2022 supplementary estimates no. 2 for Health were committed to the Standing Committee on Human Services on March 23rd, 2022, vote 32, Health. Today we will be considering two bills — Bill No. 45 and Bill No. 62.

**Bill No. 45 — *The Health Shared Services
Saskatchewan (3sHealth) Act***

Clause 1-1

The Chair: — Bill No. 45. We will begin with consideration of this bill, *The Health Shared Services Saskatchewan (3sHealth) Act*, clause 1-1, short title. The minister is here with his officials. I would ask that officials please state their names before speaking into the microphone. As a reminder, please don't touch the microphones. The Hansard operator will turn your microphone on when you are speaking to the committee.

Minister Merriman, please introduce your officials and go ahead with your opening remarks.

Hon. Mr. Merriman: — Thank you very much, Mr. Chair. With me I have Max Hendricks, my deputy minister. I have Billie-Jo Morrisette and I have Deborah Moynes-Keshen, if that's correct. I think I said that correctly. And also I have my chief of staff here, and be happy to answer any questions on Bill 45. I can do a little bit of a preamble if you want, Mr. Chair, or we can get right into it.

The Chair: — It's up to you.

Hon. Mr. Merriman: — Okay, I'll give a little bit of a background. This is something that came out of the amalgamation of the SHA [Saskatchewan Health Authority], where we had to pull 3sHealth [Health Shared Services Saskatchewan] out as it was part of a regulatory review awhile ago and recommended that we pull this out and put it under its own piece of legislation. There's no impact to the public. There's no impact to any financials, so it's fairly straightforward. This was a recommendation that we are acting on. I'd be happy to answer any questions from the committee.

The Chair: — All right, thank you. Ms. Mowat, the floor is yours.

Ms. Mowat: — Thank you very much to the minister and officials for providing some introductory remarks. I do have a few questions about this bill. It certainly sounds quite straightforward in terms of the fact that these recommendations were made and tied to the system of amalgamation.

In terms of some of the specific text of the bill, I'm looking at the transfer to and from the organization, so specifically section 5-2, which I think is on page 10, transfers to and from the organization. There's some language here around, "Notwithstanding any . . . Act or law or any provision of any contract," and discussion about employees and their ability to be transferred from the public service to become employees of the corporation. I wonder if you can explain what the intent is behind this clause and why the ministry sees it as important.

Hon. Mr. Merriman: — Maybe just at a high level, if I understand the question, there's . . . It's not an actual physical transfer. It's just moving people from one entity to another entity, this newly created entity. So I assume it's just a paper process to be able to move them from one area to another. But maybe Max can expand.

Mr. Hendricks: — Yeah. Max Hendricks, deputy minister. So there may be certain contracts, personnel, liabilities, that sort of thing, that are currently held in the ministry or in other areas of the Government of Saskatchewan that may be transferred to 3sHealth. You know, one of the things that 3sHealth does is procurement. So there might be, for example, contracts or potentially personnel that are managed through the Government of Saskatchewan that would be transferred to 3S [Health Shared Services Saskatchewan].

So I might have a staff person that would be better placed at 3sHealth to do their work and be able to transfer that staff person seamlessly. Similarly if there was a contract, as I said, held by the ministry that made more sense to have under the umbrella of 3sHealth, we might have that transfer. It just gives us that capability. There's nothing imminent with that.

Ms. Mowat: — Okay. So there's no specific scenario that you're planning for at this point in time? It's just to provide the option.

Mr. Hendricks: — Correct.

Ms. Mowat: — Okay. And so this isn't similar . . . Does this have any overlap with what happened with *The Provincial Health Authority Act* and the . . . I think there was a transfer of employees from IT [information technology] to eHealth that has . . . My understanding is maybe that it's still in process and that it hasn't been completed. Is this a similar situation?

Mr. Hendricks: — I guess it would create the opportunity for something like that if something similar existed. You'll recall out of the advisory panel, one of the recommendations was that IT be consolidated under a single umbrella in eHealth. And so that meant that the staff from the SHA, the IT staff, would be transferred into eHealth. And as you noted, that process is still under way.

Ms. Mowat: — And so my understanding is that there's complications with those moves because of different collective bargaining agreements. Is that the . . .

Mr. Hendricks: — Well yeah. The SHA staff are governed under different collective agreements than eHealth, which is SGEU [Saskatchewan Government and General Employees' Union] or a bargaining unit of SGEU. So that's one of the

discussions that is occurring with that transfer.

Ms. Mowat: — Okay. So is there, I guess by including this clause, is there a possibility that a similar situation would arise with 3sHealth and the transfer of employees? Or do you see that as something distinct from the other situation?

Mr. Hendricks: — No, I think it's more around the fact that as a health system, as we organize ourselves to most efficiently manage the health care system, we want to have the flexibility to do these sorts of things. You'll also recall that when we created the SHA, we transferred the provincial laboratory out of the ministry, which were Government of Saskatchewan employees, to the SHA. And so in our minds that was a more efficient way of operating the laboratory services in the province, and so it made a lot of sense. And so generally when you develop these Acts, you create the capability to do these sort of transfers so that you don't have to go back and amend legislation or create regs.

Ms. Mowat: — Thank you. Looking at page 11, still within this section, there's reference to . . . Partway down in section 2, it's talking about ". . . transfer any employees or class of employees of the corporation to the Government of Saskatchewan, a Crown corporation or other agent of the Government of Saskatchewan . . ." but I didn't see a definition of what that "other agent" might mean or if that's being implied from another source of legislation.

Mr. Hendricks: — The health sector has a few partners. We have obviously SAHO [Saskatchewan Association of Health Organizations] and the Saskatchewan Cancer Agency. So from I guess time to time there might be certain lines of business that transfer in responsibility from one of those organizations to 3S; 3S is responsible for payroll and that sort of thing. SAHO does things like job classifications and that sort of thing. So there are similar lines of business that could theoretically be considered in the future.

Ms. Mowat: — Sorry. Just to clarify, when you say another agent of government, you're specifically referring to . . .

Mr. Hendricks: — It could be any agent of government, but those are the two that are within the Ministry of Health that I can think about.

Ms. Mowat: — Okay. Thank you. Speaking of SAHO, is there any, I guess is there any change in the relationship between SAHO and 3sHealth, or can you clarify sort of what that relationship is?

Mr. Hendricks: — Yeah. It does not impact SAHO. SAHO is incorporated under the not-for-profit corporations Act as its own entity in 2012, so it will remain as a separate entity.

Ms. Mowat: — Absolutely. In terms of the scope of responsibility and how it relates, like in terms of, you know . . . You listed all the initiatives that SAHO would be responsible for, like collective bargaining, job classification, all of those pieces. Is there an intent to formalize any of that relationship? Or do you think any of that would be impacted by this change?

Mr. Hendricks: — I don't foresee any changes, like I said, that would be imminent or none that would into the consideration of

this Act. You know obviously we have a situation with 3S where we need to kind of formalize its role. As it stands it could be seen as a subsidiary of the SHA and so that separation is necessary.

And you know, it has its own distinct responsibilities. It's responsible for procurement, for the management of benefit plans and trusts that the SHA has under its scope. So I think the roles are, you know . . . I won't say there's not some crossover, in terms of obviously SAHO will bargain agreements that will have impacts on these plans and on the payroll that 3S administers. So they work closely together but, yeah, nothing's contemplated in terms of immediate change.

Ms. Mowat: — In terms of procurement, is anything in that regard formalized in this Act?

Mr. Hendricks: — So the purposes of 3S are formalized in the Act under section 2-4. And so that would include activities around employee benefit insurance, disability plans and related trusts, employee pension plans, financial, human resource supply chain, workforce management systems, procurement programs, standards programs, promotional programs, and training programs generally.

Ms. Mowat: — Thank you. Going back to page 6, there is a section 2-8, Responsible to the minister. I'm just wondering if this is fairly standard wording in this section here.

[17:30]

Mr. Hendricks: — This language was borrowed from *The Provincial Health Authority Act* and *The Saskatchewan Cancer Agency Act*. It's very similar in terms of its reporting responsibility to the minister.

Ms. Mowat: — Thank you. And moving a little bit further down, part 3 talks about the board and officers. Are there any changes in this section to what is currently operating as the board? Or is this sort of just enshrining into legislation what's already happening?

Mr. Hendricks: — So the current board of 3s would continue after the passing of this Act. We will prescribe in regulations the qualifications that board members will have. Generally 3s has, you know, they've tried to have a fairly diverse skills matrix in terms of the board members and obviously people with expertise in areas of procurement and management of trusts and that sort of thing, who have that expertise. So you know, that would continue. It's just now that the board members would be appointed through a Lieutenant's order in council.

Ms. Mowat: — In terms of the prescribed qualifications, is there sort of a draft of what those regulations will entail and what the . . . Because I also see that there's a note that if any member fails to meet the prescribed qualifications, then they could be disqualified.

Mr. Hendricks: — The qualifications of a board member could be done through regulations or bylaws and those haven't been established yet. But you know . . . There are some general things outlined in the Act. But you know, in terms of more detail as to the skills and/or qualifications that a person might need to possess to be on the board, those would be outlined in more detail

in bylaws or regs. And yeah, the reason that you do that is that you can change them if you need to.

Ms. Mowat: — Thank you. On page 13, part 7, it talks about governance and the bylaws. And there's a section there that says, "The minister may require the corporation to change any existing bylaw in accordance with any directions provided by the minister." So I'm looking at 7-1(2). Again I'm wondering if this is standard language, because it can certainly look like an overreach.

Hon. Mr. Merriman: — It does mirror what we have in *The Provincial Health Authority Act*. The other side of it is, there has to be that kind of oversight on that specific area by the minister, so this is pretty standard across most of our Acts.

Ms. Mowat: — Thank you for that. Has this been used in function? Like have there been times where there has been direction to change bylaws?

Hon. Mr. Merriman: — Well there might be direction to change a . . . not in the bylaws, because in the regulatory side of things . . . a minister can't get into the regulatory side of things, as far as I understand. But there might be change in policy. That would be it from my understanding. Is that accurate?

Mr. Hendricks: — Yeah. Like, I don't recall a situation where the minister has, you know, said this is a new bylaw for you or whatever. Generally it's a more collaborative process where, you know, if the SHA or whoever were to be introducing bylaws, they would be vetted through the ministry and the minister. And if there was an objection to them, that would be noted beforehand. We've not come in with bylaws of our own.

Ms. Mowat: — Okay. Thank you. Yeah, the language says "... to change any existing bylaw in accordance with any directions provided by the minister." So it just sounds quite heavy-handed. If it's not used as much in practice, then that's comforting. But yeah, you can understand why there would be some concerns.

I think that that concludes my questions on Bill 45, Mr. Chair. Thank you.

The Chair: — Thank you very much, Ms. Mowat. Are there any other questions or comments from any committee members? Seeing none, we will proceed to vote on the clauses. All right.

Clause 1-1, short title, is that agreed?

Some Hon. Members: — Agreed.

[Clause 1-1 agreed to.]

[Clauses 1-2 to 9-4 inclusive agreed to.]

The Chair: — Her Majesty, by and with the advice and consent of the Legislative Assembly of Saskatchewan, enacts as follows: *The Health Shared Services Saskatchewan (3sHealth) Act*.

I would ask a member to move that we report Bill No. 45, the health shared services (3sHealth) Act without amendment. Mr. Nerlien moves. Is that agreed?

Some Hon. Members: — Agreed.

The Chair: — Carried. Minister, do you have any closing comments?

Hon. Mr. Merriman: — No, Mr. Chair.

The Chair: — All right. We thank you and your officials, and we will move along to the next bill. Minister, and your officials, do we need a break at all? Are you good to go?

Hon. Mr. Merriman: — No, we're good.

Bill No. 62 — *The Dental Disciplines Amendment Act, 2021*

Clause 1

The Chair: — Okay, great. We will now begin consideration of Bill No. 62, *The Dental Disciplines Amendment Act, 2021*, clause 1, short title.

Minister, please introduce your officials if you like. You've already done that and I don't think there's any changes, but you're free to make any opening remarks that you wish.

Hon. Mr. Merriman: — Thank you very much, Mr. Chair. This is *The Dental Disciplines Act, 2021*, which will allow dental hygienists, therapists, and dental assistants to practise independently outside of dentists.

Section 25 of the current dental discipline Act prohibits members of these three professions from practising independently of dentists. The proposed amendments will remove section 25, therefore allowing the dental professions to practise independently within their authorized scope of practice. This change will make it possible for the public to select their provider of these services.

The amendment Act will also create opportunities to develop dental services delivery models and improve public access to dental care, especially in rural and remote areas. Dental hygienists and dental therapists could open clinics in places where a full-service dental clinic may not be possible.

As mentioned, this is something that's very important to be able to expand out to get to people for proper hygiene and meeting with the dental hygienist, the dental therapist, and the dental assistants. This is something that was very much sought after by them to be able to practise independently, and we're bringing this piece of legislation for consideration. I'd be happy to answer any questions.

The Chair: — Thank you, Mr. Minister. Ms. Mowat, the floor is yours.

Ms. Mowat: — Thank you, Mr. Chair. So my understanding is that this legislation will bring us in line with other provinces, and that other provinces have been moving in this direction over the past 10 or 15 years or so.

I think certainly anything that's going to improve access to dental care sounds like a good idea. You know, there's certainly . . . We all have tales of dental care and our varied access, and know that

it is, you know, your mouth health is directly related to the rest of your health. So I'm certainly behind the idea of improving access and have had the opportunity to chat with some of these folks to hear what they perceive the impact to be.

[17:45]

In terms of the mechanics of this, I know that, I think in your second reading remarks you talked about some of the consultations that took place. I don't have them right in front of me here, but can you speak to which organizations were consulted in this process? Specifically I think there was reference to the fact that the College of Dental Surgeons had had some concerns at the beginning and that those had been resolved. So I wonder if you could speak to what that looked like.

Hon. Mr. Merriman: — Sure. Yeah, we did have quite a few consultations starting last year, the beginning of last year. Obviously the SHA, the Saskatchewan Dental Assistants' Association, Saskatchewan Dental Hygienists Association, Saskatchewan Dental Therapists Association, U of R [University of Regina], U of S [University of Saskatchewan], Sask Poly, and the College of Dental Surgeons of Saskatchewan. All of them were supportive.

The college expressed some concerns that we certainly worked out and they understood why we were doing this and the intent in behind it was to provide better care for their patients as well as the dental assistants, the hygienists, and the therapists as well. So they did see this as . . . they did have an initial concern, but that was alleviated after some further consultation and discussions that they saw the benefit of it.

Ms. Mowat: — Thank you. In terms of the impact on existing dental offices, I would assume there would be potential for a financial impact. But I also wonder about the labour force angle and whether there are enough dental assistants to provide services, both at dental offices and to be practising independently. Or if there's been any sort of thought put to what that looks like in the big picture.

Hon. Mr. Merriman: — Yeah, for sure there's been a lot of discussion on what exactly we need to be doing as far as the consultation with this process. But there shouldn't be any impact on the labour side of things. This is one of those ones where the market will dictate if there is need for it out there, such as the long-term care, rural and remote Saskatchewan. If there's a need out there, then there's certain to be a market to be able to fill with the therapists, the assistants, and the hygienists all filling in that.

So I don't think that there will be an impact on the dentists themselves. I think this is something that will grow over time and expand when there's the opportunity for these three professions to venture out.

Ms. Mowat: — Do we anticipate any changes required to the training that these professions receive or any of those institutions that provide the training?

Hon. Mr. Merriman: — Yeah, the training will be the same. They're performing the same duties. They're just not performing it under the direct supervision or the direct employment of a dentist. So the duties are the same. The patients are the same.

They just have the opportunity to be more mobile and go to the patients versus them coming to the dentist. So there's lots of opportunities here, but there should be no impact.

Ms. Mowat: — Okay.

Hon. Mr. Merriman: — Maybe just to clarify that, we didn't see . . . or from my understanding, there wasn't any impact in any of the other provinces that went down this path.

Ms. Mowat: — Is our training right now comparable to other jurisdictions in these areas?

Hon. Mr. Merriman: — I would assume that it's very similar. There's a national association, so to be part of the national association you have to have the same requirements interprovincially. So I would assume . . . I'm not . . . It may vary a bit from jurisdiction to jurisdiction, but I don't see it changing a whole lot. The therapists, the assistants, and the hygienists are pretty straightforward across the country.

Ms. Mowat: — Yeah. I think it's something to keep in mind as we look at . . . You know, if these things are left up to the market, I think those things need to be comparable province to province to make sure that we're able to recruit and retain our own folks, so yeah.

In talking about dental assistants, I understand that there's been a challenge in recruiting dental assistants, especially outside of Saskatoon and Regina. So I'm wondering if there's a plan. You know, there is certainly a tremendous opportunity to expand access to dental care with these models, and one of the examples that was provided to me was, you know, travelling clinics and this sort of thing. Not necessarily setting up a shop that would compete with an existing dentist office, but travelling clinics to provide hygiene and that sort of thing and highlight issues before they become emergency issues.

So is there any plan to be able to recruit folks to those areas or for the ministry or SHA to get involved in identifying where gaps exist and providing those services?

Hon. Mr. Merriman: — I guess on the getting out, my comment is that this is something that's certainly happening. You might be familiar with the Saskatoon Tribal Council bus that is mobile that does have a dentist chair in it. This would allow the clinicians to be able to go out and do that by themselves.

As far as recruitment, I'm not aware of any issues within either one of these three professions, but it's always ongoing. There's natural turnover in any profession like this, but I'm not aware of anything that . . . No. My officials are shaking their heads, so I'm assuming that there isn't. But if there is something and we do see that there is a large amount of any one of these three professions, that we could certainly work with the Minister of Advanced Education to be able to see if there's an opportunity to open up more seats if that comes to pass.

Ms. Mowat: — Is there a sense of which areas? If we're talking about rural Sask, northern Sask, is there a sense of which areas might be the most positively impacted by the change?

Hon. Mr. Merriman: — I think the few areas that would be

impacted — certainly rural, remote, and the North. Going into long-term care would be another one. Personal care homes, group homes would be another one that would have access to this.

And in any of those situations it's always easier to come to the client to be able to do that, to provide proper oral hygiene and the cleaning. And the therapists, to be able to do their side of it, versus them coming in, because there are some mobility challenges in that. It can sometimes be stressful going to the dentist office, so it's a lot easier if we can provide that in their own environment. So that'll be a certainly, a quick-result benefit from it.

Ms. Mowat: — Yeah, I definitely thought about the benefits in long-term care as well. Is there a plan for, you know, how that would be utilized or what that would look like?

Hon. Mr. Merriman: — I think we would have to operationalize it with these three groups to see what it exactly is, where they want to go, when they want to be able to do that. Under the assumption that this bill gets passed and we can move it in, then they . . . They've been working on this for quite a few years. I remember they approached me, it was probably about five or six years ago, and wanted this. So I would think that they have an idea of where they need to go right away and what their business model is going to be, whether they venture out on their own or they just . . . This just gives them the option. It doesn't say that they have to be on their own. It just gives them the option to be able to do that.

Ms. Mowat: — Thank you for answering my questions. I have no further questions, Mr. Chair.

The Chair: — Thank you very much, Ms. Mowat. Are there any more questions or comments from any committee members? Seeing none, we will proceed to vote on the clauses.

Clause 1, short title, is that agreed?

Some Hon. Members: — Agreed.

The Chair: — Carried.

[Clause 1 agreed to.]

[Clauses 2 to 5 inclusive agreed to.]

The Chair: — Her Majesty, by and with the advice and consent of the Legislative Assembly of Saskatchewan, enacts as follows: *The Dental Disciplines Amendment Act, 2021*.

I would now ask a member to move that we report Bill No. 62, *The Dental Disciplines Amendment Act, 2021* without amendment. Mr. Fiaz moves. Is that agreed?

Some Hon. Members: — Agreed.

The Chair: — Carried. Minister, do you have any closing comments at this time?

Hon. Mr. Merriman: — No, just to thank the committee, thank the officials, and you, Mr. Chair, and Hansard for accommodating us this evening.

The Chair: — Thanks very much, Mr. Minister. Ms. Opposition Critic, thank you for your involvement. And committee members, thank you as well. Any further comments before I entertain adjournment? Ladies and gentlemen, that concludes our business this evening. I would ask a member to move a motion of adjournment.

Mr. Domotor: — I move to adjourn.

The Chair: — Mr. Domotor has moved. All agreed?

Some Hon. Members: — Agreed.

The Chair: — The committee stands adjourned until the call of the Chair.

[The committee adjourned at 17:56.]