



Third Session - Thirty-Fifth Legislature
of the
Legislative Assembly of Manitoba

**DEBATES
and
PROCEEDINGS
(HANSARD)**

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Speaker*



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MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Fifth Legislature

Members, Constituencies and Political Affiliation

NAME	CONSTITUENCY	PARTY
ALCOCK, Reg	Osborne	Liberal
ASHTON, Steve	Thompson	NDP
BARRETT, Becky	Wellington	NDP
CARSTAIRS, Sharon	River Heights	Liberal
CERILLI, Marianne	Radisson	NDP
CHEEMA, Gulzar	The Maples	Liberal
CHOMIAK, Dave	Kildonan	NDP
CONNERY, Edward	Portage la Prairie	PC
CUMMINGS, Glen, Hon.	Ste. Rose	PC
DACQUAY, Louise	Seine River	PC
DERKACH, Leonard, Hon.	Roblin-Russell	PC
DEWAR, Gregory	Selkirk	NDP
DOER, Gary	Concordia	NDP
DOWNEY, James, Hon.	Arthur-Virden	PC
DRIEDGER, Albert, Hon.	Steinbach	PC
DUCHARME, Gerry, Hon.	Riel	PC
EDWARDS, Paul	St. James	Liberal
ENNS, Harry, Hon.	Lakeside	PC
ERNST, Jim, Hon.	Charleswood	PC
EVANS, Clif	Interlake	NDP
EVANS, Leonard S.	Brandon East	NDP
FILMON, Gary, Hon.	Tuxedo	PC
FINDLAY, Glen, Hon.	Springfield	PC
FRIESEN, Jean	Wolseley	NDP
GAUDRY, Neil	St. Boniface	Liberal
GILLESHAMMER, Harold, Hon.	Minnedosa	PC
HARPER, Elijah	Rupertsland	NDP
HELWER, Edward R.	Gimli	PC
HICKES, George	Point Douglas	NDP
LAMOUREUX, Kevin	Inkster	Liberal
LATHLIN, Oscar	The Pas	NDP
LAURENDEAU, Marcel	St. Norbert	PC
MALOWAY, Jim	Elmwood	NDP
MANNES, Clayton, Hon.	Morris	PC
MARTINDALE, Doug	Burrows	NDP
McALPINE, Gerry	Sturgeon Creek	PC
McCRAE, James, Hon.	Brandon West	PC
McINTOSH, Linda, Hon.	Assiniboia	PC
MITCHELSON, Bonnie, Hon.	River East	PC
NEUFELD, Harold	Rossmere	PC
ORCHARD, Donald, Hon.	Pembina	PC
PENNER, Jack	Emerson	PC
PLOHMAN, John	Dauphin	NDP
PRAZNIK, Darren, Hon.	Lac du Bonnet	PC
REID, Daryl	Transcona	NDP
REIMER, Jack	Niakwa	PC
RENDER, Shirley	St. Vital	PC
ROCAN, Denis, Hon.	Gladstone	PC
ROSE, Bob	Turtle Mountain	PC
SANTOS, Conrad	Broadway	NDP
STEFANSON, Eric, Hon.	Kirkfield Park	PC
STORIE, Jerry	Flin Flon	NDP
SVEINSON, Ben	La Verendrye	PC
VODREY, Rosemary, Hon.	Fort Garry	PC
WASYLYCIA-LEIS, Judy	St. Johns	NDP
WOWCHUK, Rosann	Swan River	NDP

LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, May 14, 1992

The House met at 1:30 p.m.

PRAYERS

ROUTINE PROCEEDINGS

PRESENTING PETITIONS

Mr. Kevin Lamoureux (Inkster): Mr. Speaker, I beg to present the petition of Jack Mavins, G. Ripstein, P. Rifsto and others requesting the Legislative Assembly of Manitoba strongly urge the provincial government to reconsider its decision and return the Manitoba Heritage Federation its granting authority.

Mr. Leonard Evans (Brandon East): Mr. Speaker, I beg to present the petition of Penny Wicht, Judy Bickerton, Colleen Elliot and others requesting the government consider reviewing the funding of Brandon General Hospital to avoid layoffs and cutbacks to vital services.

READING AND RECEIVING PETITIONS

Mr. Speaker: I have reviewed the petition of the honourable member for Wellington (Ms. Barrett). It complies with the privileges and practices of the House and complies with the rules. Is it the will of the House to have the petition read?

The petition of the undersigned citizens of the province of Manitoba humbly sheweth:

THAT child abuse is a crime abhorred by all good citizens of our society, but nonetheless it exists in today's world; and

It is the responsibility of the government to recognize and deal with this most vicious of crimes; and

Programs like the Fight Back Against Child Abuse campaign raise public awareness and necessary funds to deal with crime; and

The decision to terminate the Fight Back Against Child Abuse campaign will hamper the efforts of all good citizens to help abused children.

WHEREFORE your petitioners humbly pray that the Legislature of the Province of Manitoba may be pleased to request that the government of Manitoba show a strong commitment to deal with Child Abuse

by considering restoring the Fight Back Against Child Abuse campaign.

* * *

Mr. Speaker: I have reviewed the petition of the honourable Leader of the Second Opposition (Mrs. Carstairs). It complies with the privileges and practices of the House and complies with the rules. Is it the will of the House to have the petition read?

The petition of the undersigned residents of the province of Manitoba humbly sheweth that:

WHEREAS the Province of Manitoba announced that it would establish an Office of the Children's Advocate in its most recent throne speech and allocated funds for this Office in its March '92 budget; and

WHEREAS the Kimelman Report (1983), the Aboriginal Justice Inquiry (1991) and the Suche Report (1992) recommended that the province establish such an office reporting directly to the Legislative Assembly of Manitoba, in a manner similar to that of the Office of the Ombudsman; and

WHEREAS pursuant to the Child and Family Services Act Standards, the agency worker is to be the advocate for a child in care; and

WHEREAS there is a major concern that child welfare workers, due to their vested interest as employees within the service system, cannot perform an independent advocacy role; and

* (1335)

WHEREAS pure advocacy will only be obtained through an independent and external agency; and

WHEREAS the Minister of Family Services (Mr. Gillieshammer) has unsatisfactorily dealt with complaints lodged against child welfare agencies; and now

THEREFORE your petitioners humbly pray that the Legislative Assembly of Manitoba strongly urge the provincial government to consider establishing an Office of the Children's Advocate which will be independent of cabinet and report directly to the Legislative Assembly of Manitoba.

MINISTERIAL STATEMENT

Hon. James McCrae (Minister responsible for Constitutional Affairs): Mr. Speaker, I have a statement for the House.

Mr. Speaker, I am pleased to report again to the House on the continuing series of meetings of ministers and aboriginal leaders on constitutional renewal. As honourable members know, we met in Saint John for two days last week and in Vancouver for three days this week. I believe there exists immense good will among the people of Canada and that they want their governments to make compromises and produce a comprehensive package of amendments that will modernize the Constitution. Although progress has been slow in many areas, we are making progress to achieve that goal.

While I cannot report specific texts have been finally adopted, I can report that the issues have been refined, and in most cases, rolling drafts are now being presented to heads of delegations. In Saint John, the main subject of discussion was regional disparities, equalization and the economic union, all subjects of fundamental importance to smaller, less prosperous provinces. There was also discussion of the social and economic union and the division of powers.

Unfortunately, Mr. Speaker, while the federal government and some larger provinces are prepared to speak eloquently of their devotion to the principle of reducing regional disparities, they showed no willingness to back their words with action. An agency has been proposed to monitor progress on reducing regional disparities, but to this point, the federal government has rejected giving the equalization provisions real teeth. The last thing Manitoba needs is another Ottawa-based bureaucracy burning tax dollars that should go to those provinces that need them.

Discussion of the Senate, both in Saint John and Vancouver, was inconclusive. Proponents of a so-called equitable Senate have chosen to build all their proposals around Ontario and Quebec, each having 20 percent of the seats. The remaining 60 percent of the seats would have to be divided among eight provinces and the territories. Having accepted at the outset the inequality of provinces, proponents of equitability naturally have to divide the smaller provinces into tiers. As a province that is substantially smaller in population than British

Columbia and Alberta, Manitoba is always placed in the third tier.

Some of these so-called equitable models allot less than 6 percent of the seats in the Senate to Manitoba. The manifest unfairness of the equitable models has led to growing support for the equal distribution of seats. Unfortunately, some provinces are now seeking to reduce the effectiveness of the Senate. No one, however, can explain why we would create a new elected Senate but leave it virtually powerless. We will again devote a large portion of the available time in the Montreal meeting to Senate reform.

It is my hope that the Montreal meeting will allow us to build on the consensus which was achieved in Vancouver on how we should approach the question of aboriginal self-government. We have reviewed many options, including positive and negative lists of powers, contextual statements, constitutionalized negotiation processes, special tribunals and the like, but we concluded in Vancouver that we were trying to accomplish too much in what is, after all, largely uncharted territory.

It seems to be the consensus that constitutional provisions be kept to a minimum and that the parameters and processes of the negotiations be placed in a political accord. The accord offers the advantage of being flexible and subject to periodic review to take into account our experience with the negotiation process.

The last major issue that ministers have grappled with is the division of powers. Frankly, progress in this field can only be measured by a micrometer, Mr. Speaker. There seems to be no central theme underlying their discussions of powers as unrelated as the regulation of telecommunications and the appointment of judges. Each issue has to be dealt with essentially in isolation, and settling one does not always help with the next. Nevertheless, we have now examined just about all the trees so we can, I expect, step back in Montreal and look at the forest.

With so much of the groundwork now completed and the options clearly before us, ministers and aboriginal leaders realize we must accelerate our pace and build on the agreements already achieved. Accordingly, we have agreed to meet in Montreal on Wednesday, Thursday and Friday of next week, and Toronto all the following week.

As Manitoba's representative in these crucial talks, it is my sincere hope, Mr. Speaker, that when I next address the House on this issue, there will be a complete package that all members of this Legislature, all Manitobans and all Canadians, can embrace as an honourable solution to the constitutional problems that have threatened to destroy the unity of this great country.

* (1340)

Ms. Jean Friesen (Wolsley): Mr. Speaker, I am glad to be able to rise to respond to the ministerial statement today on the Constitution. It is always interesting to hear the Minister of Justice's continuing reports on these particular conferences.

We note that the government continues its unilateral discussion of these conferences and that the all-party approach that we had maintained for so many months—and in the Meech Lake issue in Manitoba—appears to have been abandoned by this government in ways which it has not been abandoned by other governments.

It is always welcome, of course, to hear these presentations of the minister to the Legislature. We remain committed to the all-party process and I think the minister is aware of that. It is puzzling as to why that is being continually rejected.

The second thing that the minister appears to be discussing here is the issue of these powers of the Senate, and again I would remind the minister that there is a very clear task force report on this which rejected the Triple-E position that this particular government has continued to press in some of the negotiations and at some of the conferences.

The Manitoba position was a compromise position. I would urge the minister to read that and to see if there are opportunities there and some flexibility in that position for the kind of position that he is taking with the federal government.

I notice the minister's rejection of a further institution to monitor progress on reducing regional disparity, something which was proposed some months ago and last September in the federal government's proposals for our Constitution. I think it has been rejected by many Canadians, and we are pleased to see that this provincial government has also had some difficulties with this. It is surprising, of course, when you recognize that this provincial government is also a Tory government, one that presumably sends its subscriptions to the same Tory party which has reduced equalization

across this country, which has had an enormous and terrible effect upon Manitoba and upon other provinces, and which, by its continuing support for free trade and indeed the expansion of free trade, puts the regions and the poorer regions of this country in an extremely difficult position. So I urge the minister, when he continues these discussions, to look at the overall economic context of government policy as well as the particular institutions which they are proposing.

I think we, like the minister, are also very glad to see the continuing aboriginal representation at these conferences. It marks a real departure in the negotiations in Canada; it marks a very real historic change in the position of aboriginal people. We are pleased to see that the federal government has finally understood that position, and we are, I think, particularly pleased to see that people like Ovide Mercredi, who represents all the assembled chiefs of Canada, but who are also Manitobans. I think that is a very encouraging part.

It might perhaps interest the government to know that Ovide Mercredi was one of the first ACCESS students in Manitoba, as was the lawyer for the assembly of the chiefs of Canada. I think that is perhaps something salutary to remember, the kind of contribution that those programs have made to the very negotiations which the entire country is facing, and we commend the chiefs for their statesman-like approach to these constitutional negotiations, which are really very much at the heart of their future.

The continuing difficulties that the minister faces over division of powers, I think, are at the heart of the constitutional position, and we certainly support the position of the Manitoba task force on that and hope that the minister will continue to keep that all-party position in mind, the recommendation for a strong central government, for a government which has the power to redistribute the wealth of this country in a more equitable manner.

Those are the issues which we feel concern the people of Manitoba throughout the winter and in other presentations, and we hope that those principles will continue to guide this minister as he takes his place at the constitutional conference.

Mrs. Sharon Carstairs (Leader of the Second Opposition): Mr. Speaker, I thank the Minister of Justice (Mr. McCrae) once again for reporting to this House on the deliberations taking place. Like all Canadians, and I am sure the minister himself, I

would like to see some text that we could then make an evaluation with respect to whether that meets our needs as Canadians, not only now, but well into the future. I urge him to get on with his job, along with the other ministers, in preparing such a text for all of us.

I want to raise, however, a number of serious concerns which I have. First and foremost, I have to say that I disagree with the member for Wolseley (Ms. Friesen). I think it was very clear in the task force report as to what was to be negotiated on behalf of a newly reformed Senate for the people of Canada, including the people of the province of Manitoba.

* (1345)

As to, however, the public discourse that was not mentioned by the minister, I must say to him that I have very grave concerns, and I hope that at some time he can elicit us with more information with regard to it. There were several news reports which indicated that there was to be an acceptance that aboriginal rights would be subject to the Charter but that they would be given the notwithstanding clause.

Well, there is no doubt in the task force report where the Liberal Party stands on the use of the notwithstanding clause. We do not believe that the notwithstanding clause should be allowed by anyone. That not only includes the federal government, it also includes provincial governments and would include any additional government level, including aboriginal peoples.

The Charter of Rights and Freedoms, in Section 1, clearly provides for the actions of government, should it meet the acid test that it is reasonable in a democratic society, if it is reasonable in a democratic society.

Quite frankly, Mr. Speaker, I have never understood why any government needs to use the notwithstanding clause. I did not agree to it when Saskatchewan used it, and my party did not agree. We did not agree when Quebec used it. We will not agree, quite frankly, when any other level of government, whether it is municipal or aboriginal, also is allowed to access and use the notwithstanding clause. We were so concerned about that, the minister knows full well, that we insisted in the task force report in stating very clearly that the Liberal Party in Manitoba was opposed to the existence of the notwithstanding clause in the Charter.

I also have some problems with the minister's last statement. I hope it is a semantic problem, and he can clarify that. He says: All Manitobans and all Canadians can embrace as an honourable solution to the constitutional problems that have threatened to destroy the unity of this great country.

It seems to imply to me, and perhaps I am incorrect, that we are once again going to be given a package and we are going to be asked to accept it without any t's uncrossed or i's undotted. I would suggest to the minister that the First Ministers, through their representatives, may come up with a package. If they deny the input of Canadians in amending and changing that package, then we will see reiterated a Meech Lake process which is an anathema to the vast majority of Canadians in this country.

Thank you, Mr. Speaker.

Introduction of Guests

Mr. Speaker: Prior to Oral Questions, may I direct the attention of all members to the gallery, where we have with us this afternoon, from the Gnadenthal School, twenty-nine Grades 1 to 8 students. They are under the direction of Miss Klassen. This school is located in the constituency of the honourable member for Emerson (Mr. Penner).

Also this afternoon, from the Silver Heights Collegiate, we have the provincial championship winners of Reach for the Top. They are under the direction of Wally Linton. This school is located in the constituency of the honourable member for Sturgeon Creek (Mr. McAlpine).

On behalf of all honourable members, I welcome you here this afternoon.

ORAL QUESTION PERIOD

Health Care System Reform Implementation

Ms. Judy Wasylycia-Lels (St. Johns): The long-awaited, much-touted action plan from the Minister of Health (Mr. Orchard) in this government is finally here.

Mr. Speaker, we do not disagree with the concerns expressed in this document. They are generic concerns. They have been expressed by every royal commission and every task force in every province in this country for the last five years. They have been expressed by all political parties,

including the NDP that has long-touted a community-based preventive wellness model for our health care system.

The trouble with this document is that not only do we get generic concerns, but we get generic policy prescriptions. It is a multiple-choice document. We do not know where this government stands on most issues, with the exception of beds. This document, as you know, Mr. Speaker, is very specific on beds and has confirmed the rumours that the minister says have been a part of fearmongering up until now.

So I want to ask the Minister of Health: Simply, when do we get the details about how this government plans to implement these broad-sweeping, philosophical statements? When do we hear exactly what this government plans to do for the future of health care here in Manitoba?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, I simply ask my honourable friend to give due and diligent consideration to the document that I tabled today on behalf of this government. As I indicated in my press conference this morning, this is not merely a document of this government. This is a document that has focused the best minds in Manitoba, in Canada and in North America around the issue of making medicare work into the future and suggesting informed and doable changes to the health care system. It has provided a process of change and evaluation of the results of those changes.

*(1350)

The central theme and focus of this discussion paper is what I have said consistently in questioning throughout this House, that this is a document of balance that puts services to people first and foremost and protecting those services so that individual Manitobans can know that when they need care, the health care system in a reformed method can assure those kinds of care delivery services are there and are available. That means, Sir, some significant shifts, significant shifts that other provinces are undertaking because they do not have the choice and the opportunity that we have in Manitoba of having experts help them to plan the way the system can change, to protect the health status of individual Manitobans.

Mr. Speaker, I do not believe there is any ambiguity whatsoever to this document, to the direction this government is taking and to the

intellectual underpinning that it represents as the best blueprint to preserve medicare in Canada, Sir.

Patient Protection

Ms. Judy Wasylycia-Lels (St. Johns): Again, Mr. Speaker, it is very long on rhetoric and short on details and specifics. The only thing specific is the 240-bed cut at the two teaching hospitals. Interestingly, the minister did what I warned about yesterday and recycled an election promise and transferred those beds to Deer Lodge, Concordia and the Municipal.

I would like to ask the Minister of Health: What guarantees can the minister give, other than his rhetoric, that he is safeguarding patient care throughout the entire implementation process of this document?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, let me deal with the issue of the beds at St. Boniface Hospital and Health Sciences Centre. My honourable friend presented one side of the case, that those beds would be retired from service. What my honourable friend did not provide was the balance under which it would happen, and that some 150 beds in three other institutions would replace those services provided in the 240 beds at the two teaching hospitals, and that budget reallocation from the two teaching hospitals would further reinforce home care and other community-support services to care for the individuals. Not where they are cared for, but how they are cared for is the important equation.

In isolation, Sir, my honourable friend could have created fears, but without having the whole process for decision of the people of Manitoba, you cannot deal with the issue in isolation. Services to the individual are what is being protected.

If my honourable friend wants to know how we feel confident in being able to protect the integrity of service delivery and the care to Manitobans, I refer my honourable friend to page 31 of this document wherein it indicates in the margin briefly: science, research and evaluation per patient protection. We have been able to bring some of the best experts in North America, along with the College of Physicians and Surgeons, the Faculty of Medicine and the MMA to give that kind of assurance over this two-year change.

Consultations

Ms. Judy Wasylycia-Lels (St. Johns): The minister references a very particular concern that we have. That is that this government has targeted beds and has been very specific about bed reduction but has then said it will study and analyze and come up with an objective basis for those figures after the fact.

I would like to know from the minister: Will he ensure that all of the studies and objective analysis that he plans to do, and all of the consultation with health care providers that he will now do, after the fact, that their advice and that evidence will be included in the decision-making process and that this government is prepared to change, adjust and vary its direction according to the findings of people and studies?

Hon. Donald Orchard (Minister of Health): On Tuesday of this week, my colleagues and I made a deliberate decision that we would not pass the Estimates of the Department of Health so that would allow my honourable friend the New Democratic Health critic to come to Estimates and even have the media in attendance so that we can discuss this reform document in its fullest.

Mr. Speaker, I look forward to that discussion this afternoon, because I refer my honourable friend to page 7 of my introductory speaking remarks, which my honourable friend has. It will tell my honourable friend that the evaluation process is key, essential and critical to the reform of the health care system as it applies to our community hospitals.

Mr. Speaker, the issue of the beds at the teaching hospitals has been resolved in that it is not a simple closure of 240 beds. It is a replacement of services by 150 beds in other locations and an enhanced community service delivery mechanism. We know that process can take place without compromising patient care.

* (1355)

Mr. Speaker, the second step in community hospitals is exactly subject to the kind of critical evaluation before any final decisions are made by government, Sir.

Community-Based Services

Ms. Judy Wasylycia-Lels (St. Johns): Throughout the Estimates process, again today with this document and the promise of the minister to carry on in Estimates is very worrisome for us,

because we have not been getting answers. In fact, all we are getting is rhetoric.

Now, today, we are getting really a pizza approach to health care. We are being told that we have a multiple choice. We can choose from all these toppings for this generic concern that we all share. So we are trying to get very specific and some details from this minister, as we have been doing over the last several months and even beyond that.

We want to ask the minister: How do we rationalize the statement he has just made about community-based care in the context of cutbacks to Home Care and in the context of cuts to grants to organizations involved in prevention and community outreach work? Will this minister guarantee the increased funding that this study recommends, the hump in funding that is necessary in order to have community-based services before beds are cut? Will he guarantee that that will be the case and tell us how much—

Mr. Speaker: Order, please. The question has been put.

Hon. Donald Orchard (Minister of Health): Mr. Speaker, I share with you the frustration of that kind of questioning which I have endured for 59.5 hours, Sir. My honourable friend has said there is a cutback in the Home Care program. There is \$7 million more money in the Home Care budget this year to just do exactly what is talked about in this document. My honourable friend persists in hoping that she can have someone in the media carry the cutback philosophy of the New Democratic Party. Sir, you cannot call \$7 million of increased funding to the Continuing Care Program a cutback. That means more service across the length and breadth of Manitoba, Sir.

When we approach this issue of health care reform, I want my honourable friend to carefully consider some of the accusations she will continue to make, because my honourable friend is doing a disservice to her party when she calls a \$7-million increase from \$55 million last year in Home Care to \$62 million of spending this year a cutback. No one in Manitoba believes that, Sir.

Impact on Employment

Ms. Judy Wasylycia-Lels (St. Johns): Mr. Speaker, we only have the pain and hardship that individuals are enduring as a result of changes to

our Home Care program for them to go on. We have a responsibility to bring that forward and get some answers from the minister.

I want to ask the minister, since this document also says that the government does not plan on cutting health care funds but on maintaining and reprioritizing dollars, which means that 250 beds cut at two teaching hospitals should not mean a loss of 500 jobs, can the minister make a guarantee that 500 jobs will not be lost or that any jobs will be lost as a result of these changes—

Mr. Speaker: Order, please. The question has been put.

Hon. Donald Orchard (Minister of Health): Mr. Speaker, what we have tried to present to the people of Manitoba in this reformed document is a simple philosophy that beds do not care for people, that services care for people and services are delivered by professionals. Those services do not have to be delivered at a bed. Anyone with an informed perspective on health care knows that it is the service that is important and the people who carry out that service.

Mr. Speaker, no government in Canada is guaranteeing jobs in health care as the system changes from institution to community care. Sir, I will tell my honourable friend that we will do more than any other province in Canada in assuring that as jobs change from institution to community, there will be retraining and opportunities for new jobs away from institutions in the community. That guarantee cannot be offered in any other province that I am aware of in the country.

Ms. Wasylycia-Lels: Mr. Speaker, I know I will not get any help from my colleagues in the Liberal Party on this issue.

Mr. Speaker: Question, please.

Ms. Wasylycia-Lels: I want to repeat some questions, Mr. Speaker, and tell you that we have been trying to get some answers.

Mr. Speaker: And the question is? Order, please. The honourable member for St. Johns put your question, please.

* (1400)

Implementation

Ms. Judy Wasylycia-Lels (St. Johns): I will ask the minister again what we have been trying to do. What bridge funding is in place to make the transition? What retraining programs are in place?

What redeployment measures are being taken? What guarantees are there—

Mr. Speaker: Order, please.

Hon. Donald Orchard (Minister of Health): Mr. Speaker, my honourable friend wants to know what guarantees, what processes, what is in place today. My honourable friend, by that very question, is wanting to leave the impression that all of these changes are going to happen at 9 a.m. tomorrow. Sir, that is not the case. This is a two-year plan of action, and during that two-year plan of action, experts will come around those very issues.

Mr. Speaker, I simply beg my honourable friend to consider this one simple statement that I made in my introductory remarks: We have concluded that health services do not exist for the convenience of institutions or service providers, they exist to meet the health needs of Manitobans.

That is what this document is designed to protect, enhance and preserve, Sir.

Health Care System Reform Monitoring Process

Mrs. Sharon Carstairs (Leader of the Second Opposition): My questions are to the Minister of Health. I would like to begin with a quote: to keep people healthy, to go to prevention more than curing; to get people in the community to give care in the community; and to close beds. If you are going to spend money for improving the diagnostics in this province, then there is no point in doing that if you do not close beds.

Does it sound like the Minister of Health (Mr. Orchard) today in his remarks? Well, Mr. Speaker, it is a Minister of Health, but it happens to be Larry Desjardins of the NDP in July of 1987.

Mr. Speaker, what the minister has announced today is not fundamentally new. What the minister has announced today has been in the realm of ideas among health experts for some time, and we thank the minister today for finally putting into it a plan.

But we have some, what we think are, quite legitimate concerns that we would like the minister to address. One of our concerns is that this whole process of debating reform has become far too political. The minister himself recognized that on The Journal some weeks ago, when he said it must take on an apolitical tone.

In light of that, will the minister put into place today what we call a health reform monitoring process that

will report to the public every three months in a public venue as to how these changes are taking place and as bed closures occur, what exactly identified services are replacing those closures?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, I wished I had used that quotation myself, because, Sir, that points out that in today's environment, in the 1990s, if all of us are as serious as we say we are about preserving and protecting medicare to provide services to Manitobans and Canadians, then we have to put a little bit of our partisan rhetoric aside. I appreciate the open approach that the second opposition party has brought to the issue.

I just want to deal first with the issue of nonpartisan. As we all know, the western Premiers are meeting in British Columbia today, and this health reform document is now, as I understand it, an item of discussion amongst the western Premiers. I do not need to remind honourable members of the House that two of those Premiers are New Democratic Party Premiers who are meeting seriously around the issues with Premier Filmon, Premier Getty to try to resolve very serious issues confounding the health care system.

Mr. Speaker, I take my honourable friend's suggestion seriously, and I refer my honourable friend to page 31 in terms of establishment of the evaluation system. We intend to have that evaluation system in place six months prior to any of the bed closures at the community hospital level to establish a basis of health status for the citizens of Manitoba prior to any changes being implemented.

The mandate of that group is to report, as we understand it now, in six-month intervals. We think that is as quickly as we can gather valid data. It would be my intention right now to share that data as received, because I think it helps us all to understand how well the process is working or not working and make adjustments in process so that we are sure we can preserve and protect health services as needed.

Mrs. Carstairs: Mr. Speaker, we read with care the section on the evaluation system. But just as the Urban Hospital Council reported through their chairperson directly to the Minister of Health, so too will this evaluation system report to the Minister of Health. We would like a monitoring system that reports to the people.

We are talking of potentially—I underline that because they will not take place according to the minister unless there is proper evaluation—some 715 beds in total. That is a major restructuring of the health care system. There is going to be a sense of unease no matter what we do about that.

If there is a means by which those involved in this process can report directly to the public, not through this Chamber, not through Estimates because we know the political overtones that takes on, but directly to the people, does the minister not believe that would go a long way to assuage some of the natural fear that is going to be created as a result of this announcement?

Mr. Orchard: That is exactly why we have given very serious consideration to the evaluation process. Again, I do not want to get into the number of 715 because that is one side of the equation.

In terms of the announcement of the teaching hospitals, there are 150 beds in three other hospital locations available to be utilized for service delivery. In addition to that, by fall of 1993, we expect to have some 280 additional new personal care home beds to take further pressure off the system. Those are part of the capital planning and development that has been undergone for the last three to four years and not specifically mentioned in here, because this is a document which challenges us to change the way we approach our acute care service delivery.

So, Mr. Speaker, conceptually, I do not have a disagreement in sharing that information because the more open the process can be, the more likely we are for it to succeed and the more likely we are to be able to understand what other choices can be made in the system to correct inadequacies in the reform process and to reinforce the winning processes that we know are available as opportunities for us in preserving medicare in Manitoba and protecting services to Manitobans.

Bridge Funding

Mrs. Sharon Carstairs (Leader of the Second Opposition): Mr. Speaker, I listened very carefully to the minister this morning in response to bridge funding, and he could not ascribe a certain amount of money. My concern is that as you move from one facility to another facility or to community care, the money does not get transferred overnight, just as the patients do not get transferred overnight. There is going to have to be some time in which that new facility in the community is brought up to speed,

either through training of personnel or through actual building and construction of the facilities.

Can the minister now give us some idea of what money he has initially put aside specifically for that bridge funding for the first transfers, until the savings then can be used for additional transfers?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, part of the increased budget requirements for the staffing of the 150 beds at Concordia, Municipals and Deer Lodge are part of the existing hospital funding line. So that in part is there.

Secondly, the replacement of community services is enhanced by \$7 million more in the Continuing Care Program. That is the largest increase that we have had in several years. In addition to that, we have instituted the \$3-million Health Services Improvement Fund, for which changed programs to make better use of our acute-care hospitals can be accessed.

In addition to that, Sir, we have provided some extra \$5 million in the Health Services Development Fund this year, in order to provide the bridge funding which would then be repaid out of the budget of the hospital that has lost its capacity and has not the demand on budget that originally it started before it shifted services and level of care and capacity.

Youth Unemployment Rate Government Initiatives

Mr. Leonard Evans (Brandon East): I only wish this so-called rational process was in effect in Brandon before they laid off people and cut beds. Now they are going to talk about it.

Mr. Speaker, I have a question for the acting Premier of this province.

Youth unemployment in Manitoba is at intolerably high levels leading to growing frustration among our young people and resulting in high social costs. Only the Atlantic region is experiencing higher rates. Youth unemployment for April of this year was 18.1 percent. This is the highest level of unemployment among young people in Manitoba ever recorded.

My question to the acting Premier is: Why does this government refuse to take meaningful action and initiatives to deal with the problem of youth unemployment in Manitoba?

Hon. James Downey (Deputy Premier): Mr. Speaker, I only wish that the member for Brandon East and the government which he sat with was as concerned about the young people, when he was

putting on the backs of those people, annual deficits of \$500 million a year and over \$500 million in interest charges, denying those young people the opportunity today with government funding in meaningful programs.

* (1410)

Let me say, we have responded, Mr. Speaker, in Partners with Youth. We have continued on the funding of programs of last year of CareerStart. We equally are as concerned about employment opportunities for the short term but as well for the long term, something that he was not interested in when he was in government.

Mr. Leonard Evans: We have had five Conservative budgets and five deficits—thanks very much—one-third through 1992 and the employment situation has worsened, it has not improved, Mr. Speaker.

My question to the Deputy Premier (Mr. Downey) is: Exactly how does this government expect its economic policies to translate into jobs for our young people? I ask this because even though agencies such as the Royal Bank have forecast some modest overall growth for 1992, the same agencies are predicting unemployment rates in 1992 to be virtually at the same high levels they were in 1991. Manitoba youth cannot look forward to any relief from the unacceptably high rates of unemployment. How are you going to create these jobs?

Mr. Downey: Mr. Speaker, again what we are not doing is increasing the taxes on the people of Manitoba or implementing payroll taxes like his government did, which denied young people future jobs in this province, which drove them to other jurisdictions because of their policies.

What we believe in, when we see the increased projections for manufacturing in this province, the projections by the different financial organizations of improvements in our economy, we believe, Mr. Speaker, there will be jobs for the people of this province and not continuing to put taxes on the backs of the people who are creating the jobs.

Mr. Leonard Evans: Mr. Speaker, it is time to forget about envelope No. 1. We have had five years of this government and they have to take responsibility for the massive unemployment. The projection by the Royal Bank is for no improvement in unemployment in Manitoba this year. My question is: How are your policies that have been in effect for five budgets going to provide jobs for

youth when they have failed in the past and are failing now? I note that the unemployment rate for young men in particular is 21.8 percent—that is one in five among the young men cannot find work in this province. It is leading to alienation, frustration and could be the basis—

Mr. Speaker: Order, please.

Mr. Downey: I would invite the member to get involved with his party and with the other members of the opposition to support projects that we are embarking upon after they go through the Clean Environment Commission like the Conawapa project that will create some 22,000 to 23,000 person-years of jobs for those young people whom he is so concerned about.

Poverty Rate Prevention Program Co-ordination

Mr. Doug Martindale (Burrows): Mr. Speaker, the Minister of Health (Mr. Orchard) wants to control the health care costs in Manitoba, but the Minister of Finance (Mr. Manness) says that he does not care how many people live below the poverty line, which are totally contradictory policies, since the Centre for Health Policy and Evaluation said that we could do more for health care by eliminating poverty than by any other single policy.

Since the Minister of Health is taking a supposedly new approach in the delivery of health care, will he now agree to co-operate with his colleagues, the Minister of Family Services (Mr. Gilleshammer) and the Minister of Finance, in order to eliminate poverty which would save millions of dollars, increase life expectancy and improve the lives of thousands of Manitobans?

Hon. Donald Orchard (Minister of Health): First of all, I regret that a man of the cloth would put those kinds of words improperly, out of context, as his preamble to a question. Sir, that is shameful, that is shameful.

Point of Order

Mr. Martindale: Mr. Speaker, on a point of order. The Minister of Finance (Mr. Manness) yesterday said: "... household incomes in the province of Manitoba have not increased at the national average." And in the same paragraph, said: "... and I say that is good"—

Mr. Speaker: Order, please. The honourable member does not have a point of order. It is clearly a dispute over the facts.

* * *

Mr. Orchard: That exactly, Sir, confirms what I said. The Minister of Finance (Mr. Manness) did not say he enjoyed Manitobans living below the poverty line. A complete fabrication from a man of the cloth.

Mr. Speaker, my honourable friend has come to a very important realization. The realization is that probably the best thing we can do to improve the health status of Manitobans is to have an environment economically where new jobs are created, investment is made, so that people have meaningful jobs, productive jobs.

The challenge, Sir, is in developing policies which will underpin those investments by the private sector in the province of Manitoba, to harness the natural wealth that we have in our mines, in our forests, in our fields, and in our intelligent Manitobans and young people who have the creative ability to compete on the world market.

You cannot do that, Sir, if you raise taxes, if you borrow away the future of Manitoba as New Democratic Party governments have done in the past. That is why we have contained the deficit, not raised taxes and promoted the advantages of Manitoba for investment and job creation, because we know that is the only key to reduction of poverty, to the increased health status of Manitobans.

Mr. Martindale: Mr. Speaker, the real problem is that there is not one mention of poverty or prevention in this entire document.

Mr. Speaker: Your question is?

Wage Settlements

Mr. Doug Martindale (Burrows): Will the Acting Minister of Finance admit that it is his government's policy to deliberately keep industrial wages down and thereby increase the level of poverty in Manitoba, or will he denounce the policy of his Minister of Finance (Mr. Manness) on behalf of thousands of Manitobans who are working but at wages which are below the poverty line?

Hon. Donald Orchard (Minister of Health): You know, Mr. Speaker, now I see a complete flip-flop of the NDP. Now, they want us to interfere in collective bargaining.

I thought the NDP believed in the union rights to go to the bargaining table and negotiate an agreement. Whatever happened to the former principles and underpinnings of New Democrats? They are here today; they are gone tomorrow.

Social Assistance Employment Creation Programs

Mr. Doug Martindale (Burrows): Will the Acting Minister of Finance tell the people of Manitoba what is his government's plan to counter the appalling increase in unemployment of people who are employable but on social assistance, which in the city of Winnipeg increased 53 percent between November '90 and November '91, or do they have no plan other than the Minister of Finance's plan to hold down wages and restructure the economy and increase unemployment, which he said yesterday was good?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, I want to tell my honourable friend what we are doing. We are supporting a \$56-million investment in Apotex to create hundreds of jobs in the city of Winnipeg in a high-tech industry.

We have a \$10-million investment ongoing in Morden, Manitoba, at 3M to create new employment and new opportunities for export-jobs in my constituency, Sir.

What we are doing is not raising taxes, keeping the deficit under control, and creating economic policies that make sense to investors in the private sector as evidenced by recent investments in the aerospace industry, in the health care industry, in agriculture in the province of Manitoba.

The one thing we will not do is create a Jobs Fund, spend future dollars, create future deficits without one lasting job in place today. The folly of Howard Pawley will not be repeated.

Mr. Speaker: Order, please.

Health Care System Reform Bed Closures

Mr. Gulzar Cheema (The Maples): Mr. Speaker, finally after four years of this government and many years of the previous NDP government, there is a plan to reform the health care system. This plan, if followed properly, will give a new look to the delivery of health care in our province.

Mr. Speaker, many critics are worried about the failure of this plan, and some are worried about the

success of this plan. Each and every Manitoban must know how this action plan will impact their lives. We must have a balanced approach for our health care system.

Mr. Speaker, can the minister tell this House what the impact will be of closing these 240 beds out of St. Boniface and Health Sciences Centre? Can he give us the specific time frame, as well as the areas of specific interest in those hospitals?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, it is my understanding that the Urban Hospital Council will be meeting, I believe, tomorrow to finalize those kinds of specific details within those two institutions.

Now, Mr. Speaker, I want to indicate to my honourable friend that this issue has been discussed at the board level at the Urban Hospital Council level for about six months now. It is believed that there will be, I do not want to be so bold as to say, no impact on the individual patients, but we believe this shift can happen with minimal impact and probably some positive impact on patient care, because we are going to utilize appropriately 150 beds on long-term care capacity, which will provide a higher level of service at Deer Lodge, at municipals, at Concordia than currently is available in the complexities of a teaching hospital acute-care environment.

* (1420)

So, Mr. Speaker, that coupled with the increased support in the Continuing Care Program, we are exceptionally optimistic that there will be very minimal impact in a negative way from this shift, Sir.

Home Care Program

Mr. Gulzar Cheema (The Maples): Mr. Speaker, can the minister tell this House his model for the new community-based care, and also can he reassure this House now they will review the policy of Home Care to meet the changing needs under this new health action plan?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, I cannot take my honourable friend to the specific page, but one of the initiatives that has been identified and one of the weaknesses of the Continuing Care Program is that, for instance, individuals may well appear at emergencies of hospitals when they do not need acute-care hospital bed placement. They need support in their home.

Because our Continuing Care Program, by the nature of its staffing patterns, if this is in the evening, we do not have co-ordinators and service providers available. We are commencing this reform process by putting in place a system whereby, instead of eight-hour access to Continuing Care Program, there will be 16-hour access. We hope that will forestall many improper admissions, of seniors in particular, to acute-care hospitals by the much more rapid provision of home care services by extended hours of operation from eight to 16 hours.

Bridge Funding

Mr. Gulzar Cheema (The Maples): Mr. Speaker, can the minister tell this House about the bridge funding?

Mr. Speaker, the minister has said health services improvement fund is \$3 million, but that fund is for only hospital innovative programs, \$6 million under the Health Services Development Fund, but out of that, \$3 million for the mental health services. Can the minister tell us now, with \$3 million, how can we reform the system?

Mr. Speaker, something has to be done. We need money up front, so that any money saved from the reallocation of the beds must be used to fund bridge money.

Hon. Donald Orchard (Minister of Health): Mr. Speaker, I agree, and the difference—pardon me if it takes an extra moment to explain. The difference between bridge funding in terms of mental health reform and acute-care system reform is the length of time at which you have to invest in the community to achieve real mental health reform, because you have to put in many more support systems in the community.

In the case of acute care, we are not talking about individuals who are homeless. We are talking about individuals who live, in the vast majority, independently. The length of time in which we need to have bridge funding to provide those additional supports, be it through increased home care provision of service or respite care, for instance, in some of our long-term care institutions, the period of time for which we need those services is much shorter, so that a million dollars of bridge funding to help make the change in the acute care system is probably worth \$3 million to \$4 million in the mental health system because we can turn that dollar faster, because we can more quickly provide

services that are needed to underpin and forestall hospital placement in the community.

Pharmaceutical Costs Impact on Seniors

Mr. Conrad Santos (Broadway): Mr. Speaker, a decision based on facts and good ideas, when implemented by responsible action, is one of the greatest forces for social change in the world. Let us go to the facts. A study by the Greenshields organization showed that from 1987 to 1991, the cost of prescription drugs had averaged an increase of 11.4 percent per year.

Fact No. 2, a review of the changes to the Drug Patent Act also showed that drug prices have escalated dramatically to about three or four times the rate of inflation. My question is to the honourable minister responsible for senior citizens. What action will this honourable minister take in order to protect the interests of senior citizens of this province from this ever escalating increases of drug prices?

Hon. Gerald Ducharme (Minister responsible for Seniors): Mr. Speaker, first of all, drug prices in variance throughout the world and Canada is not just for seniors. He has to remember, also, that many seniors and many people have benefited as a result of the research money that has gone back from the profits of drugs throughout the province. A lot of seniors have benefited that way as a result of this research.

Mr. Speaker: The time for Oral Questions has expired.

Introduction of Guest

Mr. Speaker: I would like to draw the attention of all members to the loge to my right where we have with us this afternoon, Mr. Bob Banman, the former member for La Verendrye.

On behalf of all members, I welcome you here this afternoon.

Nonpolitical Statements

Ms. Becky Barrett (Wellington): Mr. Speaker, I wonder if I might have leave to make a nonpolitical statement? [Agreed]

Mr. Speaker, this Sunday, May 17, 1992, will mark the 9th International AIDS Candlelight Memorial and Mobilization in Manitoba. This event on this Sunday night is recognizing a worldwide day of solidarity with people living with AIDS and HIV and is a tribute

to those who have died. Winnipeg will join over 200 cities in 35 countries in making this the world's largest simultaneous show of solidarity with people living with AIDS.

I know that all members of the House will join with myself and members of our caucus in marking this important and tragic event. I hope that many of us will be able to march in solidarity with the people of Winnipeg and Manitoba and throughout the world who are living daily with the effects of this scourge of AIDS. Thank you, Mr. Speaker.

* * *

Ms. Rosann Wowchuk (Swan River): May I have leave to make a nonpolitical statement? [Agreed]

Mr. Speaker, I rise today to show recognition to the board, staff and volunteers of The Swan River Metis Friendship Centre, who last weekend held their First Annual Square Dance Competition. For a first event, it was a very successful. It attracted 21 groups from across Manitoba and Saskatchewan to compete. The group also had a fiddling and jigging competition, but the square dancing competition was indeed the highlight of the event, with the competitors displaying real talent.

I would like to mention the winners; they had three groups competing. The seniors group was the Duck Bay Metis Seniors, and the Peguis Riverside Dancers took second place. In the intermediate group, we had the Lake Manitoba Hawks from Vogar, Manitoba, winning; and the Cody Intermediate Dancers from Kamsack, Saskatchewan. In the juniors—and some of the most interesting and rewarding groups to watch were the juniors—and that again, was the Bayside Dancers from Duck Bay, and the Duck Bay Metis Dancers.

Mr. Speaker, it was a tremendous event. We all know how important it is that we take pride in our culture; for example, the Ukrainians this week are having a celebration. I think that it is important that the Metis people have events to go to and show off their cultures.

I want to pay real tribute to the staff. Their event was so successful that they had to move to a larger building. They started out in The Friendship Centre and ended up moving to the museum, where there was standing room only. So again, I would like to extend my congratulations to the staff, the board and all the volunteers and the competitors. I hope

that, when they have the event next year, it will be just as successful. Thank you, Mr. Speaker.

* * *

Mr. Cliff Evans (Interlake): May I have leave to make a nonpolitical statement? [Agreed]

Mr. Speaker, in the past few months, in the province of Manitoba, we have had activities that have brought in people from across Canada and sporting activities that have become customary throughout Canada: yearly, the Grey Cup, for one, with the support, the hard work that the people of Manitoba and the city of Winnipeg put forth, their efforts to make the event a success; the recent playoffs with the Winnipeg Jets, the support that was shown by our fans there; the Centennial Cup that was held here in Winnipeg this last week and the show of tremendous support from the people of Winnipeg and the people of Manitoba at the Centennial Cup, and represented by two of our finest teams from this province, Winkler Flyers and St. James Canadians.

Mr. Speaker, this week we had the opportunity to focus on another event, another sporting activity, professional sport, that was brought to the province of Manitoba and the city of Winnipeg. The Winnipeg Thunder opened their home opener season just this week as an entry in the World Basketball League, and we would like to take the opportunity here just to exemplify the fact that the support—over 11,000 people attended the first opening home game of the Winnipeg Thunder, and a record was set by the people of Manitoba for a home opener. It was a record in the World Basketball League since its inception in this country.

Mr. Speaker, on behalf of this side of the House, we would like to just say to the people of Manitoba, say to the people of Winnipeg and members from across the way that we here would like to see this continued support for the sporting activities and professional activities that we do have here in this province and that we wish the management and staff, supporters, volunteer people and the players who come from all across North America the very, very best in their future and continued success. Let us go on and cheer them on.

* * *

Ms. Jean Friesen (Wolseley): Could I have leave to make a nonpolitical statement? [Agreed]

Mr. Speaker, I rise to congratulate the congregation of Westminster United Church on their 100th anniversary. It has been a difficult decision to find a day on which to in fact congratulate the church because there have been so many events already during the year, and there are many centennial events focused for the next year. Besides being a year-long celebration and reflection, I think that we should also commemorate the fact that both the province and the city have designated the church as an historic building and in so doing have lent an official, perhaps, recognition of the role of this particular church in the history of Winnipeg.

* (1430)

It is a church, Mr. Speaker, which has a great deal to reflect upon. It is a magnificent Gothic building which was built in 1912 and really represents the rising ambitions of Winnipeg's middle class. It was built in the, new then, district of Wolseley and certainly architecturally has come to dominate the landscape of that part of Wolseley, a community which was built in the region between 1912 and 1914 and in fact is one of the only intact areas of pre-World War I domestic housing in western Canada.

The Westminster United Church emerged from an earlier congregation that began in 1893, and they moved to their present church building on June 16, 1912. Since then they have become a well-known congregation, a very energetic congregation and well known particularly for their musical activities and for their choir. They have also, of course, become familiar to many people in the community for the many musical events which are held for the community in that building. Many of the schools of the area, Kelvin High School, Gordon Bell High School and others, have held their graduation ceremonies there. So many people in fact are connected with the church in a much broader sense. It has been one of the focuses for guides, for cubs, for scouts, for the youth movements of the area and, in fact, during the Depression ran one of the young men's clubs, the Activist Association, it was called, which attempted to keep up the spirits and to make the connection of a wider community for the young men of that period.

In 1925, the church joined the United Church of Canada, one of the many federal institutions of this country, one which I think has played an enormous role in the development of social policy and in the religious life of the entire country.

Westminster United Church has had a series of dedicated ministers and, in particular, although it is awkward to single out some, I think there are three perhaps that should be mentioned as having been very long served in the service of the community—the Reverend Dr. Pitblado from 1893 to 1904, the Reverend David Christie from 1909 to 1929, and more recently, the reverend Reid Vipond from 1963 to 1980. It is a history of long service and one which is well remembered by the community.

From an esthetic perspective the church has, I think, an important role to play in the history of western Canada, particularly its magnificent stained-glass windows and the rose window which is well known to art historians and architectural historians across the country.

Mr. Speaker, at times such as the rededication of a church or the building of a church and the recognition of solemn moments, there are often many speeches which are given. I want to conclude by quoting the sermon of the Reverend Dr. Pitblado, the first minister of Westminster United Church, which he gave as the first minister in 1912. I think it is one that reflects very well the spirit of this community, both in 1990s and as well in the early part of the century.

He said that this building, in all its material grandeur, in all its artistic attractions, in all its luxurious appointments, is only the sign and symbol of great spiritual realities with which we have to do as immortal creatures. This building will, in real purpose, be not what material art has accomplished, but what living souls will make it.

I would like to, on behalf of the community and as the representative of the community in this House, congratulate them on their 100 years of service to Wolseley and to western Canada and to commend the province and the city for their recognition of this contribution.

* (1440)

ORDERS OF THE DAY

Hon. Darren Praznik (Deputy Government House Leader): Mr. Speaker, I would like to make two announcements, or I would like you to please canvass the House. I believe that you will find agreement to have next Tuesday treated as a Monday, and I think you will also find agreement of this House for the Assembly not to sit tomorrow, Friday, the 15th of May.

Mr. Speaker: Is it the will of the House not to sit tomorrow?

Some Honourable Members: Agreed.

Mr. Speaker: That is agreed. Also, is there agreement by the House to have Tuesday and sit Monday hours? Is it the will of the House? That is agreed?

Some Honourable Members: Agreed.

Mr. Speaker: Therefore, Tuesday will be a Monday.

Hon. Darren Praznik (Deputy Government House Leader): Mr. Speaker, I would move, seconded by the Deputy Premier (Mr. Downey), that Mr. Speaker do now leave the Chair and that this House resolve itself into a committee to consider of the Supply to be granted to Her Majesty.

Motion presented.

MATTER OF GRIEVANCE

Mr. Leonard Evans (Brandon East): Mr. Speaker, I use this occasion to exercise my privilege as a member of this House to speak on a grievance that I have with regard to—[interjection] with several grievances, I would add, that I have as a member of this Legislature in connection with health care and in connection with the economy, both, and particularly as they affect specific groups in this province including my own constituency of Brandon East, where they have been treated shamefully by this Minister of Health (Mr. Orchard), where they have been deprived of adequate resources so that there was a \$1.3-million shortfall last year causing a layoff of approximately 30 staff, mainly licensed practical nurses, eliminating what was a wonderful palliative care unit and downsizing it, and in addition eliminating the gynecological ward.

(Mrs. Louise Dacquay, Deputy Speaker, in the Chair)

Where were the plans then? Where was this overall plan for rationalization of health care when the Minister of Health gave the chop, gave the axe to the Brandon General Hospital? I add, Madam Deputy Speaker, that axe is still falling, because the Brandon General administration has indicated that they are again going to be faced with another \$1.3-million shortfall in the revenues that they need to simply maintain last year's services which were cut back over the previous year. So this nonsense about reform and action plan translates into nothing

but a disguise for cutting spending in the field of health.

I know the minister keeps saying, well, we have added millions, but, Madam Deputy Speaker, there is such a thing as inflation in costs in the health care system. This government is not keeping pace with the increased costs in the health care system, and as such the health care institutions of this province are not able to manage and are forced to lay off staff, forced to cut beds, forced to reduce other services. So I say, this is not an action plan for the province of Manitoba. It is supposed to be a rational approach. This plan comes in the midst of bed closures, in the midst of cutting and squeezing by this Minister of Health and this government.

Looking at this document very quickly, Madam Deputy Speaker, and I have not had a chance to study it, but frankly there is nothing new in this particular document. This document is long on problems, long on analysis of the questions that we face in maintaining health care in Manitoba, but very, very short on solutions. As a matter of fact, the so-called action plan is so generalized as to be almost meaningless. The only specifics that we have is that they are closing beds. That we know; that is specific. We know that they have already laid off people, caused people to be laid off in Brandon, and we know they will be causing people to be laid off, and essentially nurses and probably mainly LPNs, licensed practical nurses, in the other major hospitals who are going to be affected.

We have a document here that really has nothing new in it in terms of an analysis of the problems of health care. This is nothing new. We have known long ago that there is a question of how many beds we actually need in Manitoba, and we knew long ago that when you have beds, doctors have some way or other of filling those beds. Yet when our Minister of Health spoke on this matter, Mr. Desjardins, we were severely criticized by the Conservative Party in Manitoba when it was in opposition. When there were any bed closures previously, you would think the end of the world was coming. I say what is good for one side has to be good for another side.

The fact is, Madam Deputy Speaker, we are now facing a massive reduction in some of our major health care institutions, primarily the general hospitals, but also in the case of the Brandon Mental Hospital Centre a complete elimination of that particular institution which has served the mental

health cause well for many a year with the loyal and dedicated staff.

Madam Deputy Speaker, we know that home care is inadequate in this province. The Minister of Health (Mr. Orchard) can shout and scream all he likes about increasing the monies for home care, but we know from our own constituents who tell us that the service is inadequate, that they are being denied one type of service or another, not all over, and indeed it varies.

In some parts of this province you cannot get home service to help clean. No matter how old or how frail you are, the home care will not provide for cleaning service. I know of a couple in my own riding, I believe the lady is 96 years of age and the gentleman is 93 years of age. Obviously they are not wealthy people, they have been scraping by on pensions. They have been blessed with longevity, but they need a little help.

They need a little help from home care to clean the home because the lady at 96 and the gentleman at 93 just do not have strength to do what they would. But there is no help for them under home care, Madam Deputy Speaker, no help whatsoever. It used to be under the home care system in Manitoba that cleaning was provided when deemed necessary, when the conditions require.

* (1450)

Furthermore, Madam Deputy Speaker, we can identify other cases around this province and around the city of Winnipeg and around the city of Brandon where people feel that they are not being given the level of home care that they need. I know of a case of a young woman, a middle-aged woman in her late '30s who was, has been, and is suffering from cancer was released from the Brandon General Hospital. She indeed wanted to live in the community, she indeed was prepared to fight the good fight to survive this deadly cancer that she was afflicted with, but where were the supports?

The support system has been totally inadequate. The lady, because of the therapy that she is taking, the chemotherapy, she has become deaf in the process and as a result she does need some assistance in being able to know when a phone rings. She has to have a special phone, she has to have some kind of a light on her door to indicate someone is at the door, but there is no help for her. She cannot go out to get groceries. There is no help for her to do that. She is supposed to get

physiotherapy. How can she get to the hospital for physiotherapy when there is no money for her to do that? She does not know how to live on her own and yet she wants to. Where are those community supports to enable that poor woman who is in her late '30s suffering from cancer, who does not want to be in the hospital, wants to live at home but cannot because there are insufficient support services from this Minister of Health?

So he can blow all he wants in Question Period. The fact is there are not the services available to enable people to live in the community in dignity and independence that they wish to live. Madam Deputy Speaker, we could go on with many examples, not only in my constituency but in other parts of this province and we say that the home care which was, when it was introduced by the Schreyer administration of which I had an honour to be a member of, was one of the finest home care systems to be found anywhere in North America. I do not think we can say that today. Today the home care system has been eroded. The home care system, in spite of a few more dollars, the home care system is simply not adequate to do the job it should be doing to help people live in their own homes with independence and with dignity.

Madam Deputy Speaker, I say the only thing that we know from the Minister of Health (Mr. Orchard) and his policy so far is that, yes, there are specific beds closing, yes, we have a home care system that is inadequate, and yes, there are layoffs already occurring. I use my own general hospital as an example, where we had 30 people approximately laid off, and the minister talks about retraining them. Well, there is a possibility that maybe three or four will be retrained, but tough luck for the rest of them, tough luck, because they are out of a job. There is simply nothing for them.

I shudder to think of what is going to happen this coming year, because 80 percent of the budget is made up of salaries for health care personnel. Most of those are nurses, and I say that it will be nurses again who will be getting it in the neck. It will be nurses who will be laid off at the Brandon General Hospital.

You know, Madam Deputy Speaker, I wish this Minister of Health—I know he was away—had been in Brandon last month when we had a rally that was organized by a citizen. One citizen put a couple of posters up around the city of Brandon, and we got well over 500 people. Nearly 600 people attended

this rally, because they were so upset and so concerned with what was happening to the Brandon General Hospital. The Minister of Health should have been there. I appreciate there are reasons why he could not be there, but he should have been there to listen and to answer those questions. The people wanted to know. We had cancer patients speaking; we had nurses speaking; we had elderly people speaking; we had a cross section of the people speaking, saying, what are you doing to our institution?

You know, we had like a prairie grass fire. Someone decided to put out a petition regarding this, regarding the closure of the gynecology ward and the reduction in the palliative care ward, and they got over 5,000 signatures in a matter of a couple of weeks. I wish I had that petition with me because I could read off names from every single MLA in the Westman area. I could read off names of people who reside in every single constituency in Westman area, which is the area that the Brandon General Hospital services.

Madam Deputy Speaker, those people are upset. They have not been given a response, and when we bring it into this House, we have got nothing but scoffs and catcalls by the Minister of Health, totally disrespectful of the views of over 5,300 people in Westman who have expressed their very serious concerns about what the minister was doing to the Brandon General Hospital.

You know, Madam Deputy Speaker, we had this disaster occur, and yet we had no plan. We had no great action plan for the quality of health care in Manitoba. So I say the essential driving force of this government is to cut spending or to squeeze spending. That is the essential objective, and they are delighted to do so in the name of health care reform, but we do not get specific health care reform proposals. We get a lot of generalities, a lot of platitudes and it could be written by just about anyone. You did not need to have a big task force to write this type of a report, Madam Deputy Speaker.

We know that there are some major problems that we are facing in this country. Manitoba is not necessarily alone in that, and we recognize that. One of the areas—and this report does not even address it—is the role of the doctor.

There is discussion of the doctor in here all right, but it does not get to the question of the essence of

paying the doctors, of the method of paying doctors. We all have our own personal physicians. We all think highly of them. We have some very fine medical doctors in the province of Manitoba who are doing us service, but the fact is they are operating in a system, a fee-for-service system which therefore causes our health care system to be doctor driven.

It is a system that is driven by doctors who are given the incentive to see patients; perhaps in some instances more often than they should, and possibly to operate in instances which perhaps may not be required. There is that incentive. There is that monetary incentive for doctors to drive the system and, of course, the doctors put people in health care institutions. This is where the costs are. This is where you get the bed utilization.

There was a study done some years back in the city of Minneapolis, Minnesota, where they virtually experimented with what is called a capitation method. The capitation method is, in effect, where you give a doctor a particular salary in relation to his or her number of patients. In other words, to use a very simple example, if one doctor had 500 patients on his register, he or she would get paid accordingly; if another doctor had 1,000 patients on his or her register for their concern and service, then that person would get double what the person with the 500 patients received.

So very simply then, a capitation system is a system whereby doctors are paid in relation to the number of patients that they are responsible for, not the number of times they see those patients, but simply the number that they have on the register that are formally linked to the doctor, and that doctor is required to provide service to them as the need arises.

That capitation experiment in the city of Minneapolis—this was some years ago—resulted in a massive drop, reduction in the demand for beds in that particular hospital in the Minneapolis area. In other words, when you got away from the fee-for-service basis, you did not have the same demand for the hospital beds.

* (1500)

I suggest that is a method that has to be looked at very seriously by this government. I do not see anything—and I must add, however, that I have only looked at this report very cursorily. I did not have much time to read it, because it was only issued a

short time before we came into the House for Question Period. I have not had much chance to study it, but there is nothing here. Although there is reference to the number of physicians in Manitoba, et cetera, there is nothing in here that suggests that we go to a capitation system.

Now if this report is part of what the action plan suggested then I would say, well, okay. Now you are talking action not talking platitudes of general things that we should do, such as you know evaluating a restructured system, developing a health information strategy, implementing technology assessment, some of these more general things which have little meaning to a lot of people and which tend to be rather fluff and feathers, to tell you the truth, Madam Deputy Speaker.

If we directed our attention to what actually is driving the costs in the health care system and try to come up with a solution, then I say we are now talking about action. So a capitation is one—it is nothing new—system that we could explore and perhaps follow to keep costs down.

The other, of course, is to have doctors on a straight salary. You know, that is not as revolutionary sounding as it once was, because what is happening in the province of Manitoba with the walk-in clinics, Madam Deputy Speaker, you have a lot of young doctors who are being hired by older doctors, by established doctors, who pool together, invest in a walk-in clinic and set up this medical facility. They set up this walk-in medical facility, and the doctors—lo and behold—in the facilities are on salaries. So you have a situation where doctors in Manitoba are hiring other doctors and putting them on a salary.

Of course, if doctors work in institutions, in hospitals, for instance, of course, then they are usually on a salary anyway. Certainly, the doctors at Brandon Mental Health Centre are on a salary—or as the Selkirk Centre. So the fact is that this is something concrete. This is something very important. This to me is the nub of the problem, yet I do not see that being addressed in this particular report.

Madam Deputy Speaker, another important area for reform would be to indeed come forward with an action plan for prevention. Yet, again, we have some generalities here, but nothing very concrete, nothing specific, nothing you can get your teeth into to understand as to how this government is going to

enhance prevention among our society, among our citizens. Who can question? I mean, this is to say we should enhance prevention to improve our health care system, to reform our health care system. Who can debate that? Who can argue against that?

Everyone agrees with that. We have talked about that for decades. Fortunately, people are becoming more health conscious, not only in cutting out smoking—the number of people smoking has been reduced drastically, and I would suggest that is one major area of prevention. Secondly, people are becoming more conscious of getting adequate exercise and more and more do you see people walking, running, jogging, more and more people joining fitness centres, more and more seniors going to malls where they walk and so on, and more and more information in our magazines, in our papers and in journals and so on, and people are becoming more health conscious.

Certainly, if you cut out smoking, if you begin to get adequate exercise and, thirdly, if you eat right, that is, if you cut out fats, you cut out excess consumption of sugar, these items, very simple. It may be difficult to bring about, that is to cut the amount of fat that you consume or to cut out the amount of sugar you consume, but those are simple but basic and fundamental to improving health care. So we are, as a society, engaged I hope in prevention and governments can do more by disseminating information and giving particular incentives to people and to groups and so on. A lot can be done, but again, there is no specific action plan to enhance prevention in this province, to enhance prevention of disease in this province.

Another area is community health clinics. There is some reference to co-operating with health clinics, but there is nothing in here with regard to bringing about more community health clinics. Let us get in for an expansion of community health clinics, co-operative types, nonprofit types, whatever kind that you like, or some associated with hospitals.

There is a great deal that can be done in this respect, yet all we have in here is developing a new role for community health centres broadening the partnership, but where do we see the specifics of putting more money into community health clinics, which can be leaders in programs of prevention, which can perhaps hire doctors on a capitation system or on a straight salary system? There is

something that can be done and should be done. Reference is made in the plan of the Minister of Health (Mr. Orchard), but there are no specifics, and there is no commitment to putting dollars into this.

Further, Madam Deputy Speaker, there is nothing in here about the standards of health care that we should be achieving. What are our objectives in terms of health care standards? What do we insist upon getting from the acute-care hospitals, and what do we expect from community clinics? What do we expect from our nursing homes?

I can say, as a member of the former government, I am very proud, and I can only speak of my own constituency because I do not have the knowledge of personal care home development around the province, but I know, in my own constituency of Brandon East, we spent in the Pawley government approximately \$18 million in improving and upgrading personal care beds in that city. We built a \$10-million expansion to Fairview. We built the new Rideau Park Personal Care Home with 100 beds, and we built the Dinsdale Personal Care Home with 60 or 65 beds.

Yes, we eliminated some old, inadequate firetraps, as a matter of fact, in the process, but I would not even call those personal care homes, at least in terms of their physical structure. Madam Deputy Speaker, we did these, and I would say, on account of that, Brandon in the Westman area, in that part of the province, is well endowed with personal care home beds.

Again, if we want to take the pressure off of the acute-care hospitals, then we need more personal home care beds and personal home care. We have talked about this for a long, long time, and I say again, reference to that in here is nothing new and nothing by way of action unless there is a commitment from the government to say, (a), (b), (c), (d), (e), this is what we are going to do in expanding and improving personal care home service.

So, Madam Deputy Speaker, we are disappointed in this particular document of the Minister of Health (Mr. Orchard), very disappointed indeed. In fact, some of it is a repetition of a report he put out not long ago; namely, the report he put out with regard to mental health care. There is specific reference in this document to mental illness and the problems of coping with mental illness.

Well, Madam Deputy Speaker, this was all discussed a couple of months ago. In fact, the Minister of Health came out to the city of Brandon and spoke about mental health reform, and people were enthralled about the government's intention to make mental health reforms. Then, of course, as part of the reform, he announced we were going to close down the Brandon Mental Health Centre, put it out of existence.

*(1510)

While most people agree with deinstitutionalization, the problem always arises in the inability or lack of commitment by the government of the day to put in place alternative health care, alternative community health care for the mentally ill. I had to laugh, while the minister is in Brandon bragging about how he is going to bring about deinstitutionalization and reform the mental health system in the province, at the same time, within a matter of days, we hear of the Rambler motel project having to close down because of lack of government funding.

The Rambler motel project was just that. It was an opportunity for community living by people who are mentally ill or post-mentally ill, and who want to live or who can be placed in a group home or in some residence outside of the main institution, outside of BMHC in this case. Yet here they were, on a sort of a pilot project basis. For all the fine words, the minister, about deinstitutionalization, there was not enough money available for the Rambler motel project to carry on.

So I say, the Minister of Health's (Mr. Orchard) words are very hollow indeed, very hollow indeed, and virtually mean nothing.

Another example in Brandon, Arm Industries, which is a facility that has been providing training for many a year for people who are mentally deficient, mentally handicapped, mentally ill. Here again, the budgeting was such that they have had to make changes there. Here again, you ask yourself, well, what is this business of helping people live in the community when the government is squeezing and cutting back on monies for just those types of projects, projects to help people be employed in the community who have had mental problems, or people to live in some dignity either in a group home or in a private home? So we see, on the one hand, the minister talks a good line; on the other hand, there is no money. In fact, on the other hand, he is going in the opposite direction. So, Madam Deputy

Speaker, in this whole area, we see nothing new whatsoever in this particular report.

The reference to the number of physicians per population, again, is nothing new. The fact that Winnipeg has more physicians per thousand than any other region of the province, again, is nothing new. In fact, you can read those in the annual reports of the Department of Health and the annual reports of the Manitoba Health Services Commission. The numbers are there for anyone who chooses to read them.

But what I object, on the part of this Minister of Health (Mr. Orchard) and his high-handed fashion of running that department and his treatment of people in this province including people who go through the trouble of signing petitions and go to meetings and are totally ignored by this Minister of Health (Mr. Orchard), is his secrecy.

This government talked about being open at one time—we want open government. Well, this government is so open that it refuses to give the opposition and members of this Legislature information on operating costs of hospitals. You know, this is public money, and for the life of me I do not see why the members of this Legislature should not be able to obtain, not just a generalized annual report of a hospital in this province, but a report showing the revenues and expenditures so that not only the MLAs who represent the people in their constituencies, but also individuals and groups can see just how much money is being spent for administration, let us say, as opposed to service in the various hospitals.

The public good would be served by opening up the books and allowing the moths to come out, dusting them off, and allowing the public to scrutinize these reports. Yet this minister refuses to provide this information. What about open government? What kind of response is that? It is a simple request.

I must say in this country and in this province we are very secretive. We do not want to give out any information and that goes for the senior bureaucracy as well. They do not want to give out the information, because they are afraid they are going to be criticized once the information gets in the hands of the public or members of the opposition in the Legislature.

This does the cause of health care reform no good when we in this Legislature who are duly

representing our constituents, who were duly elected, ask for information and are, time after time, being refused that information by the Minister of Health who takes just such a highhanded, bullying approach that it is shameful. He is just a bully most of the time when he answers the question. He intimidates people rather than giving them answers. Rather than giving answers, he goes on a tirade, he will not give information.

Madam Deputy Speaker, could you tell me how much time I have left?

Madam Deputy Speaker: Nine minutes.

Mr. Leonard Evans: Nine minutes. Madam Deputy Speaker, we on this side have a lot to grieve with the performance of this Minister of Health. We do have indeed. In fact, if I had my way I would not have reduced his salary to \$50, I would have reduced it to 50 cents. I tell you, he is not very popular with the people in my riding right now. He should not show his face in the city of Brandon right now, because the people there are very, very upset with the highhanded manner with which he has treated the Brandon General Hospital, highhanded manner with which he has treated the people of Westman and the Brandon General Hospital, gives them the axe once, now again this year. Then he comes out with a report saying he is talking about reform.

All we know in Brandon is that there is inadequate funding from the Manitoba government and layoffs have occurred, beds have been closed and that is going to happen again this year. What relationship there is between what is happening there and in this report is beyond me.

Madam Deputy Speaker, I also wanted to talk about the economic situation in this province because I have a great concern about that as well. You know, there is a relationship between our economic situation and health care, because there is no question that when we have intolerable levels of unemployment as we have today, this translates into poverty, this translates into disease, this translates into social unrest. There is a social cost involved in unemployment that you cannot measure. It is out there and members of this Legislature, and I include myself, cannot imagine the grief that is caused by the fact that we are now suffering this high level of unemployment that is being experienced in this province.

In fact, using the last month available, April, the number of jobs has been reduced by 17,000. Those 17,000 jobs were all full-time jobs. We did not lose any part-time jobs, we lost just full-time jobs.

The labour force has shrunk by 14,000. The members opposite do not like to hear this, but the labour force has shrunk by 14,000, and if it had not shrunk, this rate of unemployment of 10.4 percent actually would be even higher. It is 9.6 percent seasonally adjusted, but if the labour force had not shrunk, had not become discouraged and ceased looking for work, our rate of unemployment would be higher.

* (1520)

Madam Deputy Speaker, that is revealed when you look at the participation rates. The participation rate tends to be pretty steady, but now it has deteriorated from 66.8 percent last April to 64.9 percent this April. When you look around the province, you get very disturbed when you look in the city of Winnipeg where 60 percent-plus of the people of this province reside, and you have an unemployment rate of 12.2 percent. The unemployment rate in Winnipeg is higher than in Toronto, where they have had social unrest recently, some of it due to racism, but obviously due to unemployment in that city. Our unemployment in Winnipeg is higher than the city of Toronto. Toronto is 11.6 percent last month; Winnipeg was 12.2 percent.

In fact, Madam Deputy Speaker, only two cities in Canada have worse rates than the city of Winnipeg, and that is St. John's, Newfoundland, of all places, St. John's, Newfoundland, and the city of Montreal. Those are the only two cities that have higher rates. The rest of the cities in this country have lower rates than Winnipeg.

I say, when you look at the youth and look at those figures, you see an even more serious and disturbing situation, and particularly when you look at the young males, the young men who are looking for work today, one out of five cannot find work. They are looking; they have been surveyed; yes, they have told the survey people they are looking for work; they want to work. But one out of five, over 20 percent—I believe it is 21.8 percent—cannot find work today. I say that does translate into a lot of frustration, a lot of anger, a lot of disillusionment, and will and could result in social unrest. There is no question it results in social distress, a lot of which is hidden and cannot be seen by us.

There is no hope for this year. While the government across the way, the Minister of Finance (Mr. Manness) in particular, likes to brag about how the economic forecasting agencies such as the banks are now predicting an increase in economic growth in this coming year, what the minister fails to point out is that the banks themselves have indicated that there is no improvement in the unemployment rate. The unemployment rate for 1992 is forecast by the Royal Bank to be virtually the same as it was in 1991, and 1991 had a very high rate of 8.8 percent, the highest we have had in over a decade. This year it is predicted to be 8.7 percent, virtually the same as last year. So where is this improvement that is going to take place this year?

The Minister of Finance says, be patient. We have been waiting through five budgets, Madam Deputy Speaker. We are patient, but our patience, not only ours, but the people of Manitoba and especially the young people, is running out. When you look at other figures, there is nothing very good, nothing very cheerful about them. Even in manufacturing, which the Minister of Industry (Mr. Stefanson) likes to talk about in glowing terms, we have had a drop from 56,000 last April down to 51,000 men and women working in manufacturing this year. This is the lowest—I have gone back a decade—we have had in 10 years. There is no development in manufacturing, it is just eroding. This is one industry sector that we want to see develop, we want to encourage. But where is it going? It is going nowhere.

What is so disturbing, Madam Deputy Speaker, is that the Royal Bank forecasts that investment—and I am not talking about residential investment, I am talking about nonresidential or business investment—is going to go down in 1992 by 3.2 percent. A 3.2 percent decrease in the level from last year, and we know last year was not very good. What does that mean? It means that you are destroying the basis of real economic growth.

Similarly, if you look at population, the census figures came out recently and showed that Manitoba's population was slowing down. In fact, if you look at what is happening in Winnipeg and look at the province as a whole, you see that there is depopulation occurring outside of the Winnipeg area. This is something that we all have to regret. Indeed, even the city of Brandon has declined in population between 1991 and 1986.

Madam Deputy Speaker, I know I have run out of time. I simply wanted to put on the record my concern about the total inadequacy of the Minister of Health and his so-called reform package and the attitude of the minister as well, not only to members of the opposition, but to the public, including the public in Westman, those 5,000 people who signed the petition. He virtually gave them the back of his hand in terms of his response to that particular petition. I am very upset about that, and I grieve on their behalf in this Legislature.

Likewise, I am very upset and concerned about the economic disperformance, the lack of performance by this government and the inadequate, intolerably high level of unemployment we have had to suffer and are going to suffer until these policies that we have across the way change, but I have no hope of that occurring.

Thank you very much, Madam Deputy Speaker.

* * *

Mr. Doug Martindale (Burrows): Madam Deputy Speaker, I rise to use my right under Rule 26.1 to express a grievance.

Madam Deputy Speaker: Order, please.

Point of Order

Hon. Darren Praznik (Deputy Government House Leader): Madam Deputy Speaker, I in no way would want to interfere in the right of the member to exercise his grievance, but it has been fairly obvious this afternoon to members on this side that members of the opposition are wanting to avoid going into Estimates debate.

I believe, if you canvass the House on this side at least, there would be a willingness to allow the member to do his grievance during the private members' hour so we could get into the debate. Perhaps members of the Liberal Party would concur if members would like to allow that to take place. He could have the whole hour for his grievance from 5 to 6 p.m., and then we could get into the Estimates debate, unless, of course, members opposite are afraid to do so.

Mr. Kevin Lamoureux (Second Opposition House Leader): Madam Deputy Speaker, I just want to concur with the minister, the deputy government House leader (Mr. Praznik) that we feel, because of the major announcement that has been made earlier today, that it would be most appropriate to go into the Estimates to allow both opposition

critics an opportunity to ask some questions, and in fact, we would be in favour of waiving private members' hour for the day.

Mr. Leonard Evans: Any member of the Legislature can get up on a point of order at any time, not just House leaders or deputy House leaders.

I believe the deputy House leader really did not have a point of order. It is not a point of order. I would point out, Madam Deputy Speaker, that it is a matter of right of any member to engage in a grievance which has to be—

Some Honourable Members: Oh, oh.

An Honourable Member: Just ask to canvass the House

Madam Deputy Speaker: Order, please. On the point of order, there was no point of order, but there was a request by the deputy government House leader and an agreement by the honourable member for Inkster (Mr. Lamoureux) to canvass the House. Is there leave to permit the honourable member for Burrows to have his one hour for his grievance during private members' hour? Is there leave?

An Honourable Member: No.

Madam Deputy Speaker: No? Okay.

Mr. Lamoureux: It is still a point of order. Maybe if you canvass the House if there would be leave to waive private members' hour.

Madam Deputy Speaker: Is there leave to waive private members' hour? Leave? No?

Mr. Praznik: Yes, Madam Deputy Speaker, I believe the member for Inkster (Mr. Lamoureux), if I may just clarify this—

Some Honourable Members: Oh, oh.

Madam Deputy Speaker: Order, please. I am experiencing great difficulty in hearing the point that the deputy House leader is trying to put on the record.

Mr. Praznik: Madam Deputy Speaker, I believe the request on this side of the House, we would be more than prepared to grant leave to waive private members' for the Committee of Supply to hear Estimates, and we would be prepared to grant leave for that which would accommodate the member for Burrows.

Some Honourable Members: Oh, oh.

Madam Deputy Speaker: Order, please. That has already been dealt with and leave has been denied.

Mr. Martindale: On the House Business that the acting House leader for the government raised—

Some Honourable Members: Oh, oh.

Madam Deputy Speaker: Order, please. The honourable member for Burrows is speaking on the House Business?

Mr. Martindale: Just briefly on House business, we could have been out of Estimates the other day. We are planning to go back into Estimates this afternoon.

* (1530)

MATTER OF GRIEVANCE

Mr. Doug Martindale (Burrows): Now, I would like to express my grievance.

I would like to use this opportunity to talk about the increasing problem of poverty, the increasing caseload of people on social assistance and the horrendous number of people who are unemployed in the province of Manitoba. I would also like to talk about the inadequate policies of this government in dealing with all three of those problems.

It was Thucydides who said, "and place the real disgrace of poverty not in owning to the fact but in declining to struggle against it." This wise pronouncement by Thucydides, who lived approximately from 471 to 400 B.C., I believe is very applicable to the situation that we find ourselves in.

The government has not really denied the statistics that have been put forward by members on our side of the House, but their disgrace is in not having a plan to deal with it, although, Madam Deputy Speaker, I would say that is not entirely true, because the Minister of Finance (Mr. Manness) yesterday did give us his plan. His plan is to go along with restructuring the economy. Presumably he means restructuring the Canadian economy so that it is integrated with the American economy, and he says if that means more unemployment, then that is what is going to happen in the short term, and prosperity is going to come in 1993 or 1994, and he said that what is happening now is good. Those are his remarks which we have available now from yesterday's Question Period.

Madam Deputy Speaker, we on this side disagree, because we believe that we need to do more to help Manitobans who are unemployed now

and not wait until the economy recovers. In fact, I think this is central to the debate that is going on in the public in the province of Manitoba. The government is saying that the main issue is keeping down taxes, and they keep reminding people of how many budgets they have had in which they do not increase taxes. But when you knock on the doorsteps the other view is apparent, and the other view is the one we are presenting, that is, that the government should take a proactive approach in creating jobs and reducing the level of unemployment.

We believe that there is a direct relationship between unemployment and poverty. In fact, the approach of our party is that the first way to attack poverty is through job creation, that the best way to lift people out of poverty is to give them jobs or to create jobs or to provide the right economic climate in Manitoba, so that people who want to work can get back to work. But not just the right economic climate, because the Premier (Mr. Filmon) and the Minister of Finance (Mr. Manness) and other ministers in the government like to talk about the climate frequently. They talk about creating business confidence, but we believe that is not enough.

We believe that there should be a co-operative approach. On numerous occasions the Leader of our party has requested that the Premier call together the representatives from all three parties in the Legislature to come up with an economic strategy for Manitoba on a co-operative basis. The Premier has never agreed to that approach. We have also said that the government should take the initiative in getting labour representatives and business representatives and the government together in a co-operative approach to brainstorm and come up with a strategy on getting the economy of Manitoba moving again. This suggestion has also been declined.

I would also like today to talk about many of the specific problems and issues facing people on social assistance. The Minister of Family Services (Mr. Gilleshammer) frequently puts on record the record of the New Democratic Party when we were in office, but he does not always put on the record all of the statistics. Instead, he quotes them selectively. We believe that this government should do what the NDP government did. In the first two years of office they increased social assistance rates substantially in order to make up for the Lyon

government years. For example, on January 1, 1982, they increased social assistance rates by over 16 percent; January 1, 1983, they increased rates by over 10 percent in order to help people to catch up.

I have repeatedly suggested that the government do something about the work incentive. In fact, I have talked informally with the Minister of Family Services (Mr. Gilleshammer) about this. I have suggested that they do some research on this and find out what the cost would be. When I talk to people about social assistance, one of the most promising areas for public support is the work incentive because people believe that people should be working and that those who are on social assistance should be encouraged to work, that they should be encouraged to supplement their income.

There is a program now, the provincial social allowances program that allows for this, and it is called the work incentive, but right now the levels are totally inadequate. The levels are \$50 a month. You can be on social assistance. You can earn more than that, but anything over \$50 a month is deducted from your social allowance cheque dollar for dollar. In effect, a 100 percent tax rate. So we recommend that be increased. In fact, in the city of Winnipeg, I believe it is in the area of \$125 a month. So the provincial work incentive has fallen behind, mainly because it has not been increased for many, many years. Once again I would like to put on the record that we are still waiting for the Minister of Finance (Mr. Manness) to come back to us with some costs of this item. What would the cost be to the social assistance system?

Madam Deputy Speaker, there are so many issues and problems for people on social assistance I hardly know where to start, but frequently I hear from people in the community. I hear the most regularly from the staff at St. Matthew's-Maryland Community Ministry, that is, from Karen Tjaden, Genny Funk-Unrau, and Rosemarie Forbes, who write to me on a monthly basis, and I commend them for doing this. They are the best lobbyists that we have, and I presume that they write to the Minister of Family Services (Mr. Gilleshammer) and to the Liberal critic as well.

I have in front of me their letter of April 14, 1992, in which they give us some statistics on the number of people that they are feeding from their emergency food supplies, supplied by Winnipeg Harvest food bank. In March, 244 households received food,

representing 344 adults and 329 children, and they say, this is the largest number recorded of children assisted by our program. In addition to this, we also gave emergency food to 21 households as well as referring another 78 households to other food programs.

These staff work on a daily basis with families who find that they cannot survive on the provincial social assistance budget, whether it is on city assistance or on provincial assistance. So they go to emergency outlets such as St. Matthew's-Maryland Community Ministry. That is not the only place that they go. They also go to Gospel Mennonite Church on Nassau Street. They go to North End Community Ministry on Stella Avenue. They go to St. Stephen's Broadway Church. They go to West Broadway Community Ministry, and, of course, as we know hundreds of people go to, now, three different locations of Agape Table soup kitchen.

They meet with the Minister of Family Services (Mr. Gilleshammer). They belong to an organization called Inner City Ministries Food Working Group and they co-operate to raise issues with the Minister of Family Services. When they met with the minister on February 11, 1992, they raised numerous issues and recommendations.

They recommended increasing the minimum wage so that people can live on what they earn, which is an incentive to get off welfare. Unfortunately, this government has not increased the minimum wage in keeping with the cost of living. That is a serious problem for people who are poor but working and on minimum wage. The Minister of Labour (Mr. Praznik) is the one who decides when and by how much the minimum wage will be increased.

We know that at one time people working for minimum wage, earned, I think it was, approximately 93 percent of the poverty line. That has fallen over the years, till now, I believe, people on minimum wage earn about 46 percent of the poverty line. So if this government and this minister want to do something to help working poor people, here is something very concrete that he can do, and that is to increase the minimum wage, increase it annually, increase it enough that people can meet their basic needs.

In fact, I would recommend that the minister might want to depoliticize this issue. He might want to say, okay, we are going to raise it by a formula. The

formula might be similar to what, I believe, is in place in the province of Quebec, where, I believe, it is tied to the average industrial wage. In fact, I think, it is half of the average industrial wage.

The minister might want to make a substantial increase in one year; after that, tie it to a formula, very much like our salaries here. We do not get criticized by the public for our salaries in the Legislature of Manitoba because our salary increases are tied to a formula based on the Consumer Price Index and other cost factors. So we know that it is out of our control; it is not in our hands. It goes up every year by a formula.

So I would recommend this to the Minister of Labour (Mr. Praznik), if he and his government want to do something to improve the lives of people who are working but poor—that is a substantially large number of people. In fact, it is an overlooked and almost forgotten group of people. They do not get the kind of media coverage that poor people on social assistance get, because they do not want people to know that they are poor. They do not go looking for interviews. They do not have self-help organizations. They are probably not part of organizations like MAPO that lobby mainly on behalf of people on social assistance. So there is a concrete recommendation for this Minister of Labour (Mr. Praznik).

Other recommendations from the Inner City Ministries Food Working Group, they recommend: provide adequate child care supplements and medical expenses to encourage people to work. We know that there is a direct correlation between the affordability and availability of child care and people entering the work force. We know that many women, especially, want to enter the work force, and they find it difficult or impossible to do because of inadequate child care support.

* (1540)

The Food Working Group recommends that the housing allowance portion of social assistance be increased. This is something that has been a problem for a considerable period of time and needs to be looked at. I think the recommendations that the different organizations in the community have put forward are good ones. They have said, we need to increase the housing portion so that people are not taking money for housing, money for rent out of discretionary items. Discretionary items are food, personal needs and household needs. That is the

only discretionary money that people have on social assistance.

The problem is, what will the effect be on raising housing supplements substantially? Would people move up in the housing market and buy better quality housing, or would that money go to landlords, including unscrupulous slum landlords, and deny people the opportunity to buy better quality accommodation?

We have a system of rent regulation in place in this province. So it should be possible to give people more money, and have them move up in the housing market. But we know that many landlords charge the maximum.

In fact, I was made aware of an example where landlords are charging different amounts of money in the same rooming house, depending on whether people are on provincial assistance or city assistance. Two different amounts, one higher than the other for the same kind of accommodation. [interjection] Well, I have very good sources. I talk regularly to staff in city social assistance, and I am sure that they can confirm this for me. It is regrettable. It should not be allowed to happen under our current system, but landlords view this as a guaranteed source of income, because, in many cases, the payments are made directly from either provincial or city social assistance to the landlord.

So there is a problem. I do not think we can just increase the housing allowance without looking at whether or not people will be able to purchase better quality housing. The food working group recommends: create jobs, job entry and job training for those who can work. Our party has been very critical of the provincial government for not doing enough in terms of job creation programs.

We believe that people out there want to work. We believe that they need to be retrained from time to time. The era of people training for one job and staying in that job for their entire lifetime is over. People need to be trained and retrained and retrained as the economy changes, and as demands for different kinds of skills change from time to time.

We know that many of these programs are effective. I remember when I was working on social assistance issues, the then Minister of Family Services, at that time it was economic security, the member for Brandon East (Mr. Leonard Evans),

invited myself and others to go on a tour of the Human Resources Opportunity Centre.

One of the questions that we asked was, how many people who graduate from this centre are still employed after graduation? The statistic that we were given was that six months after the training program, 62 percent of the people who were graduated from their training program were still gainfully employed.

So we know that these programs are and can be successful. We believe it is to the benefit, not only of the individuals, but of society and of the taxpayers of Manitoba. When people are working they are paying taxes. In fact, that is one of the reasons why I and many Manitobans disagree with the philosophy of this government. Because people who are working are paying taxes instead of sitting at home and collecting social assistance.

Numerous times in the last few months I have had people say, I would rather see the government spend the money on job training and on job creation than on paying people to sit home and do nothing. The people who are at home would much rather be out working and contributing to society and contributing to their families and even contributing to the tax system.

They would willingly pay taxes if they had a job. I believe that the government has an important role to play in doing something about it, in providing the job training programs and retraining programs.

Instead, what we see is the government cutting out some of these programs, like closing the Human Resources Opportunity Centre in Selkirk. We have heard our member for Selkirk (Mr. Dewar) speak on that numerous times.

One of the things that is frequently overlooked when talking about poverty and unemployment is the true costs, and in many cases, the hidden costs, the human costs of poverty and unemployment, because stories in the media tend to focus on statistics. I can tell you some of the human costs, and many of my colleagues can too. In fact, I am sure that members on the government side could as well.

I have had two constituents tell me that they believe that marriage relationships broke up as a result of one of the income earners becoming unemployed. So that is one of the tragedies of high unemployment. That is one of the tragedies of people living in poverty, the human cost and the cost

to individuals and their marriage when a marriage breaks up. In these two cases, my constituents said it was due to becoming unemployed.

The Minister of Education and Training (Mrs. Vodrey) will be interested to hear about the effects of poverty on education in an article written by Benjamin Levin of the Faculty of Education at the University of Manitoba. This article is printed in *Specifics* for Winter 1991-92, published by the Social Planning Council of Winnipeg. So here is what research says about the effects of poverty in education.

He says, the evidence in Canadian classrooms is overwhelming. Students from economically poor backgrounds are substantially less likely to be successful in school, significantly more likely to be below grade level in academic skills, more likely to be kept back a grade in elementary school, more likely to be placed in special education classes, more likely to be in lower-track programs in secondary schools. So there is a cost to poverty. The cost is children repeating grades in school. The cost is in special education programs. The cost is in children not being as successful in school.

This was also documented in an all-party report of the House of Commons called *Children in Poverty: Towards a Better Future*, by the Standing Senate Committee on Social Affairs, Science and Technology. In this document, they actually have put a dollar figure to the cost of children living in poverty, the cost to society. They measure those costs, not in hundreds of dollars or thousands of dollars or millions of dollars, but in billions of dollars. I think the problem is that governments do not want to spend money now in order to save money later, but the axiom is, spending less money now means spending a lot more money later.

The *Children in Poverty* report got a lot of media attention when it was released. One of the headlines said: Spending not cure for child poverty, minister claims. Regrettably, the minister that this report went to was not in agreement with all of the recommendations of this all-party committee. This report and other reports like it have numerous recommendations on how to end the problem of child poverty, how to reduce the problem of child poverty.

Here are recommendations on child poverty—*Canada's Children: Investing in our Future*. This report is the result of two years of study

by the Sub-Committee on Poverty of the Health & Welfare, Social Affairs, Seniors and Status of Women Committee of the House of Commons. It was a result of a motion that said that this House expressed its concern for the more than one million Canadian children currently living in poverty, and seek to achieve the goal of eliminating poverty among Canadian children by the year 2000.

That was a motion passed, I believe, unanimously in the House of Commons. Regrettably, in recent weeks, we have seen the federal minister responsible say, we cannot achieve that goal by the year 2000. He said, we could not politically vote against a motion like that when it was introduced, but now we have realized that we cannot achieve that goal, which is very sad indeed.

* (1550)

For example, the committee unanimously agreed that statistics on infant mortality need to be substantially lowered, and they recommend a program of a nutritional allowance of \$45 per month, 100 percent paid for by the federal government, payable to women in a healthy babies program, a small cost for a long-term benefit and an inducement to provinces and women to participate.

They have costs in here. The cost of care of a low-birth-weight baby is estimated at \$60,000 to \$100,000. I can tell you some anecdotal stories that reinforce this. I know some nurses at St. Boniface and other hospitals in Winnipeg who call some of the babies in their care \$30,000 babies. The reason is that they are born premature and there are horrendous costs to keeping these children alive and healthy. This federal government report is saying that if you spend money on the mothers before the baby is born that it saves huge amounts of money after birth.

The report talks about prevention and intervention. The subcommittee recommends that both federal and provincial governments target funds for nursery programs serving high-risk communities. These programs have been shown to enhance both the education and health status of children as well as improving parenting skills.

They have a recommendation about housing. The majority of the committee recommends measures to increase social housing and improve the quality in existing subsidized housing. Instead, what is the federal government doing? They have completely cut out the co-op housing program, and

they are substantially reducing funding to social housing.

They have a recommendation about welfare. The report provides evidence that eight of 10 provinces are not providing welfare assistance that covers the basic needs of food, shelter, clothing and essential items. I would be willing to bet that Manitoba is one of those eight provinces.

The committee has recommendations on the working poor, similar to the recommendation I made to the provincial Minister of Labour (Mr. Praznik). The subcommittee recommends that the Minister of Labour study the financial impact of raising the federal minimum wage from \$4 an hour. I believe this report was tabled in December of '91.

The federal minimum is \$1 an hour lower than the provincial minimum wage in Manitoba, and the Manitoba minimum wage is inadequate. They recommend a level which would ensure the annual income of an individual working full time for a full year that would equal the Statistics Canada low-income cut-off for a single person residing in the largest urban area. If the minimum wage was raised to the poverty line, it would mean a substantial increase in the minimum wage, but it would lift large numbers of people out of poverty.

The subcommittee unanimously recommends the study of a guaranteed earned income supplement that would ensure that the income received from employment would be greater than that received by employable welfare recipients. This is the concept of a guaranteed annual income, something that has been studied and endorsed by numerous organizations and political parties over the years, including the New Democratic Party and the Liberal Party. It was endorsed over a decade ago by the United Church of Canada, and now the federal Conservatives are talking about it. We might suppose that there is an election in the offing if the Conservative government in Ottawa is talking about a guaranteed annual income.

We believe that it is an idea whose time has come, but personally I would put a couple of caveats on it. The reason for that is that the Macdonald Royal Commission recommended a guaranteed annual income, but they recommended an income level of approximately \$12,000 when their report came out in 1984, 1985 for a family of four at a time when the poverty line was around \$18,000 a year for a family of four. So I would only be in favour of a guaranteed

annual income if the levels were substantially higher than what social assistance levels are now.

The main question around a guaranteed annual income has always been, will it be an incentive for people to work or a disincentive? There have been numerous studies of this question in the United States and in Canada, because Manitoba was the site of a Canadian experiment called Mincome, where people on social assistance in Winnipeg, in Dauphin and rural Manitoba were given a guaranteed annual income. Now that data, since 1979 when the experiment was folded, has been studied, and I recently read a study by Wayne Simpson and Derek Hum of the University of Manitoba and they asked themselves this question. They looked at the data and they said, would a guaranteed annual income be an incentive or a disincentive to work? What they discovered is, it is not a disincentive to work. It is actually neutral in the Mincome experiment. So this is an idea that could be implemented, I believe, with many positive benefits.

They had a recommendation on aboriginal people. The committee unanimously recommended that the federal government recognize that political self-government is of primary importance in eradicating child poverty amongst aboriginal people, and that is something that we in this party have always been in favour of, that is aboriginal self-government. Aboriginal people are also mentioned in the report that I quoted from earlier, called Specifics, by the Social Planning Council. They looked at the poverty profile of children in different categories, the national picture, the local picture, a summary and then aboriginal children.

Aboriginal children experienced the second highest child poverty rate in our country, second only to children living with single mothers, who suffer a poverty rate of 61 percent. The national poverty rate for aboriginal children is about 51 percent. The poverty rate for nonaboriginal children is 20 percent. Manitoba has the largest number of aboriginal children living in poverty, 16,149. The poverty rate for these children is 58 percent.

I think all of us in this Chamber should be ashamed of statistics like that, ashamed of the difference in the level of poverty between aboriginal children and nonaboriginal children. The appalling statistics are one of the reasons why we believe that aboriginal self-government is long overdue. What

have we seen on the part of this government? Well, they have had recommendations of the Aboriginal Justice Inquiry report which recommends aboriginal self-government in many, many areas.

In 1984 there was a House of Commons all-party report on Indian self-government also recommending self-government for aboriginal people. In spite of two committees who have studied it and the reasonable requests of aboriginal people, we have seen almost no action from this provincial government. I believe that they are failing not just aboriginal people, but our whole society. I believe that aboriginal people will be better off in many, many areas if they have control of their destiny, if they have control over how money is spent.

We are not just talking about spending money because part of the concept of aboriginal self-government is economic self-sufficiency. They do not want more handouts. They do not want more welfare. What they really want is economic self-sufficiency and self-government so they are not dependent on nonaboriginal society.

That is the historical problem in Canada, is that for centuries we have made aboriginal people dependent on our society. We see the consequences of that. We hear the consequences of that every day through the media. What we are reaping now is what we sowed decades and centuries ago. It is time that we did something about it, that we do something concrete and that we do it as quickly as possible.

Madam Deputy Speaker, there are a couple of more local issues that I want to go back to. One is the child tax credit changes for social assistance recipients in Manitoba. This is something that people are still unhappy with, something that the government did, I believe, last year in December. They changed the lump sum payment of provincial tax credits to monthly payments and there was a storm of protest. I would be willing to bet there were dozens if not hundreds of phone calls to the minister's office.

As a result they changed it from doing it this year to doing it next year. In fact I believe the forms had already been printed for this year but because of the storm of protest by people on social assistance they postponed it to next year.

People said to us and they said to the government, we do not have any large sums of

income during the year except the child tax credit and provincial tax credits. We use this money for special items. We use it to purchase furniture. People in my constituency approached me and said that they were using this money to pay tuition at university. If there is anything that we want to encourage for people on social assistance, surely it is going to university, surely it is getting a better education and getting off social assistance and becoming self-dependent.

But what did this government do? They took away this lump sum which gave people those opportunities and they gave it to people instead monthly. They did it without any consultation. They just did it in an arbitrary fashion and we are still hearing from people who are very unhappy with that decision.

* (1600)

Madam Deputy Speaker, earlier today in Question Period I asked the Minister of Health (Mr. Orchard) questions about the relationship between health and poverty because even his own centre for analysis says that the single most effective thing that they can do to improve the health of Manitobans is to reduce poverty. Would this minister, in consultation with his cabinet colleagues, direct their focus not just on health issues on what apparently are direct health issues but on the issue of poverty, which has many, many benefits if people are lifted out of poverty, including longer life expectancy and benefits to our society as a whole such as less money spent on the health care system?

Today we have the release of his report. While the introduction mentions that the chief determinants of health are standards of living, the government persists in policies which create, not reduce poverty. As we know, to our sorrow, Manitoba has the worst and the fastest growing rates of social assistance caseloads, and especially and tragically, of poor children. This is a record that this government should not be proud of, that no Manitoban should be proud of. It is a national disgrace to be tied in Canada, with Quebec, in having the highest rate of families living in poverty in the whole country.

But the government wants to study and tentatively to test the reform waters, while pouring gasoline on the fires of poverty, the same fires of poverty which have ignited in Los Angeles and Toronto. We do not want those kinds of problems here, but the causes are here. We need to do something about it so that

those fires do not ignite, locally, in our neighbourhoods.

We have a very high concentration of poverty in Manitoba. Contrary to what the Minister of Natural Resources (Mr. Enns) says, there are lots of poor people in Manitoba. In fact, the federal riding which has the second largest number of poor people in Canada is Winnipeg North Centre, and most of Burrows constituency is in Winnipeg North Centre.

The member for Broadway (Mr. Santos), the member for Wolseley (Ms. Friesen), myself—part of the constituency of Wellington, and part of areas south of the Assiniboine River, I believe, are located in the federal constituency of Winnipeg North Centre, and have the second highest concentration of low-income people in Canada. I think this government needs to recognize that fact and to do something about it, and not wait until we have serious or more serious problems in our community, but to take action now.

In conclusion, Madam Deputy Speaker, I have talked about some of the personal hardship of individuals who are on social assistance, people living in poverty. I have talked about some of the statistical information, the effects on aboriginal people, the effects on children, the effects on children in our educational system, and the increased cost that those problems cost our educational system.

I have suggested action. I have suggested that this government act on the aboriginal self-government report, that we bring in aboriginal self-government as soon as we can. Thank you very much, Madam Deputy Speaker. We look forward to debating this issue in the future. Thank you.

* * *

Madam Deputy Speaker: As previously moved by the deputy House leader, that Madam Deputy Speaker do now leave the Chair and the House resolve itself into a committee to consider of the Supply to be granted to Her Majesty.

Motion agreed to, and the House resolved itself into a committee to consider of the Supply to be granted to Her Majesty with the honourable member for St. Norbert (Mr. Laurendeau) in the Chair for the Department of Health; and the honourable member for Seine River (Mrs. Dacquay) in the Chair for the Department of Education and Training.

* (1610)

COMMITTEE OF SUPPLY (Concurrent Sections)

HEALTH

Mr. Deputy Chairperson (Marcel Laurendeau): Order, please. Will the Committee of Supply please come to order.

This afternoon this section of the Committee of Supply, meeting in Room 255, will resume consideration of the Estimates of the Department of Health. When the committee last sat it had been considering item 1.(a) Minister's Salary on page 82 of the Estimates book. Shall the item pass?

Mr. Kevin Lamoureux (Inkster): Mr. Deputy Chairperson, I guess we had run out of time the last time when I was at the mike on the Estimates and I was trying to emphasize to the, in particular, New Democratic Party critic for Health the importance to come to the table in an open and honest fashion to discuss the future of health care in the province of Manitoba.

As I tried to point out to her earlier that afternoon, it is absolutely essential that the member who represents her party recognize the fact that all of us have a care and a love for universal health care as much, and I would even argue, possibly even more than the member for St. Johns, the Health critic for the New Democratic Party. In fact, Mr. Deputy Chairperson, time after time my colleague, who has been here in Health Estimates for 60 hours now—he has been our critic since we formed the official opposition; he has literally debated hundreds of hours of Estimates time and has put on the record a number of issues of importance to the Liberal Party and always felt that it was essential that we contribute in a positive way; that we take the high road in terms of trying to best serve Manitobans by not only coming up with criticism, but constructive criticism wherever possible.

We have used the argument that really what is needed is an overall plan. The Minister of Health (Mr. Orchard) today brought forward a plan, which I know my colleague from the Maples (Mr. Cheema) has gone over quite thoroughly. A number of the criticisms that will come from the member for The Maples will come as a result of this particular report, but I know and I feel comfortable, because he has argued it not only at this table but from within our caucus. It is absolutely essential that we criticize the government where it is necessary, and where

the government has done a good job we tell them that they have done a good job.

Mr. Deputy Chairperson, the reason why I spent 25 minutes last Tuesday and a few minutes today to put on the record these words is because I think that Manitobans would be best served if the New Democratic Party came to the same realization as we came to four years ago, and that is to address the needs of the health care for the province in a more nonpolitical way. You have to be more responsible. You cannot take things out of proportion in the manner in which the member for St. Johns has.

The other day I made reference to a statement that was quoted from a rural newspaper where somehow the member for St. Johns said that the Liberals were in full co-operation with the Conservatives and we did not want to debate the Hospital line of the budget, that in fact the government would have fallen had that occurred. Mr. Deputy Chairperson, how irresponsible. Really and truly, I do not know how the member for St. Johns and the New Democratic Party can look themselves in the mirror. This is not the first time that we have seen this type of an ordeal.

This afternoon, after this morning attending in part the conference, I was looking forward to concluding my remarks in and around 2:30, but the New Democratic Party was scared to come to the table. They did not want to come to the Estimates table to ask questions. For the first time, I have been denying leave to waive private members' hour for the last four or five weeks, and the NDP have criticized me for denying leave, along with the government, but I would have expected that from the government.

Mr. Deputy Chairperson, today, I said, yes, we would waive private members' hour in order that we can discuss this report that we have before us today. This time, for the first time that I am aware of this session, the New Democratic Party denied leave in order to waive private members' hour.

One has to ask the question why it is that they feel they cannot come to the Estimates table. I believe that the real reason is because they do not have an understanding of health care. The member for St. Johns (Ms. Wasylycia-Leis) has a concept of health care beds and health care beds alone. She is unable to come forward and to discuss and debate the real health care issues that are in the best

interests of all Manitobans. They intentionally choose to avoid the real issues because they believe that they are the only party that represents—they thought that they are the only party that believe—[interjection] and no, to the member for Flin Flon (Mr. Storie), you are not the only party that represents health care in the province of Manitoba.

I think what you have done today has been a disservice to all Manitobans and would encourage, Mr. Deputy Chairperson, that the member for St. Johns, in particular, come to the table in an open fashion. To conclude, I would say the reason why I suggest that is because my constituents, the constituents that I represent need to have legitimate debate.

As long as one of the political parties that come to the table refuse to have that legitimate debate, that party is jeopardizing the health care in the province of Manitoba. That is what the member for St. Johns and the New Democratic Party is doing. By them choosing to be selective and misquoting and deceptive, as they have been in the past number of years, dealing with health care, something that we all agree as a fundamental need for Manitobans, I think is a disservice.

I would look to the Minister of Health (Mr. Orchard), Mr. Deputy Chairperson, and ask the Minister of Health that even if the New Democratic Party does not—

Mr. Deputy Chairperson: Order, please. Could I have just a little bit of quiet while I am listening to the honourable member for Inkster, please.

Mr. Lamoureux: Mr. Deputy Chairperson, I am asking the Minister of Health if he would do a service at least to the citizens of this province by bringing to the table legitimate debate, to bring to the table what is going on in our health care system. I would encourage the Minister of Health to be as open as possible, as the Leader of the Liberal Party (Mrs. Carstairs) brought forward in her questions and the member for The Maples (Mr. Cheema), to not fear exploitation of whatever might come out of this in a deceptive way from the Liberal Party.

We will play our part the best we can to ensure that what criticism is given to the Minister of Health is criticism that is deserved and warranted and that we will not take the opportunity, because we believe that it is essential to prevent the minister from coming forward with the details of his budget, with the importance of the health care to the province of

Manitoba. We just cannot jeopardize that, because one political party has chosen to play politics, even though they like to think that they are coming to the table saying that they do not want to play politics with health care. We know all too well, Mr. Deputy Chairperson, that in fact they are playing politics with health care.

I would ask the Minister of Health (Mr. Orchard), having said that, to do the responsible thing and to be up-front with Manitobans and allow the NDP party to play their games and only hope that the health care in the province of Manitoba will not deteriorate as a direct result of their irresponsible actions inside this House.

Thank you, Mr. Deputy Chairperson.

* (1620)

Hon. Leonard Derkach (Minister of Rural Development): Mr. Deputy Chairperson, I would just like to put a few comments on the record with regard to the—

Ms. Judy Wasylcia-Lels (St. Johns): Was there not a question for the Minister of Health? I thought there was a question.

Mr. Lamoureux: Mr. Deputy Chairperson, I will repeat the question.

I had asked the Minister of Health: Can he assure this committee that he will continue to come back to the committee and be as open and frank as possible in respect to what is going on in our health care system, even though the New Democratic Party has chosen to behave in such an irresponsible way? In return, the member for The Maples (Mr. Cheema) will be continuing to bring forward legitimate criticism where it is warranted and will give credit where it is deserved.

Hon. Donald Orchard (Minister of Health): Mr. Deputy Chairperson, we have tried to provide a substantial amount of information. I think that, when my honourable friend possibly gets more time to digest the entire content of the action plan, he will see that there is a substantive underpinning of research and policy direction in that, which we think will allow us to operate within the \$1.8 billion that we currently are asking approval to expend and at least be able to maintain the level of services. In some cases we think there is an opportunity, with reinvestment of savings from high-cost institutions, to improve, in fact, the level of services.

Where my honourable friend, I think, is coming from is probably going to be opposed if my

honourable friend the New Democrat gets a chance into the individual hospital budgets, and those are being finalized. This is an important component of that finalization of budget, as you can appreciate, because in this fiscal year our two teaching hospitals will see, phased out, 240 beds that are part of their complement, with as much transfer of budget to other institutions as is necessary to offer those services in those institutions.

When we have the action plans of each individual hospital, I doubt we will be sitting in Estimates, but I have no hesitation those will be public discussion, because there is, no doubt, going to be press releases on them as each hospital develops its action plan. That will lead us to some discussion in Question Period or other forms.

I simply put it to my honourable friend this way. The process that we have undertaken and the underpinning of research and knowledge that we have tried to focus on the health care system, I think, will stand the test of critical scrutiny. Not perfect. No program of government is going to be perfect, but it will stand critical scrutiny. It will not stand—I will be very blunt—the kind of questioning my honourable friend the member for St. Johns was putting out, the rumours about 240-250 beds closing at our teaching hospitals. If that is the extent of the information provided by New Democrats in letters and mailers to their constituents and across the province, no ministry of Health can withstand that, because that is only half the facts. In other words, it is as close to an untruth as you can get.

When you put in context the 240 beds at the Health Sciences Centre and St. Boniface, balance it off with the 150 beds that are going to be funded in three other facilities, plus continuing care, to offset the services delivered in those beds, then the balance all of a sudden appears, and people can start buying into a process, knowing that there is integrity behind it.

I am willing to provide those kinds of directions to the Chamber, because I think when they are put in context and in balance they will receive general support. I cannot predict how the NDP are going to handle those kinds of pieces of information, because we have seen already today my honourable friend the member for St. Johns (Ms. Wasylycia-Leis) was into job protection, which union backing would probably force her to do, and I did not detect a question out of six where the patient was

ever considered in terms of the integrity of care to the patient.

Point of Order

Ms. Wasylycia-Leis: Mr. Deputy Chairperson, on a point of order, the minister should correct the record, because he knows that he is putting incorrect information on the record. He knows full well that in every question asked today in the Legislative Assembly the word "patient" was raised, and questions were asked about the safeguarding of patient care.

Mr. Deputy Chairperson: The honourable member does not have a point of order. It is a dispute over the facts.

* * *

Mr. Orchard: Mr. Deputy Chairperson, I will certainly withdraw that statement, if my honourable friend is offended by it.

The whole process of the reform in this document is underpinned with evaluation. It is establishment of protocols. I tell committee that if there is one person who has been consistent over the last couple of years, in terms of saying we need protocols and guidelines of practice, the member for The Maples (Mr. Cheema) has been, but that is part of the process. As much as possible, yes, we are going to bring information to the House.

The suggestion today, by the Leader of the Liberal Party (Mrs. Carstairs) in terms of sharing the evaluation process in a public forum, I am taking that very seriously under consideration, because I think that has an opportunity to do two things: to reinforce what is being done right, to calm the potential for narrowed fears that could be created with misinformation; and, secondly, it has an opportunity to tell the system what has not worked as well as we thought, so we get our minds around changing the process in a fashion that will make it work with the expectations we have.

Mr. Derkach: Mr. Deputy Chairperson, once again I would just like to put a few comments on the record with regard to the Health Estimates.

I guess I would like to go back to Monday night when the motion was made regarding the minister's salary to be reduced to \$50. Of course, from time to time that is done in the spirit of criticism of a minister, and in politics that is understandable.

However, I listened carefully on Monday night to the remarks that were made after the amendment was proposed, and the remarks that were made from the member for St. Johns (Ms. Wasylycia-Leis) and also the member for The Maples (Mr. Cheema). Through the debate on the Estimates, it was clear that there was an understanding of what the real issues were in Health by the member for The Maples, but one did not get that sense from the member for St. Johns.

Now, that is not to say that the member for St. Johns does not care about health, because I think it is true that she does have a care about the state of health in this province. Unfortunately, I think that the party position, the politics have taken over reason in terms of how she has approached the entire issue in the debate on the Estimates.

When I heard her reasons and what the Minister of Health could do with the \$50, it made me somewhat embarrassed about the fact that we are all legislators and are expected to be somewhat credible in the remarks we make. Sometimes we would probably want to bury pages of a Hansard where comments like that would appear, because I do not think it does any of us any good to be placing comments like that on the record, especially when we talk about a serious matter that affects every Manitoban and one that has become a very serious one indeed for all people in this province.

The Minister of Health I think made it very clear, that health care goes far beyond politics, that indeed every individual in Canada and in Manitoba must pay attention to where we are going in health care. I watched the Minister of Health when he was on the Journal, along with two other high-level professionals, if you like, from the health care field, or at least from the academic field. One of the things that struck me was that Manitoba was being looked at as perhaps a place where we could look at health care reform sensibly, where finally some province is beginning to take a step in the right direction in terms of health care reform.

Mr. Deputy Chairperson, what do we hear around our province? It does not matter whether you are talking to New Democrats or Liberals or Conservatives, or whoever they may be in terms of their politics, people understand that if we do not take some steps regarding health care reform in this province, our children may not have the luxury of the health care system that we have before us today. That is a real concern. It is a concern for the senior

citizens, it is a concern for middle-aged people, and indeed it is a concern for the youth.

* (1630)

When I heard the comments from the member for The Maples (Mr. Cheema), who is a professional in the health care field himself, who understands very deeply the issues before health care, who was willing to put aside perhaps some of his political beliefs for the moment and look at how he could contribute positively towards assisting the Minister of Health through positive criticism and sometimes very hard criticism, as it should be, and through positive suggestions as to how health care can be reformed—to that, I think, Manitobans have to pay some attention, because it finally shows that in the Legislature there is some credibility, that people do not need to be cynical about what happens in the Chamber and in this room.

I guess if I had anything to say to the New Democratic Party and to the Health critic from the New Democratic Party, I would say that perhaps it is time to set aside some of that political rhetoric that keeps coming at Question Period, that keeps coming in these Estimates, to take a very serious look at the document that was tabled by the Minister of Health today, because indeed this is a document that is probably going to set a certain direction for health care in our province.

Yes, it requires the scrutiny of all the critics and indeed the parties to ensure that the document is made even stronger than it is in its present form, but it is certainly not going to be made strong by the kind of rhetoric that I have heard put on the record by the member, both in Question Period and in these Estimates.

One may say, well, I am coming to the defence of the Minister of Health. I do not need to come to his defence, Mr. Deputy Chairperson, because the Minister of Health has proven that he is capable of defending himself and, indeed, capable of defending the policies that he comes forth with.

So Mr. Deputy Chairperson, I would just like to say that the comments that I hear from individuals outside this Chamber, from ordinary Manitobans, are that Manitobans are concerned about health care. They understand that it is time for reform. They understand that this province simply cannot go on the way that it has in the past, and that if we are going to protect that very cherished health care system that we have in our province today, we are

going to have to combine our efforts as government, as opposition parties, to try and come up with the best health care reform that is possible.

Yes, from time to time it may mean strict and harsh criticism, but on points where we agree, where we can set aside our political ideologies, I think we have to state that very clearly. When a position or a policy can be supported, there is nothing wrong with indicating that it is a good policy. Indeed, that is, I guess, what I am looking forward to perhaps from the New Democrats. I do not know if they are capable of it, Mr. Deputy Chairperson, because I have not heard it. I have not heard or I have not read any suggestions from the critic of Health with regard to what directions she would take or her party would take except for the criticisms that have been laid before the Minister of Health on his policies.

Well, Mr. Deputy Chairperson, just in conclusion I would have to say that I think Manitobans are going to be looking very seriously at what has been tabled today. I think Manitobans are going to be supportive of the directions that have been set. Indeed, these are not set just by the Minister of Health or this government. There has been an enormous amount of consultation done with the professionals and with Manitobans. That has to be understood, because this is not a policy that comes straight from the politics of the people from government.

So, Mr. Deputy Chairperson, once again I am hopeful that the member for St. Johns (Ms. Wasylycia-Leis) will take on a new attitude and perhaps follow the example that has been set by the member for The Maples (Mr. Cheema). Indeed, he is not joining us as a coalition. He is still very much a Liberal, and he will certainly criticize the Minister of Health when that has to be done, and that is expected. But he understands that this is beyond simple politics, and I think that kind of understanding has to be taken on by the New Democrats and the critic for Health in the New Democratic Party.

So with that, Mr. Deputy Chairperson, I thank you for your time.

Ms. Wasylycia-Leis: I am certainly pleased with this opportunity to add my remarks to this Liberal-Conservative filibuster of the Conservative government's Health Estimates, a most unusual development in the history of the province of Manitoba. Many would regard this as an absolute abuse of our democratic process and our whole Estimates process.

I know that the Minister of Health (Mr. Orchard) and the other Conservative Minister of Health, his Associate Minister of Health, are taking great glee in stretching out Estimates in order to be able to develop their relationship a little more closely and develop their political agenda a little more concretely.

Mr. Deputy Chairperson, I was going to say this afternoon in the Question Period that if the Liberals moved any closer to the Conservatives they might as well cross the floor. Unfortunately the member for Inkster (Mr. Lamoureux) has gone but I was going to say I see that he has already made that move. It is getting very interesting around this Legislative Assembly to see the kind of joining of hands and dancing of cheek to cheek and toe to toe and nose to nose as well, I think.

It is fascinating to watch and I am not going to make comments, I am not going to make judgments. I will let the voters of the province of Manitoba make judgments about that, and I will let the future of our health care system be a commentary on developments today in 1992 about our health care system.

I want to start off by saying though, although I realize that there has been a considerable amount of collusion in an attempt to set this up to try to embarrass me, to try to box me into a corner, to try to make it look like I am the odd person out, the member for Roblin-Russell (Mr. Derkach) says I am not the minister and he is absolutely right. That is why the situation is even more peculiar, that there has been such a concerted attempt over the last little while to try to get at me, this poor little old member for St. Johns, one lowly member in the Legislature.

As I said the other day, I feel flattered. I think there is no choice about all of this but to feel flattered and to treat this as a compliment—

Mr. Deputy Chairperson: Order, please.

Point of Order

Mr. Gulzar Cheema (The Maples): Mr. Deputy Chairperson, on a lighter note, I would like to let the member for St. Johns know that we really like her very much, but I think that there is an issue here in terms of—

Mr. Deputy Chairperson: Order, please. The honourable member did not have a point of order. It was a dispute over the facts.

Ms. Wasylycia-Lels: Well, Mr. Deputy Chairperson, along those same lines, I want everyone to know that I do not take this personally, and I do not dislike anyone on a personal basis. I even tend to agree with the Minister of Highways and Transportation (Mr. Driedger). [interjection]

No, no, the other night the Minister of Highways and Transportation who came to tell us what a pussy cat the Minister of Health is. I will not go so far as to agree with that statement, but I will say that there have been some lighter moments in these 60 hours of Estimates, and there have been a few laughs, and I can see that there might be another side to the minister and there is perhaps another part to this personality.

But on the political front, in the Legislature I only know one person. I only know one person, and he has not been very pleasant to me. He has made this quite a personal debate and I have been subjected to a great deal of personal innuendo and abuse, and I have said that before.

However, I still will not take it personally. I understand it is part of politics. It is part of this whole legislative process, and I want to continue making a few comments on that level in terms of the policies we are dealing with and the politics, because one of the things that is coming over and over again by the two Conservative ministers of Health is that this is a nonpolitical issue, and I am doing this great disservice to my country and my community by daring to ask questions that are interpreted as being political.

* (1640)

Well, Mr. Deputy Chairperson, I will concede that there are nonpolitical concerns around this issue, and I said that today in the Legislature. There are generic concerns. Those concerns have been expressed by all of us. Those concerns have been expressed by every provincial government across this land for the last five years, whatever the stripe. Those concerns have been described by academics from all different persuasions. Those concerns have been mouthed and espoused by community groups right across this country. So there is very much an element of nonpolitical focus to this whole area, and I have indicated that in reviewing this report today. I certainly join with all members from all political parties in agreeing with the concerns expressed and clearly indicating that the goals are

laudable. I have not tried to hide that feeling whatsoever.

Our concern has been with respect to the action plan, if one can call it that. That really comes back to this long 60 hours of questioning and why we are still at it. The fact of the matter is that we still do not have a clear idea of the action plan. We have, as I said in the House today, a generic policy perspective, a multiple choice paper document before us without any further indication of where this government is clearly planning to take this province with respect to health care reform. So, Mr. Deputy Chairperson, at that point it becomes very political. It becomes political because we see the need for change on an urgent basis, and we are not seeing this specific plan of action coming from this government after four years of promises. I want to reiterate this is the Minister of Health's (Mr. Orchard) fourth anniversary as Minister of Health.

An Honourable Member: Today?

Ms. Wasylycia-Lels: It must be close. It must be around today. I think it is very—last week. So we are just on the heels of the fourth anniversary of the Minister of Health (Mr. Orchard), and I think one could expect after four years of similar kinds of rhetorical statements and expressed concerns to see some specifics, see some movement on a few major areas identified across this country as absolute requirements for health care reform. It becomes political when one sees from Conservatives, whether in Ottawa or in Manitoba or in other provincial sections in this country, some developments that are very worrisome and that we disagree with.

So, Mr. Deputy Chairperson, let us begin with the most fundamental of health care reform issues. That is our medicare system, our national standards and the principles entrenched in the Canada Health Care Act. I do not think I should need to sit here and take any lectures from either the Minister of Health (Mr. Orchard) or any of his colleagues on the Conservative side or the Liberals in the House about what is right and good about health care reform, and what should be focused in terms of health care, and how to fight for a good quality health care system. It has been Conservatives and Liberals who have worked hard to tear apart our national health care system and our treasured medicare system in Canada.

Mr. Deputy Chairperson, let us face it, we are in a difficult situation today primarily because the

federal Conservative government has ripped the bottom out from under medicare, has gutted funding for health care, and we know that means the end of an enforcement mechanism for the principles, those principles that the member for The Maples (Mr. Cheema) is so concerned about, which I share—a concern I share. He has asked about support for his bill. He knows that I have stood publicly and said the New Democratic Party will support his bill. I do not know if he has those assurances from the members of the Conservative side.

I do not believe that the [interjection] the member for Sturgeon Creek (Mr. McAlpine) says, why do we not speak on it? Well, we are ready to speak on it. We are not waiting to speak on it. The member for Sturgeon Creek knows that bills go through a certain order. I can ask the same question about other bills that are before there that have been called—and the member for the Liberals has not spoken. I can think about bills that have been passed by all three parties in this Legislature, like Bill 91; it is still sitting gathering dust.

A commitment is a commitment is a commitment in my books. The member for The Maples (Mr. Cheema) knows that, and we will support that bill. I think if he had the same commitment from the Conservative Minister of Health (Mr. Orchard), we could pass it tomorrow.

Let me indicate that when you put health care reform in the context of the serious situation caused by the federal Conservative government, it is political. I do not know how you can say it is not political. It may not be political if you are not going to sit there and be concerned about that development and fight to the nth degree to restore federal funding, ensure national standards and preserve medicare. For me, the beginning of health care reform is preserving medicare and that means a political fight that we have never seen the likes of.

Mr. Deputy Chairperson, you can tell all the members of this committee to hang onto their hats or their pants or whatever, because this issue is going to get very political. We have just seen the beginning of it, and we are going to be fighting like you have never seen before to preserve medicare.

I have said this before and I will say it again today, there can be no system to reform if we are going to sit idly by and let medicare be eroded and the federal government to abdicate its responsibility. I do not see the Conservative government and particularly

the Minister of Health (Mr. Orchard) fighting like mad to get the federal government to change its policies. I have not seen a letter, a public statement, a press release or a pronouncement from anyone on the Conservative benches saying, we are going to fight to the nth degree to preserve medicare, restore national funding and ensure a strong federal role in our health care system.

This issue becomes very political when we see, given the difficult financial situation and the cutback of federal funds, it becomes very difficult for provincial governments to preserve quality health care, but even recognizing that, we still have very serious difficulties with some of the decisions taken by this provincial Conservative government, and so we will raise those issues.

If that means being political, then so be it. We are political, and we will raise concerns at any point along the way about any aspect of so-called health care reform under this government that does in our estimation offer or hurt patients and deny security and quality of care and put at loose ends hundreds of workers—yes, those are concerns. We too are concerned, not only about patient care but about the lives and jobs of hundreds of Manitobans in a province that now has the highest unemployment rate in the country.

Mr. Deputy Chairperson, I think it is pretty irresponsible to be dismissing the concerns of workers in an economic climate like we are facing today and suggesting that those hundreds and hundreds of workers add themselves to the unemployment rolls and the welfare rolls and the increasing poverty.

To what? How can we beat the record for having the highest poverty level anywhere in the country? We are already there, so I think we do have a responsibility to worry about economic security and employment opportunities. We can do that in the context of fighting for quality health care that is reformed based on the fundamental principles of medicare.

So you know, when you start with that federal Tory record and you see a federal Tory policy of strangling the economy, which is strangling health care, you cannot say this is not political. We do not need any lectures from anybody about medicare and about fighting to preserve the most treasured national program in this country, something which is

cause for more Canadians to be proud to be Canadian than just about anything else.

Mr. Deputy Chairperson: Order, please. Could we have just a little bit of quiet, please? The decorum is getting a little bit of line. The honourable member for St. Johns (Ms. Wasylycia-Leis) is making her presentation.

Ms. Wasylycia-Leis: We will continue to play a constructive role around health care, as we have done in the past. Mr. Deputy Chairperson, that means beginning with asking questions, demanding answers, raising concerns. That is what we have been doing over the last several months. That is what we have done in the last 60 hours of Estimates. That is what we did today when we received this action plan, this so-called action plan.

*(1650)

Mr. Deputy Chairperson, we did not dump all over this paper, because there are not specific recommendations and decisions to say yea or nay about. We clearly said—

Mr. Lamoureux: Do you support it?

Ms. Wasylycia-Leis: The member for Inkster (Mr. Lamoureux) says, do we support it? We said quite clearly, these are generic concerns we have raised before, others have raised before. We certainly share these concerns.

We have said the goals and aims of this paper in terms of health care reform are laudable. Now, I wonder, if one says it is "laudable" to the member for Inkster, if that needs further clarification. Perhaps we need to be a little more explicit for the member for Inkster. We have said the general philosophy is supportable.

But, Mr. Deputy Chairperson, we had expected, based on the way the minister had described and outlined the process leading up to the document, and held out and created such high expectations around this paper, that we would have seen some actual steps taken towards a health care reform strategy, not more broad policy statements saying, here are the options; here are the options for quality assurance; here are the options for physician remuneration; here are the options for community health care; here are the options for hospital beds; here are the options for you name it.

That is what this paper is. It is a pizza approach to health care; it is a multiple listing of toppings. We get to choose? No, we do not get to choose. The minister, who has the staff, the resources, the

analytical tools, the evaluative mechanisms, has the responsibility to come forward with a set of steps that he is prepared to take based on all of that experience and input and four years in government, four years of promising health care reform.

So our criticism today is not about the content because you cannot disagree with the content. You cannot disagree with the content. What we are saying is, what are the priorities for health care reform of this government?

Now I know that in every other province in this country, and in every other study, Royal Commission Task Force review, consultative process whatever, there are about five or six sorts of umbrella, key concerns listed in terms of health care reform, suggested as action for governments.

Those issues revolve around: (1) physician remuneration and method of medical practice; (2) equally important, the priority of moving from institutional to community-based care; (3) a focus on prevention, something we know has been missing from our health care plans to date, from whatever government, whatever part of this country, NDP included; (4) a focus on standards of care and quality assurance; (5) and utilization reviews.

I think those are five general areas. There are more; there is too much to keep on top of. But in terms of all these studies—the Royal Commission from B.C., and the Quebec study, and the Nova Scotia, and the New Brunswick, and the Ontario Premier's Council, and The Rainbow Report in Alberta, and so on and so forth—all of those studies have focused on those big umbrella areas and said, we have to take action; we have to take steps.

Some provinces have started to do it. Here, in this document, I thought we were getting the Manitoba government's plan of action based on all of those broad, sweeping changes and recommendations. So I thought today we would hear from this government about what they want to do with respect to physician remuneration and fee for service. I thought maybe we would start to see some direction in terms of—and it is now getting to be a pretty old idea—either capping, or changes to the fee for service, or moving towards salaried positions, or a combination, or whatever. We do not have that recommendation in this document.

I thought on community health care we would see by now a preference, maybe one that would still need further input from the community, but certainly

an indication of where this government wanted to go with respect to CHOs or HMOs or whatever version you want to think about in terms of a community health care model.

There are many, they all need to be looked at, and they have to be part of any health care reform strategy. So the listing is here but there is, again, no indication that a model is chosen, will be tried, will be tested, will be a part of a movement in terms of beds from the institution to the community-based side.

I thought by now we would have seen more of a focus on prevention and promotion. Not a word in this report, not a word, at the same time that we just learned that Manitoba has the highest poverty rate in the country. We know the links—we saw the presentation from the Centre for Health Policy and Evaluation a couple of weeks ago. We heard from Dr. Nooralu Roos that there is a clear correlation between poverty and economic status and health.

In fact, she came with a chart that said that the best guarantee of health and well-being and long life is economic security, and showed that as income rises you tack on, I think she said, eight or nine years to one's life. Much higher than if you found the cure for cancer or found whatever for heart surgery. So we know the correlations, yet there is no recognition of the root causes of ill health and how we have to work on that whole area and focus on prevention.

Maybe I was expecting too much, but I thought, given how on the very question we asked about, the rumours about hospital beds and the closing of this and the end of this service, the minister kept saying, wait for my health care reform plan. I thought, maybe naively so, that we would have something a little more specific than this.

So, again, let me say, I do not object to what is in this report. I support the aims; I support the principles; I support the philosophy. I object, and I am angry, and I will continue to raise my voice about the fact that this government, after all this time, still is not prepared to come to us with a little more concrete strategy.

What is noticeable in this paper is that there is very specific information around one area, and that is with respect to bed cuts. It is very clear, there are numbers. If you see numbers anywhere it only has to do with bed cuts. He confirms the 240 bed cuts at the teaching hospitals.

Although the minister has said that those numbers were from fearmongering all along, in actual fact they were right. We were right. They should have been addressed long ago, instead of creating this climate of fear and uncertainty in our hospitals.

Ms. Becky Barrett (Wellington): You mean we were not fearmongering?

Ms. Wasylycia-Lois: No, as the member for Wellington (Ms. Barrett) says, we were not fearmongering. I hope the minister at some point concedes this. That we were basically doing his job in getting out the information that needed to be gotten out there, so that people could be aware and could do something about it and demand that it be put in the place of a broader context.

Mr. Deputy Chairperson, it is very specific around bed cuts, but not very specific about the alternative community care arrangements and not very specific about the patient and safeguards for the patient in that whole continuum of care, not very specific about bridge funding—and I know the Liberals have raised this in Question Period—not very specific about the fact that there will need to be, I hate this word, but this hump in funding in order to make the transition.

This report says it, that if you are going to move from one system to another, you are going to have to have extra funding and parallel systems for a period of time to make it work. No indication that that will happen, and no indication about the lives of people who work in the facilities.

The report says we should not be talking about reductions in health care spending, we should be talking about containment and reallocation and reprioritization, which I agree with. But surely that would mean that you are going to keep the same number of people in the system, although in different facets and different ways and different jobs and different positions and different places.

That means redeployment and training, and we still do not have a specific program to do with redeployment and retraining and supports for workers as they make that transition. I do not know how you can pretend to be moving towards health care reform if we do not address some of those very fundamental questions.

* (1700)

So let me say, Mr. Deputy Chairperson, I hope that the minister will tell us what the next step is and how quickly he is going to take us there, because

this is broad, this is nice, this is multifaceted, this offers many choices, this has all the right jargon—

Mr. Deputy Chairperson: Order, please. The time is now five o'clock and time for private members' hour. Committee rise.

EDUCATION AND TRAINING

Madam Chairperson (Louise Dacquay): Order, please. Will the Committee of Supply please come to order.

This section of the Committee of Supply is dealing with the Estimates for the Department of Education and Training. We are on page 43, item 5.(b) Program Analysis, Co-ordination and Support.

Will the minister's staff please enter the Chamber.

Ms. Jean Friesen (Wolseley): Madam Chairperson, we are looking here at policy and program changes and also at the research and analysis that the department does. I want to come back to a document that I have been referring to which relates to the cuts in community colleges two years ago which the government, I believe, has still not replaced.

I have referred to this document before, and we had some trouble finding it. Now that I have seen the document, I am not surprised. This is a document called 1991-92 Community College Program Reductions and Eliminations. I asked the minister twice whether this, in fact, did indicate that the programs which were cut were ones in which there was low or no employability, because that was what she had initially maintained.

I expressed surprise that there had been such a document. She argued again that, indeed, there had and gave me the title of it. Well, what this document amounts to, in fact, is a listing of the programs which were cut. It does not give enrollments, and it simply has a number or a letter attached which says L, M, low or medium demand.

There does not seem to be, in this document—and perhaps there are more pages to it, but I only have one page—anything which indicates the employability or employment levels in each of these areas. So, first of all, I would like to ask the minister and her staff, is this list of courses at Red River, Assiniboine and Keewatin the document which she was referring to?

Hon. Rosemary Vodrey (Minister of Education and Training): Madam Chairperson, I will say again for the record that was a document that was

tabled last year, in last year's Estimates, and the context of the tabling, there was discussion and information on that document, I understand, regarding market demand and cost and completion rates, alternatives and employment success. I am informed that last year it was discussed. Each program was discussed specifically, and I will remind the member that those were last year's Estimates, and the information, I believe, is provided there and the document, though it does not contain specific statistics, does contain the information that was requested.

* (1610)

Ms. Friesen: Madam Chairperson, then could we look at that document and look at some of the courses which were indeed cut at Red River College, for example? Clerical Bookkeeping and Secretarial Certificate, the first two on the list, are listed as low and medium demand, respectively, and I gather from the minister's response that this demand means demand from employers, not from students. So I am wondering how to reconcile that with the report which the minister's department has published, High Demand Occupations; High Demand Skills, page 5, Small Business Management, Bookkeeping Accounting. How does this reconcile with the low and medium demands which led to the cuts at Red River two years ago?

Mrs. Vodrey: Again, I will remind the member that she refers to decisions made last year, last year's Estimates. I will also make the distinction for her between secretarial and clerical, which she references, and bookkeeping, that there is a difference and that we have kept Business Administration, Business Accountancy, and that there has been a demand for that higher level or different type of skill.

Ms. Friesen: Madam Chairperson, could the minister indicate then what is the difference between Clerical Bookkeeping and the program that she makes a reference to?

Mrs. Vodrey: I am happy to draw those distinctions. The business administration course is a comprehensive, two-year diploma course, as opposed to a one-year certificate program. The business accountancy program is a one-year program, and it pays particular attention to computer application, programs such as Lotus 1-2-3, Dbase and a program called Accpac.

Ms. Friesen: Madam Chairperson, in the booklet on high-demand occupations in Canada, it does

point out under bookkeeping/accounting, which is a high-demand skill in Manitoba according to the minister's records, the requirement for the ability to organize records of transaction, to co-ordinate activities relating to paying and receiving money and to apply principles of costing and budgeting.

It seems to me that is what is included in clerical bookkeeping. I ask the minister again, if this is a high-demand occupation, why was that program cut?

Mrs. Vodrey: There has been, I am informed, a demand for the more sophisticated skills. The clerical and bookkeeping skills were previously introductory courses. They used a very basic approach. There was less use of technology. It was manual bookkeeping versus bookkeeping by computer and by the program, by way of example, Accpac. The demand is now moving to a more sophisticated skill from those more basic skills which were taught previously.

Ms. Friesen: Then why, on page 7 of the same booklet, High Demand Occupations in Manitoba, under the listing Active Recruitment Occupations does it say bookkeeper, accounting clerk, bookkeeping clerk. These are high demand, they are active recruitment, and yet the government cut them when we have a population of 59,000 people who are unemployed.

Surely one of the purposes of this department is to match skills and skill training with the unemployment levels in this country, or at least in this province. I do not see the connections between the minister's own reports and the kind of programs and development of programs that are going on at the community colleges.

Mrs. Vodrey: It seems to me that the honourable member is simply taking a name and then, based on the name, she is assuming the skills. In my last two answers, I have described to her the skills and the training that are attached to the specific names being used for courses and for outcome occupations.

I would also like to remind her that there is a distinction between active recruitment—active recruitment is not the same as high-demand occupation. Active recruitment refers to those occupations in which there is an extremely high turnover.

Ms. Friesen: I did distinguish between those two. There is recruitment. There are high-demand skills.

It seems to me that, in both cases, there are demands, for whatever reason, for people with introductory skills in bookkeeping. Yet those are exactly the programs which Red River cut. Why is that?

Mrs. Vodrey: Let me say again that the demand is for the higher level skills. I have described that those occupations, and the kind of training that goes along with those occupations—business accountancy, business administration, by way of example—were demanded, and that we did, with those two courses, expand them last year. We also expanded them this year. There has been an emphasis, with the available funds, to develop skills that are required within the community, that will contribute to the labour market and will also support the economy.

* (1620)

Ms. Friesen: But I am reading from lists which indicate that these are high-demand skills and that these are areas where there is active recruitment. So I simply cannot understand the minister's response.

There is no point in talking about creating programs when, in fact, you have cut a large number of programs. You are simply not even replacing the programs that you had. There is a clear distinction in the list on high-demand skills between small business management, which does include the financial management, the production management and the bookkeeping, which requires the computer skills that the minister is talking about, and the secondary, which is called bookkeeping and accounting, which is a much lower level of education and which requires the ability to organize records of transaction to apply principles of costing and budgeting. It is an area of skill and demand. The minister cut those programs. Why?

Mrs. Vodrey: Madam Chairperson, well, I have provided for the honourable member all the information that I believe she would need in order to understand the issue. I have explained it. This is now a debate for the Estimates of the '92-93 year. If those concerns were to be raised, they really should have been raised in last year's Estimates when that was a topic for discussion.

Ms. Friesen: The reason I am continuing to raise them is because in fact we have a smaller community college system now than we did two years ago, and what we are discussing generally is the future of the community college system, the

scale of it, the way in which the public sector should be and is not yet meeting the needs of the 59,000 Manitobans who are unemployed. That is my concern.

The minister's response, and the government's response, in all of these issues is to say that it has replaced 600 positions in the community colleges. When you have cut 2,000, or you have cut over 1,000 the year before, I think it has to be said over and over again that this government has reduced the size, the scale and the ability of the community colleges to meet the needs of those thousands of people who are unemployed in this province, and I want to keep making that point.

Mrs. Vodrey: Madam Chairperson, let me say again and continue to say for the benefit of the honourable member and others, that the full-time enrollment for '92-93 reflects the enrollment of two years ago—so the honourable member is not correct in her assumptions—and that we have redirected money for programming to those higher level skills which will allow Manitobans to compete.

The honourable member wishes to continue focusing on those lower level skills, she wishes to maintain the status quo, and it appears that she wishes to particularly keep and make sure that students continue to study in those particular areas in which there is not a demand, which, as I said, maintain the status quo, do not necessarily allow for their further competitiveness in Manitoba, and therefore does not allow Manitoba to be more competitive.

So I will remind her again that the full-time enrollment for '92-93 will reflect the enrollment of two years ago, and that our programming is designed to put Manitoba, to move Manitobans into the '90s, to reflect the training culture that we have discussed while we have been in Estimates and as part of the government's ongoing activities in strengthening the Manitoba economy by developing the skill levels of our labour force. I will remind her again, as I told her the last time we sat together, that an extensive review of community college programming was undertaken in 1991—a review of that programming.

The aim was to focus on effective and long-term approaches to meeting our labour market needs, rather than any short-term quick-fix measures. I think the honourable member is aware that we can no longer look backwards; we can no longer look to how we dealt with economic matters previously and

in the past, that the current thinking is now we have to restructure our thinking. We have to now look ahead, and we now have to make decisions which will move Manitoba and Canada, as a country, into the year 2000.

The review that I spoke about, part of the process of this government to meet those new challenges, resulted in a redirection of programming from those less effective programs to the ones which would be more effective in addressing the labour market mismatches and matches. College programs were evaluated, as I told her, based on such things as enrollment levels—a very good indication of levels of interest and suitability—graduation rates, job placements, projected demands for the graduates, as well as program costs and effectiveness.

Some programs, as I told her previously, were eliminated and many were added. In 1992-93, we are proposing a further expansion, as I have told her several times, of \$2.5 million to college programming in areas which will contribute to the economic development of this province.

I have read into the record for her benefit, the new programming that is available at Red River Community College, Assiniboine Community College, Keewatin Community College. I have also referenced at each of those colleges, the expanded programs or the modification of those programs which will move those programs into being programs that are more effective for Manitoba, moving Manitoba into the year 2000.

Ms. Friesen: Well, I can understand why this government does not want to look at its last four years' record. I think the 60,000 people unemployed in this province do expect some answers on that. It seems to me that community colleges is one of the areas where we can begin to make some inroads into getting people into areas of employment where there are jobs. These may be jobs that seem to be listed here: the Active Recruitment jobs, those where there are high demand skills.

(Mr. Ben Sveinson, Acting Chairperson, in the Chair)

The minister seems to make the assumption that it is either/or: Either you have an entry level clerical course or you have the higher level skills. Nobody is objecting to having the higher level skills, but why are you eliminating the other programs, the ones that would begin to get people into areas where

there are jobs? As for the \$2.5 million that the minister keeps making a reference to as an increase in college programming, it seems to me that does not bring us back even to the position we were two years ago in the area of the funding for community colleges.

So is the minister supporting a policy where we are not matching jobs and recruitment areas to training programs in our public institutions? Is she supporting a policy where the community colleges are to remain at the level they were two years ago?

Mrs. Vodrey: Mr. Acting Chairperson, I will remind the member that this government's position is to restructure the colleges within the resources available to the Province of Manitoba and to the people of Manitoba. We believe that this restructuring has strengthened the programs. It has strengthened the programs in the area of high demand and high marketability, high employability.

I will remind her that this approach is significantly different from the approach of the 1980s when her party was in power. Her party spent money to increase the debt of this province. They spent money in a jobs fund for short-term job creation that did not add to the skills training of this province, and the colleges during the '80s were stagnant. I think that she should remember her government's record.

I will remind her again that the full-time enrollment in the colleges reflects what it was two years ago. We believe that the college programming is now stronger. We believe that the outcomes are stronger and the planning for the future will again come through the labour-market strategy which we have spoken about during these Estimates, and as the colleges move on to governance and have a greater opportunity to then develop their autonomy and be responsive to their communities, then we will continue to look at the kind of programming available.

* (1630)

Ms. Friesen: Mr. Acting Chairperson, I think the review of college programs and the development of colleges is an important issue for every government. I am not opposed to the review. I am not opposed to re-evaluation or to changes in the colleges. So it is erroneous of the minister to make those kinds of claims.

I will remind her that there were not 59,000 people in this province unemployed when the NDP government was in power. There were training

programs, which as she said, were short term. I will remind the minister again that these were short term, but not short-sighted policies, to keep people in training, in education, to give them hope, to give them a sense of opportunity, the ability to enter at the very beginning level of the labour force is something which is not available to many of the constituents that I now have to deal with.

I do not know if the minister from her riding has to deal with people like that who have no hope, who have absolutely no future, and see the continuing and growing lines of waiting lists at community colleges, who cannot afford the private fees that are being charged at the secretarial colleges, for example. To speak to those people on a daily basis is one of the most frustrating and the most debilitating parts of being a representative in Manitoba.

When I see the community colleges contracting and when I see high areas of demand and skill levels where there is a turnover and I see a government which talks with much glee about there not being poverty in Manitoba, as the Minister of Natural Resources (Mr. Enns) was saying today, it makes me very, very angry, Mr. Acting Chairperson.

Let us look at the North. Let us look at the native communities. The minister says that she wants to make the colleges more responsive to their communities.

Could I ask then why—

The Acting Chairperson (Mr. Sveinsson): Order, please. The honourable Minister of Education on a point of order.

Mrs. Vodrey: No, Mr. Acting Chairperson, it is simply a response before we go on to the next question. I think it is very important for the member to understand that she certainly does not own for herself as an MLA the ability to empathize with people in Manitoba who are in situations of poverty.

I would like to remind her and state for the record that certainly the MLAs on this side also have the opportunity to speak to those Manitobans, and I will speak in terms of my own constituency and my own background, which has been 15, 17 years working with those people directly. Nothing has changed. I have spent a great deal of time speaking with people whose situations are of great concern to me as an individual, to me as an MLA and minister, and to our government. That is why our government, because we are so concerned, because we have a belief that

the situation is one of concern, that we have developed an economic policy.

In relation to education, we have done restructuring of the colleges as we have discussed. We are making every effort to provide Manitoba with a trained work force, so that those people will be very well prepared to assist Manitoba to move into the 1990s. That is exactly why the colleges were restructured to give a marketability, high-quality education that will not only assist the students themselves, but to assist the economy of the province.

I would like to say that our solutions are not short term, quick fix. They are not band-aid solutions. They are long-term cures. They are the effort of this government to deal with those very real issues which we recognize also as being very important.

Ms. Friesen: Mr. Acting Chairperson, let us look then at the northern college, at Keewatin Community College, and to look at the programs that were cut there. Small motors, for example, was eliminated, and yet when I look at page 6 of the report, High Demand Occupations, in native communities, one of the things which is talked about there is certified trade persons, plumbers, electricians, carpenters. Yet plumbing, carpentry and small motors were all eliminated. Why is that?

Mrs. Vodrey: Mr. Acting Chairperson, I will remind the member that the appropriation for Keewatin Community College is 16-5(e), and issues relating to its program would be best discussed under its appropriation.

Ms. Friesen: As the minister so often said, we are looking at cuts which were made two years ago. So we are talking, in broad terms, about the policy guidelines for the colleges as they move to governance.

Appropriation 16-5(b) looks at the overall policy and program changes in response to government objectives. It also looks at research and analysis on the labour market. It seems to me that is what I am talking about here, is the match between the labour market, the skills and the occupations that are in demand according to the minister's own reports, and the kind of programs which have been discontinued at community colleges. So I submit that this is a policy issue we are looking at, and I would like to discuss it under this area.

Mrs. Vodrey: If the member's remarks are referenced in Hansard, we will see that she

specifically referenced Keewatin Community College and programming in the North. That is most effectively discussed under its appropriation, 16-5(e).

Ms. Friesen: Mr. Acting Chairperson, we have been talking for some time about Red River Community College, which also has a different appropriation line. I wonder why the minister was prepared to discuss Red River but is not now prepared to discuss Keewatin.

The Acting Chairperson (Mr. Sveinson): If we are going to move these Estimates at all, perhaps we could agree to disagree, to some degree, and continue on in the sections that we are, and in fact the member for Wolseley will be able to ask her questions as far as the—

Mr. Reg Alcock (Osborne): Mr. Acting Chairperson, on a point of order.

The Acting Chairperson (Mr. Sveinson): When I am finished, member for Osborne.

Just so long as we can move along without arguing, in fact, which section we are in.

Point of Order

Mr. Alcock: We are discussing a policy analysis section of the department. It has been the tradition in this House that debate on that, because such a branch has a wide-ranging responsibility, we have discussed often the actions of a variety of institutions and organizations. We have been discussing that for two days now, and I think the questions that the member for Wolseley is asking are quite in order and quite appropriate. There is no need to pass this particular section in order to have this discussion.

If the minister is afraid to answer the questions—
* (1640)

The Acting Chairperson (Mr. Sveinson): Order, please.

Point of Order

Mrs. Vodrey: On a point of order, Mr. Acting Chairperson. Those remarks are extremely personal, they are attributing a motivation and they have no place in these Estimates debates.

The Acting Chairperson (Mr. Sveinson): Order, please. I recognize the point of order brought up by the Minister of Education. On that point of order, I would simply ask the members within the Assembly

to choose their wording well, and we will proceed from there.

It is the normal practice of the committee to go line by line through the Estimates. We do, in fact, also try to offer some latitude in the questions. At this point, I would ask the member to try to stick a little closer to the lines that we are in fact examining at this point.

* * *

Hon. Harry Enns (Minister of Natural Resources): Mr. Acting Chairperson, I was momentarily called out of the House, but it is also a long tradition of this House that all members have an opportunity to engage in the discussions of the Estimates. I wonder if you could, for my benefit, tell me which particular line we are on?

The Acting Chairperson (Mr. Sveinson): Item 5.(b)(1) Salaries.

Ms. Friesen: Mr. Acting Chairperson, I thought that I had the floor, and I thought I had posed a question to the minister dealing with overall policy about community colleges and about courses which had been cut in areas where jobs appear to be available, according to her own reports.

So I will restate that, asking why courses were cut in small motors, carpentry, plumbing two years ago, Keewatin Community College, when her own report says that certified tradespersons, plumbers, electricians and carpenters were high-demand occupations in native communities?

Mrs. Vodrey: Mr. Acting Chairperson, again I maintain that these are program decisions, not policy decisions. These are best discussed under the appropriation 16-5(e).

However, for the honourable member's benefit, in this case, I would like to note that the programs she has referred to were funded under the Limestone Training agreement. Their mandate has ended, and there were significant difficulties within the mandate of the Limestone Training agreement. Students very rarely progress beyond Level I or Level II, and for her information, approximately 30 of 1,500 students obtained trades qualifications. This was an NDP approach. It did not work.

This government is now consulting through the Northern Development Commission. We believe as the colleges move to governance that we will, as I said previously, offer a stronger mix of programs and that we will be able to work through the

governance process in a much stronger way to meet the needs of the North.

* (1650)

Ms. Friesen: Mr. Acting Chairperson, we are discussing options for policy and program changes, as it says under appropriation 16-5(b). Continuing on that line, it seems to me that as I looked at the document that the minister tabled, the 1991-92 community college program reductions, the alternative programs which were proposed in that document, for example, the small motors at Keewatin Community College, was in fact correspondence or Red River Community College, which was also the alternative proposed for carpentry and for plumbing.

Could I ask the minister whether that is still their policy, that people in the North who are no longer served by the programs which have been cut by this government are to apply to correspondence schools or to come to Winnipeg?

Mrs. Vodrey: Mr. Acting Chairperson, well, it is very important for programs to be offered where the demand is sufficient and where the resources are available. We have worked very hard to ensure that there is a high quality of programming in the North, but as I told the member in my last answer, the funding under the Limestone Agreement has expired. In making decisions about programs, following that expiry, we also looked at graduation rates, we looked at the employment opportunities and we looked at other related factors in making those decisions.

I would remind the member the programs that she referenced are approximately six or eight programs out of approximately 50 programs. The other programs are continuing, and in addition to their continuing, I would like to tell her again the programs that we have added at Keewatin Community College. We have added business administration, small business management, computer applications, hospitality management, forestry technician, pulp and paper technician.

I think, with the level of programming that we have and the new programming, that we are showing we do have a commitment and are attempting to be responsive to the needs in the North.

Ms. Friesen: What I am trying to do is to reconcile the research within, I guess this is Manitoba Education and Training and Employment and Immigration Canada, which list the following skills

and occupations required in native communities and reserves and as high-demand occupations in Manitoba: alcohol and drug abuse counsellor, community development worker, nurses, teachers, social workers, Child and Family Services workers, management skills, certified tradespersons—plumber, electrician and carpenter.

The programs which the minister listed as having been added, the business skills and the one or two others, would come under the category of management skills, community and private organizations. There is one element there that the government has matched up its new programs to the high demand. What I am looking at is you actually cancelled ones in other areas. That is what puzzles me. Even on your own list, the small motors is listed as a medium to high demand as it is being cut, and students are being offered private delivery or alternate programs under correspondence or Red River Community College.

I am asking, is that still the government policy, that in technical areas correspondence programs are seen as a suitable alternative, and a second alternative is to expect the students to move into Winnipeg?

Mrs. Vodrey: I will again remind the honourable member that some of these may be discussed fully under other appropriations, because when we get to those appropriations I think she will find that some programming and related types of programming are delivered through other parts of the Department of Education, and I reference particularly the New Careers Program which is discussed under 16-5(n), and by way of example the retail management and alcohol counsellors program. I reference also the KCC nursing program, the Northern Bachelor of Nursing Program with the Swampy Cree Tribal Council and the BUNTEP program, and the Natural Resources officers program.

Then I will also tell her that some of the specific programs which she has also referenced, there was an extremely low graduation rate. I gave some samples of numbers, approximately 30 out of 1,500 actually completed the program; however, since those programs are not offered under their previous

place, we also have some information that says there has been no reduction in the usual level of apprenticeship funded under Employment and Immigration Canada.

* (1700)

Secondly, I would like to also reference that as we have talked about during these Estimates, I will be signing shortly a new Canada-Manitoba Labour Force Development Agreement. Within that agreement there will be special measures looking at the participation rate and the success rate for aboriginal Manitobans, and that we are looking to new approaches, that the previous approaches of the NDP government did not work. The numbers speak for themselves. We now need to look for a new way to involve aboriginal Manitobans in the trades. We will be looking for ways to do that partly through the new agreement.

The Acting Chairperson (Mr. Sveinson): Order, please. The hour being 5 p.m. and time for private members' hour, committee rise.

Call in the Speaker.

IN SESSION

Mr. Speaker: The hour being 5 p.m., time for private members' hour.

Committee Report

Mr. Ben Sveinson (Acting Chairperson of Committees): Mr. Speaker, the Committee of Supply has adopted certain resolutions, directs me to report progress and asks leave to sit again. I move, seconded by the honourable member for Gimli (Mr. Helwer), that the report of the committee be received.

Motion agreed to.

* * *

Mr. Speaker: Is it the will of the House to call it six o'clock? [Agreed]

The hour being 6 p.m., this House is now adjourned and stands adjourned until 1:30 p.m. Tuesday.

Legislative Assembly of Manitoba

Thursday, May 14, 1992

CONTENTS

ROUTINE PROCEEDINGS

Presenting Petitions

Heritage Federation Granting Authority
Lamoureux 3360

Brandon General Hospital Funding
L. Evans 3360

Reading and Receiving Petitions

Fight Back Against Child Abuse Campaign
Barrett 3360

Independent Children's Advocate Office
Carstairs 3360

Ministerial Statement

Multilateral Discussions on the Constitution
McCrae 3361
Friesen 3362
Carstairs 3362

Oral Questions

Health Care System Reform
Wasylycia-Leis; Orchard; Carstairs 3363

Youth Unemployment Rate
L. Evans; Downey 3368

Poverty Rate
Martindale; Orchard 3369

Social Assistance
Martindale; Orchard 3370

Health Care System Reform
Cheema; Orchard 3370

Pharmaceutical Costs
Santos; Ducharme 3371

Nonpolitical Statements

9th Annual AIDS Candlelight
Memorial and Mobilization
Barrett 3371

Swan River Metis Friendship Centre
Square Dance Competition
Wowchuk 3372

Winnipeg Thunder Basketball Team
C. Evans 3372

100th Anniversary, Westminster Church
Friesen 3372

ORDERS OF THE DAY

Matter of Grievance

Health Estimates Process
L. Evans 3374

Manitoba Poverty Levels
Martindale 3381

Committee of Supply

Health 3389
Education and Training 3398