

MEETING GO 57-20-25

STANDING COMMITTEE ON GOVERNMENT OPERATIONS

THURSDAY, AUGUST 28, 2025 EAGLE ROOM, LEGISLATIVE ASSEMBLY 1:30 PM

AGENDA

- 1. Call to Order
- 2. Prayer/Reflection
- 3. Review and Adoption of Agenda
- 4. Declarations of Conflict of Interest
- 5. Public Matters
 - a) Bill 26, An Act to Amend the *Public Service Act*: briefing from Megan Wood, Chief Executive Officer & Registrar, College and Association of Nurses of the Northwest Territories and Nunavut (CANNN)
- 6. In Camera Matters
 - a) Debrief
 - b) Correspondence review
 - i. 2025-08-11 Minister of Finance Confidential
 - ii. 2025-07-18 Minister Responsible for the WSCC Confidential
 - iii. 2025-07-24 MLA Testart Response to request for comment on Bill 29: First Responders Workers' Compensation Amendment Act
 - c) Committee business
 - i. Bill 29: First Responders Workers' Compensation Amendment Act
 - d) Internal briefing on the 2024–25 annual reports of Legislative Assembly statutory officers
 - e) Correspondence review
 - i. 2025-07-25 –Workers' Advisor Office, Northwest Territories and Nunavut Feedback on Bill 21: An Act to Amend the *Workers' Compensation Act*
 - ii. 2025-08-01 Northwest Territories Teachers' Association Feedback on Bill 21: An Act to Amend the *Workers' Compensation Act*

- iii. 2025-08-18 Minister Responsible for the WSCC to the Gwich'in Tribal Council Response to feedback on Bill 21: An Act to Amend the Workers' Compensation Act
- f) Committee business
 - i. Bill 21: An Act to Amend the Worker's Compensation $Act\,$
 - ii. Bill 22: Legislation Act
- 7. Date and Time of Next Meeting: Friday, August 29, 2025 at 9:30 a.m.
- 8. Adjournment





An Act to Amend the *Public*Service Act

Feedback Presentation

CANNN – the College and Association of Nurses of the Northwest Territories and Nunavut has been in existence since 1975 when we were established as both the regulatory body and association for Registered Nurses practicing in the Northwest Territories.

Since that time the organization has grown to represent both the Northwest Territories and Nunavut, and in 2023 expanded to regulate all designations of nursing: Registered Nurses, Nurse Practitioners, Registered Psychiatric Nurses and Licensed Practical Nurses



Dual Mandate Organization





Protect the Public

Advocate for Nurses





Future State

Division of Mandates

CANNN is currently working to formally separate the regulatory and association functions of the organization, with the intent of establishing an independent nursing association.

Rationale:

Separation would reduce potential conflicts of interest between regulation and advocacy.

An independent association could pursue activities such as advocacy and, if desired, apply for bargaining power.

Context:

While CANNN fulfills a regulatory mandate focused on public protection, this role limits the organization's ability to act as an advocacy body for nurses. A distinct association would allow clearer alignment of responsibilities and reduce overlap.

Examples of potential conflicts of interest:

Discipline vs. professional support
Regulator vs. advocate roles
Inconsistencies in public trust perception
Restriction on pursuing bargaining power

What have you heard so far? This bill will improve recruitment, retention and the current state of health care at Stanton. That it is supported by nurses in smaller places. That they need to go to their employers. That it is an option, not a silver bullet.

We agree, we support this statement, and we believe there is evidence to back this up.

This is a long studied issue, in 2007 the job satisfaction of nurses who were members of a nurse led collective bargaining unit were studied due to the evidence that nursing shortages were leading to decreased quality of care, reduced satisfaction and increased turnover of nursing positions. The results indicated that members of a nurse led collective bargaining unit had higher wages, with mixed impact on job satisfaction. It was indicated that nurse led collective bargaining units, when focused on retention and satisfaction outcomes would have a ripple effect of improved nurse retention and recruitment, job satisfaction, and ultimately patient care (Pittman, 2007).

In 2010 a Nursing Labor-Management Partnership was trialed. This is a union and/or association working in partnership with hospital management to work together and improve the environment—resulting in improved outcomes as noted in the previous slide (Porter et al., 2010).

You have heard from nurses that they have tried this avenue, and have not succeeded. This is, undoubtedly, the best avenue for success as it reduces burnout, allows for more collaborative and effective problem-solving and results in better patient care outcomes.

It is not possible without employer engagement.

This continues to be studied – it's shown that nursing unions drastically improve job satisfactions. In 2023 the *Journal of Nursing Regulation* found that having nurse led unions resulted in lower turnover (10.9% vs. 13.2% for non-nurse union), and members felt they had greater advocacy and awareness of issues that were impacting their profession on the front line.

Nurses are vocalizing that the current collective bargaining unit is not able to provide this.

In the Proposal for an act to amend the public service act, it states that across
Canada, independent nursing associations successfully advocate for their members
while still collaborating with and strengthening broader labour movements,
showing how tailored representation can enhance, rather than undermine, worker
solidarity.

• This is why we are working towards the establishment of an independent association that can have the voice necessary to advocate, and possibly bargain for nurses in the Northwest Territories.



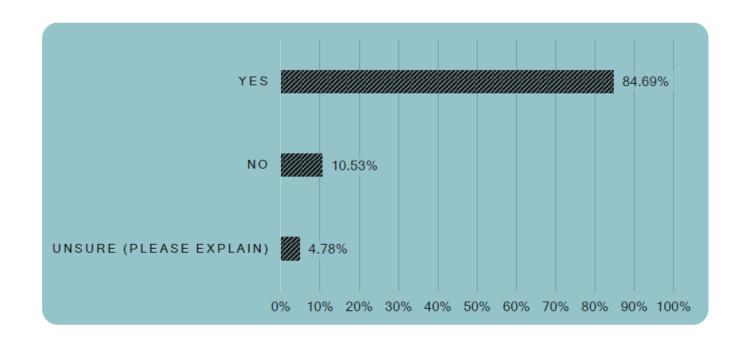


Northwest Territories



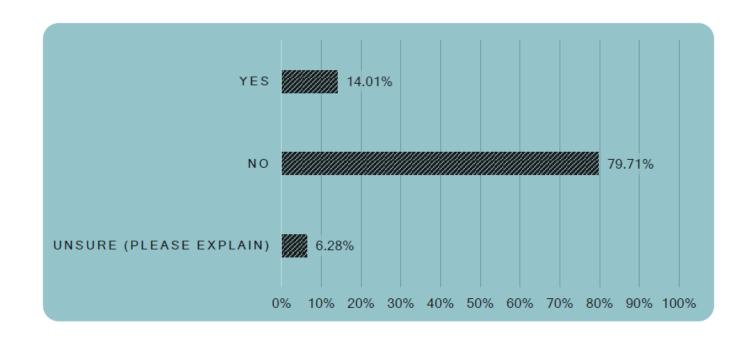
Q2 and Q3: Collective Agreements & Bargaining Structures

Do you think nurses in the Northwest Territories (NWT) and Nunavut (NU) should have their own collective agreement?





Do you feel the current bargaining structure reflects the professional needs and responsibilities of nurses?





What did nurses say?



"The existing bargaining structure partially reflects the professional needs and responsibilities of nurses but more strongly reflects the ideology of trade unions and the protectionism of management."



"no regard for shift workers"



"What are the specific professional needs and responsibilities of nurses? WHO and how hasthis been determined and articulated."



What's happening elsewhere for nurses?



















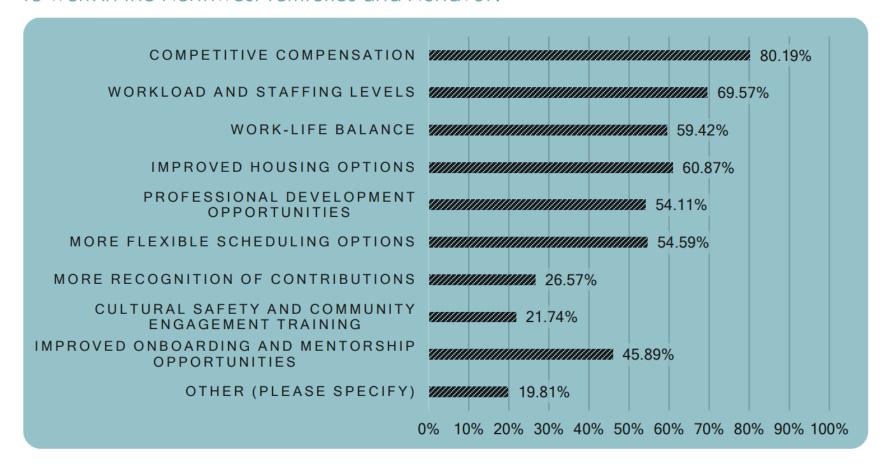






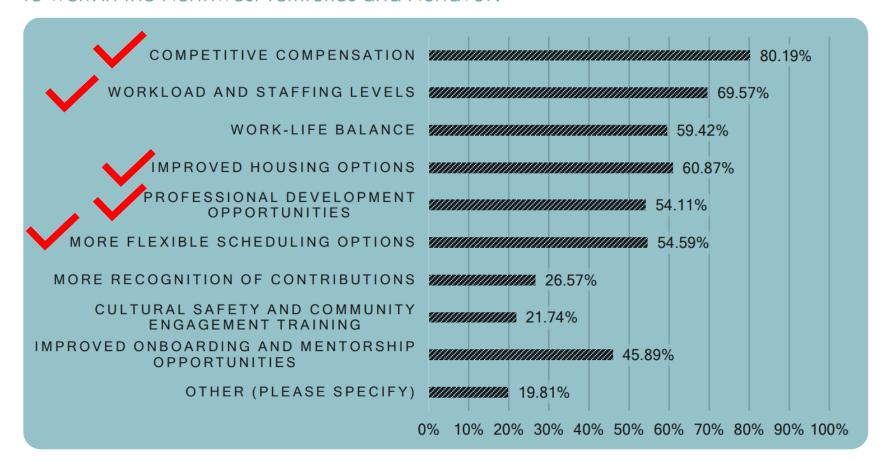


In your opinion, what specific changes or initiatives do you think would entice nurses to work in the Northwest Territories and Nunavut?





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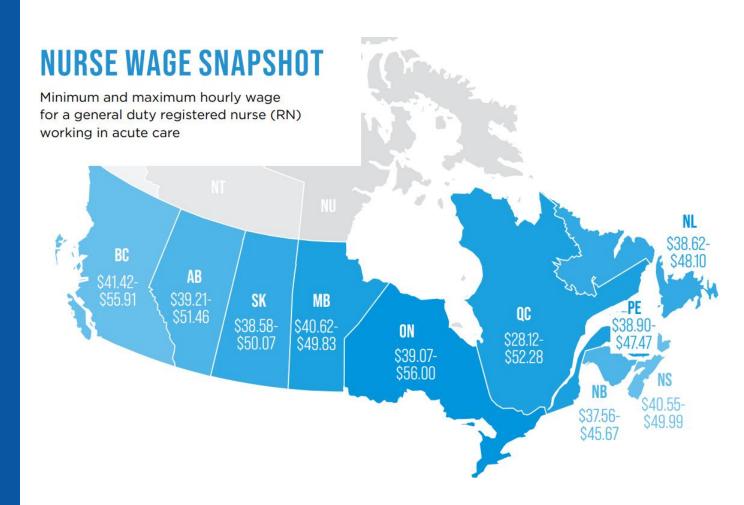






RNs in NT Pay Level 16 \$54.44-65.03

In the minister's presentation on July 15th, it was stated that nurses in the Northwest Territories have a higher wage than anywhere else in Canada.



Cost of Living Score

\$ \$ \$ \$ \$ \$

The cost of living score is calculated based on accumulating the cost of food, transportation, health services, rent, utilities, taxes, and miscellaneous.

Northwest Territories

ERI Economic Research Institute



Scenario

If an Alberta nurse making \$39/hour moved to NWT, their equivalent wage would need to increase by 39% to maintain the same standard of living.

Adjusted Alberta wage=39×(1+0.39)=39×1.39=\$54.21

•NWT wage: \$54/hour

•Required equivalent wage: \$54.21/hour

So **even at \$54/hour**, the NWT nurse is effectively making **less** than an Alberta nurse when adjusted for cost of living:

= SHORTFALL

Our wages – while higher, are no longer an incentive to move to the NWT.



What next?

Regardless of whether the bill passes, or does not, the establishment of a Nursing Association could provide a mechanism to strengthen nurses' representation and support advocacy for profession-specific improvements.

Whether through modernization of the Public Service Act or the passing of Bill 26, the underlying issue identified is that many nurses report not feeling adequately represented. Moving forward, it will be important to ensure that nurses are included, their perspectives are heard, and they have opportunities to contribute to decisions shaping the future of the profession.



Health care is complex, and there is no single solution that applies to all contexts. Progress will require tailored responses to address specific needs. Providing nurses with the ability to engage in collective bargaining would create opportunities for representation comparable to other jurisdictions with nurse-specific unions.



THANK YOU.

