

**Fifth Session – Forty-Second Legislature**  
of the  
**Legislative Assembly of Manitoba**  
**DEBATES**  
and  
**PROCEEDINGS**  
**Official Report**  
**(Hansard)**

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**MANITOBA LEGISLATIVE ASSEMBLY**  
**Forty-Second Legislature**

<b>Member</b>	<b>Constituency</b>	<b>Political Affiliation</b>
AL TOMARE, Nello	Transcona	NDP
ASAGWARA, Uzoma	Union Station	NDP
BRAR, Diljeet	Burrows	NDP
BUSHIE, Ian	Keewatinook	NDP
CLARKE, Eileen, Hon.	Agassiz	PC
COX, Cathy	Kildonan-River East	PC
CULLEN, Cliff, Hon.	Spruce Woods	PC
DRIEDGER, Myrna, Hon.	Roblin	PC
EICHLER, Ralph	Lakeside	PC
EWASKO, Wayne, Hon.	Lac du Bonnet	PC
FONTAINE, Nahanni	St. Johns	NDP
GERRARD, Jon, Hon.	River Heights	Lib.
GOERTZEN, Kelvin, Hon.	Steinbach	PC
GORDON, Audrey, Hon.	Southdale	PC
GUENTER, Josh	Borderland	PC
GUILLEMARD, Sarah, Hon.	Fort Richmond	PC
HELWER, Reg	Brandon West	PC
ISLEIFSON, Len	Brandon East	PC
JOHNSON, Derek, Hon.	Interlake-Gimli	PC
JOHNSTON, Scott, Hon.	Assiniboia	PC
KHAN, Obby, Hon.	Fort Whyte	PC
KINEW, Wab	Fort Rouge	NDP
KLEIN, Kevin E., Hon.	Kirkfield Park	PC
LAGASSÉ, Bob	Dawson Trail	PC
LAGIMODIERE, Alan	Selkirk	PC
LAMONT, Dougald	St. Boniface	Lib.
LAMOUREUX, Cindy	Tyndall Park	Lib.
LATHLIN, Amanda	The Pas-Kameesak	NDP
LINDSEY, Tom	Flin Flon	NDP
MALOWAY, Jim	Elmwood	NDP
MARCELINO, Malaya	Notre Dame	NDP
MARTIN, Shannon	McPhillips	PC
MICHALESKI, Brad	Dauphin	PC
MICKLEFIELD, Andrew	Rossmere	PC
MORLEY-LECOMTE, Janice, Hon.	Seine River	PC
MOSES, Jamie	St. Vital	NDP
NAYLOR, Lisa	Wolseley	NDP
NESBITT, Greg, Hon.	Riding Mountain	PC
PEDERSEN, Blaine	Midland	PC
PIWNIUK, Doyle, Hon.	Turtle Mountain	PC
REDHEAD, Eric	Thompson	NDP
REYES, Jon, Hon.	Waverley	PC
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WHARTON, Jeff, Hon.	Red River North	PC
WIEBE, Matt	Concordia	NDP
WISHART, Ian	Portage la Prairie	PC
WOWCHUK, Rick	Swan River	PC
<i>Vacant</i>	Morden-Winkler	

LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, May 11, 2023

*The House met at 10 a.m.*

**Madam Speaker:** O Eternal and Almighty God, from Whom all power and wisdom come, we are assembled here before Thee to frame such laws as may tend to the welfare and prosperity of our province. Grant, O merciful God, we pray Thee, that we may desire only that which is in accordance with Thy will, that we may seek it with wisdom and know it with certainty and accomplish it perfectly for the glory and honour of Thy name and for the welfare of all our people. Amen.

We acknowledge we are gathered on Treaty 1 territory and that Manitoba is located on the treaty territories and ancestral lands of the Anishinaabeg, Anishinewuk, the Dakota Oyate, Denesuline and Nehethowuk nations. We acknowledge Manitoba is located on the Homeland of the Red River Métis. We acknowledge northern Manitoba includes lands that were and are the ancestral lands of the Inuit. We respect the spirit and intent of treaties and treaty making and remain committed to working in partnership with First Nations, Inuit and Métis people in the spirit of truth, reconciliation and collaboration.

Good morning, everybody. Please be seated.

**ORDERS OF THE DAY**

**PRIVATE MEMBERS' BUSINESS**

**MLA Nahanni Fontaine (Official Opposition House Leader):** Would you call for second reading, Bill 201, The Residential Tenancies Amendment Act, this morning.

**Madam Speaker:** It has been announced that the House will consider second reading of Bill 201 this morning.

**SECOND READINGS—PUBLIC BILLS**

**Bill 201—The Residential Tenancies Amendment Act**

**Madam Speaker:** I will therefore call second reading, Bill 201, The Residential Tenancies Amendment Act.

**Mr. Adrien Sala (St. James):** I move, seconded by the member for St. Johns (MLA Fontaine), that Bill 201, The Residential Tenancies Amendment Act,

now be read a second time and be referred to a committee of this House.

**Motion presented.**

**Mr. Sala:** It gives me great pleasure to be able to stand up today in this House and to speak to Bill 201.

I want to start by welcoming some folks who are here with us in the gallery today. We have some housing advocates from the Canadian Centre for Housing Rights and other housing advocates who have joined us here today out of their concern about the impact of skyrocketing rents in Manitoba, and specifically their concern about the impact of above-guideline rent increases on Manitobans.

So, we are here today, of course, to debate this bill, but the fundamental question that we're really here today to ask is, do legislators in this House want to put a stop to skyrocketing rents in Manitoba?

It's a simple question: yes or no. You know, and further to that, do legislators in this House care about the fact that residents of their communities are making choices between paying their rent or being able to pay for their food?

And today we have a solution for that; we have a solution for members opposite, who've had two opportunities to date to support this bill but have refused to do so. So, today is the third time that we're bringing this forward. And we do hope that members across will consider this as an opportunity to help, not only their constituents, but constituents across the province.

You know, I want to start just by taking a moment here just to clarify, or just to speak to the scope of the problem that we face in Manitoba when it comes to above-guideline rent increases. And I'm going to read a quote here from a Global News story that was just from this past January 19th, 2023.

From a story, again from Global, entitled Climbing Winnipeg Rents Have Advocates Concerned How Tenants Will Cope. The quote—here's a quote from that story: provincial data suggests the Residential Tenancies Branch approved above-guideline rent increases for 25,381 rental units, more than 58 per cent more than the year before, at an average hike of 9.8 per cent in 2022.

The applications the RTB decided on last year had requested an average of 12.3 per cent. Another quote from that same article: year over year, rents in Winnipeg are up 5.3 per cent for one-bedroom apartments and 11.4 per cent for two-bedroom units, and that's according to a January report from Rentals.ca and that's despite what we've heard from this government, that they have reportedly frozen rents at zero per cent for '22 and '23.

So, for years now, we've seen that rental housing costs in Manitoba have continued to skyrocket, and there's just no question about that, as we've seen in those details I just shared in that story. And, you know, a lot of people in this province are looking to their government and are looking to this Legislature to put a stop to this problem.

And maybe this government—maybe members of this government themselves wish that there was a way to put a stop to this issue. But we've got good news, Madam Speaker. This bill is that opportunity. This bill provides this government with the opportunity to respond to the costs, to the skyrocketing costs of rental housing in this province that have been fuelling an affordability crisis, and making an existing affordability crisis the—with the increasing cost of food, the increasing cost of gas; they have an opportunity to help put a stop to one of the major contributors to our affordability challenges here in this province.

We know that, in addition to, you know, inflation and all those challenges, wages aren't going up. People's wages aren't going up, they're staying stagnant, but costs of living are going up, and housing is one of the biggest contributors to that.

You know, I first learned about this issue in my own community when constituents came to share stories about significant rent increases that were being proposed in their apartments. Rent increases of 20 and 25 per cent. And when I first heard about those rent increases, I was shocked; I didn't think that that was possible. I really didn't think that a property owner could apply rent increases of 20 or 25 per cent on a tenant.

But when I dug into it, and I looked more closely at what was happening, I learned that, in fact, those property owners were following the rules that had been set out before them: rules that are enshrined in residential tenancies legislation, that we all—that every single member of this government has the opportunity to change, should they want to do that, should they want to take action.

And, you know, when I heard about that and I started to dig in deeper, what I saw was that this issue, of course, wasn't just limited to St. James, it wasn't just limited to west Winnipeg, it wasn't just limited to Winnipeg overall; it was impacting the entire province.

And I want to take a second here just to highlight how important this is that it doesn't just impact the constituencies of members on this side of the House; this issue is impacting constituents for members across the way here.

\* (10:10)

Each and every single member of this House has constituents within their communities that are facing rent eviction, that are facing decisions, very difficult decisions, to either, again, pay for their rent or pay for food, because we are failing to act, to take action in this House to change the legislation to ensure that this problem is stopped.

We have that opportunity here, and I hope that the members across will take that opportunity today. This shouldn't be a partisan issue. I really implore them today to consider this, to consider joining in and taking action to put a stop to it.

You know, when we wanted to look at how we could put a stop to this, we looked at the issues with AGIs in this province, and we identified four key issues that we can respond to and that, if we can respond to, will significantly lessen the burden of AGIs on Manitoban renters.

The first is that our current legislation allows for a laundry list of expenses to be claimed by property owners. And that has allowed them to download the costs of, for example, acquiring a new drill, a new hammer. They can even—they can download banking service charges onto renters. That's not right, Madam Speaker.

That list of allowable capital expenses is also incredibly extensive. And so, we know that that's a big issue, and this bill proposes to respond to that by significantly limiting the allowable capital expenditures.

So, in those cases where a landlord does have a massive expense—a new boiler, a new roof—you know, those types of expenses would be allowable, but we're limiting what can be allowed. That's a significant contributor to the problem, is that you can drive a Mack truck through this legislation in terms of the

types of things that can be claimed. That's a problem; this legislation puts a stop to that.

Second big issue is that right now, landlords can apply above-guideline increases before they're even approved by the residential tenancies board. So, we have renters who are getting notices that their rents are going up by, sometimes 20, 30, 50 per cent, and they're being told to pay that before RTB has even cast an eye on the application from the landlord. That's an issue; this bill puts a stop to that.

Another big concern is the unethical use of rent discounts. We have people signing up for leases in apartment buildings and are coming in under the pretense that they've got a rent discount that may be worth two, three, four hundred dollars; and when they get in, the landlord is able to pull that rug from under them and remove that discount without any warning.

So, a renter can come in and suddenly face hundreds of dollars in increased rental costs. That's not right, Madam Speaker. That needs to be stopped; this bill puts a stop to that.

And the last major concern is that AGIs, where required, or that AGIs where required, this bill would propose to allow when there is a need for a big expenditure, and when those do need to be passed on to renters, for the RTB to spread those increases over a long period of time.

Those are four major issues this bill responds to. We feel that this bill proposes very reasonable amendments to The Residential Tenancies Act that help to create a better balance between the interests of renters in Manitoba and landlords. A better balance.

And right now the scales are tipped far too much in the favour of landlords. We want to see that balance go back to be a more fair and equal balance between the interests of renters and landlords.

This is a problem we can fix, Madam Speaker. This is a problem that impacts the constituents for every single one of the members across. Today I ask them to help us respond to this very real issue. If they don't like the bill in the way that it's written, I ask them to come forward with amendments. Propose changes to it. Help us solve this problem that are—that's facing Manitoban renters. We can do better. We can help respond to our affordability crisis in Manitoba together today.

Thank you.

## Questions

**Madam Speaker:** A question period of up to 10 minutes will be held. Questions may be addressed to the sponsoring member by any member in the following sequence: first question to be asked by a member from another party; this is to be followed by a rotation between the parties; each independent member may ask one question. And no question or answer shall exceed 45 seconds.

**Mr. Len Isleifson (Brandon East):** I want to thank the member for bringing this to the floor again so we can have further discussion on this bill.

I do understand, and it appears that he is doing this because he cares for the outcome of those who are renting, and he wants to keep their expenses down. I totally understand that.

But I'm wondering why, then, that this member and everybody sitting on his side of the House, actually voted against a bill that would have brought in a rent freeze for Manitobans for 2022 and 2023.

**Mr. Adrien Sala (St. James):** Yes, the reality is this is distracting from the issue we're here to talk about today.

This is not a partisan matter, Madam Speaker. We are coming forward with a targeted solution to respond to our out of control above-guideline rent increase problem. This government has the opportunity to respond to that problem.

They can take that opportunity today to help make life more affordable for Manitobans, if they choose to.

**Mrs. Bernadette Smith (Point Douglas):** I want to thank my colleague for bringing this forward and bringing the voice forward of Manitobans who are really struggling with paying rent.

So, I'll ask my colleague: What sort of expenditures could be eligible for a landlord to have an above-guideline increase approved under this bill?

**Mr. Sala:** Yes, I really appreciate the question from my colleague.

So, the types of expenditures that could be included under this bill would include an extraordinary increase in municipal taxes, an extraordinary increase in utility charges or an eligible capital expense, which are listed in the proposed bill, that again, would be considered extraordinary; something very large like a roof replacement or a boiler replacement.

So, again, it very much tilts that balance to be a little bit more back in favour of tenants.

**Mr. Dougald Lamont (St. Boniface):** I know this is a very serious concern, and I've heard from folks in my own constituency. One of the issues, actually, with the RTB is that it only applies to rents as it says, equal to—or it doesn't apply to anything over \$1,500 or \$1,510.

So, will this actually make any difference for any rents that are over \$1,500?

**Mr. Sala:** I appreciate that. It's an interesting question and an important one.

To my understanding, this bill would impact the ability—would impact AGIs across the province, regardless of what rent level or what those rental costs are.

**Mr. Josh Guenter (Borderland):** I do thank the member for St. James (Mr. Sala) for his work on this bill. He's brought it forward once again.

My question relates to vacancy rates. I wonder if the member can perhaps talk a little bit about the vacancy rate for rental housing in Winnipeg, as it perhaps compares to other jurisdictions. There is, I believe, a relationship—and if you'd want to talk about it—between rental rates and vacancy rates, the number of units available.

**Mr. Sala:** Yes, I'm not exactly sure what the focus of the question is. Maybe the member is suggesting that because of our rental vacancy rates that the market should respond and property owners should have the ability to raise rates as high as they'd like. I don't know if that's what he's suggesting.

What we're suggesting today is we have an out of control above-guideline rent increase issue. The reason it's here is because our legislation permits that issue to continue, to go on and to propagate.

We can respond to that issue. We can fix this issue today if this government is willing to lock arms and support this bill.

**Mrs. Smith:** Can the member tell us how this bill will specifically benefit low-income Manitobans and seniors?

**Mr. Sala:** Yes, that's such an important question and I appreciate that my colleague has asked it.

The above-guideline rent increase issue in Manitoba is impacting low-income people in this province the most; of course, seniors, people on fixed

incomes, people with disabilities. These folks are not in a position to handle these out of control above-guideline increases that are being faced.

We're seeing—25,000 units a year are seeing these huge increases being applied. That's not fair. We've got tenants that are, again, making these choices between medicine, food and rent.

That can't go on, Madam Speaker.

**Mr. Isleifson:** I'm just going to seek some clarification from the member, and I have read the bill. I have not read the entire act itself. But in the bill you have, under proposed legislation: clause 125.3(b), is amended by striking out actual expenses and substituting costs and expenses set out in subsection 123(2).

I'm just wondering if the member can explain the difference between the actual expense and the cost and expenses as set out in that clause.

**Mr. Sala:** Yes, I mean I appreciate the member's interest in, you know, getting right into the weeds there. I think what we'll focus on here, today, is that big picture.

\* (10:20)

The key concern is that our legislation as written permits for a laundry list of expenses to be included when property owners are applying for AGIs. And in fact that laundry list is what encourages this endless stream of AGIs. Because again, you can drive a Mack truck through this legislation.

That's the key problem that we need to focus on. That's the key problem that this legislation responds to.

**Mrs. Smith:** Again, I want to thank my colleague for doing this work and, you know, work extensive—working extensively with community members, those that are on the front lines as well as renters who have come forward to say, like, this government is doing—isn't doing enough to protect them and to ensure that their rents aren't increased.

So, could the member tell us how the PC government has made life harder for Manitobans in terms of rent increases?

**Mr. Sala:** Yes, that's an important question. And I do want to say, you know, off the top here, that we have seen over the last many years a broad variety of challenges that renters are being forced to face. We've seen this out-of-control, above-guideline rent increase

issue of course, which is what we're here today to talk about.

But also, when the government decided to apply \$175 increase in taxes on renters, that's also made life a lot harder when they reduce the value of that renter's tax credit from \$700 to \$525. And, just adding to that, there are a massive number of underused Manitoba housing units that could also be renovated, repaired, and that could go towards helping low-income Manitobans to get access to the housing that they need.

**Mr. Guenter:** I find it interesting that we're debating this bill after the members opposite voted against a bill put forward by the member for Rossmere (Mr. Micklefield) that would have disallowed landlords from charging a deposit fee when simply signing up to get onto a waiting list. We think that that's wrong.

Why should we support this, and why did they oppose that measure?

**Mr. Sala:** The point that's been brought forward here by the member for Borderland (Mr. Guenter), I would just like to say clearly, that issue where people are purportedly being asked to provide deposits just in order to apply is not an issue that any of us on this side of the House had heard of before. That's a very small, minor concern at this point.

A real concern and one that is impacting Manitobans at scale—thousands and thousands and thousands of Manitobans every year—are seeing 10, 20, 30 per cent increases in their rent. That can add up to \$1,000 more a year in cost, \$1,500 more a year in cost.

That is a real issue. That's a real concern that we in this Legislature should be focused on responding to.

**Mrs. Smith:** Again, you know, I just want to reiterate what the member was saying earlier about, you know, signing on to a lease and then, you know—you're paying \$800 but then you're getting a reduced rate and maybe you're paying \$726. So, you're under the impression that you're getting that discount for the whole duration that you're renting.

How does this bill impact that and the ability for landlords to increase or take away that discount?

**Mr. Sala:** Yes, I'm sorry; I will admit I missed the very first part of the question, but I will speak broadly to the concern about rent discounts.

That is an issue that a lot of renters in Manitoba continue to face where they sign up for a lease. They get into that lease and suddenly, that landlord pulls the rug out from under them and says, your rent's going up next month by \$300; your rent's going up next month by \$500.

Getting rid of that issue, getting rid of that problem and preventing that from happening will have a significant impact on low-income renters who are at risk of rent eviction, who are at risk of, again, being forced to make these kinds of choices between being able to pay their rent, paying food or paying for medicine. Getting rid of that problem will help to respond to that issue.

**Mr. Isleifson:** I know we always ask a question of consultation and who members have consulted with on this type of bill. And I may be wrong, but I do believe the member from Fort Garry sat on the RTB for over 13 years.

So, I'm wondering if the member presenting this bill actually consulted with that member and what some of the reasons were, back when they were on that board, of why these occurrences happened.

**Mr. Sala:** Yes, my only response to that to the member for Brandon East (Mr. Isleifson) is I want to remind him, you have constituents that are being impacted by this problem. You're staring back into the distant past here and I—

**Madam Speaker:** Order, please.

**Mr. Sala:**—understand what's happening—

**Madam Speaker:** Order. I would ask the member to direct his responses through the Chair.

**Mr. Sala:** My apologies, Madam Speaker.

This is an issue that's impacting that member's constituents every single day. Looking into the distant past is a distraction. I ask him today—I know he understands this issue, it's not hard to understand—and I ask him today, consider supporting this bill; this will help your constituents.

Don't look in the distant past, look ahead. Fix the problem.

**Madam Speaker:** The time for this question period has expired.

### Debate

**Madam Speaker:** Debate is open.

**Hon. James Teitsma (Minister of Consumer Protection and Government Services):** It's a pleasure to get up in this House and talk about this bill put forward by the presumed future leader of the NDP party. I do, you know, I do want to commend the member on some degree.

There are things—if there are things that are praiseworthy, I think you should say them. And so, what I would say is, you know, out of all the private member legislation that has been brought forward before this House by the members opposite, this is a thoughtful and well-articulated bill with a fair bit of research and thought gone into it. So, I do appreciate that.

And I do appreciate, also, the attention that collectively we've been, as a Legislature, we've been paying to The Residential Tenancies Act and to the—*[interjection]*

**Madam Speaker:** Order.

**Mr. Teitsma:** —circumstances of renters in general. Certainly, that's why our government has already put forward legislation on the—at least past first reading—to deal with some of the issues faced by renters, specifically when their neighbours are conducting criminal activities out of their units. And they really should be evicted and should be taken away from that; that's a piece of legislation that I've brought before this House.

So, I commend the member for bringing forward this legislation. We've also briefly mentioned the legislation brought forward by the member for Rossmere (Mr. Micklefield). I wasn't in the House that day, and I suppose I shouldn't be saying that, but what I will say is that I can't recall if the NDP voted against it or talked it out. They talked it out, so appreciate the opportunity that it's still available to do the right thing on that bill and pass it along.

Certainly that would be my recommendation to the members opposite, is to ensure that that bill goes forward. Because I think it is—it's a good bill and it's a relatively simple one. This bill, I would not call relatively simple. I'd say it's, yes, it's hard to work through in terms of the complexities and wondering what might happen next.

Because I think what the member has observed is that, when you put a set of rules and strictures in place, there's—when there's an inordinate of pressure, people find ways, sometimes, to work around and through some of these rules.

The members opposite might be more familiar with that sort of thing than I am, but what I would say—and I would dispute what the member—like, the path to better market—a better market for rentals in general, and a better experience for tenants is simple. It is an increase in supply.

When there is more than adequate supply of rental units, that's when landlords have to compete to attract tenants. That's where tenants have choices. I mean, it's—if the member opposite disputed it, I would ask him about his new car buying experience, say 10 years ago versus a year ago.

Well, 10 years ago, you could walk into the car lot and there's a hundred cars on the lot, and everybody in the building is highly motivated to sale. I myself, I purchased a vehicle one time on March the 30th; I was told because it was the end of the first quarter, the sales guys were super motivated to sell the vehicle and to get it done before the end of Q1 because they were judged on their Q1 performance. And so I was able to negotiate a significant discount from the list price when I walked into the dealership. *[interjection]*

Now, I would really appreciate it if the member for Concordia (Mr. Wiebe) could quit the heckling and let me get through my speech. It's hard enough to concentrate in this Chamber at the best of times, but he's making it exceptionally difficult. And, given the way that the Speaker is nodding her head, I'm sure she has my full agreement.

Now, what is needed is an increase in supply. And I appreciate that the member agrees—*[interjection]*

**Madam Speaker:** Order.

**Mr. Teitsma:** —with me on at least that, that an increase in supply is exactly what's needed.

Let me finish the analogy of the vehicle purchase, because, as I said, you know, in the past few years pre-pandemic, as we would go to the dealership and pick out a new vehicle, I was always able to negotiate a better price. But that came to a crashing halt in recent times.

\* (10:30)

The last vehicle purchase that I had to execute was essentially, you know, you'll be paying full list price. There will be no exceptions made. We're going to charge you a few extra dealer charges as well, and you're going to take it because there's five other people waiting in line to buy this very same vehicle, which isn't even here yet because it's still being built



in some facility, but we're selling it today to you, and we hope that it'll arrive in six weeks, but if it's 12 or 18, maybe it'll finally arrive.

And that's, in fact, what happened. The last vehicle I purchased, a beautiful Honda Ridgeline from Birchwood Honda in Transcona, or in my own constituency, I say, of Radisson, when I purchased that vehicle—for my wife, incidentally, if you're interested—then, you know, the purchase was made, the promise was made that the vehicle would be—

**Some Honourable Members:** Oh, oh.

**Madam Speaker:** Order. Order. Order.

Couple points here: I am having some difficulty hearing, so there's a couple things I want to say.

Number 1 is that we do not reference even our own absences from the House. The other thing: the heckling isn't helpful to any of this conversation. And the third thing is, I would ask the minister to keep his comments very, very relevant to the actual legislation that is being debated before the House.

**Mr. Teitsma:** I thank you very much, Madam Speaker, for your instruction on that part and, really, my point of describing the way that the purchase on the cars have changed in recent years, compared to years past, is that, in recent years, we have a significant shortage of supply, just like we have rental units.

And when rental units are in short supply, and there's 20 tenants that are all happy to move into one unit, everybody knows what's going to happen: the landlord is in a position to take advantage of the tenant. And that's not what either the member opposite or myself want.

What we want is for tenants to have not just rights, but also the freedom to make choices; the freedom to tell their landlord, you know what? I don't need this. I'm going to go get this other one. What you want is, you want five units available with three or four tenants trying to get in them, so that the landlords are competing for those tenants and saying, you know what? We'll give you better security. We'll give you better parking. We'll give you a lower rate on rentals. We'll offer you a discount, as the member refers to in this bill.

These are the kinds of activities that signal a healthy rental market. A healthy rental market is really what's needed when it comes to solving rent regulation. I think the member thinks that if he just ties a few more knots, gets a few more ropes and puts them all on there, and a few more strictures, then that will stop—

and I don't dispute, necessarily, that that might stop a particular kind of behaviour that he's witnessing in the rental market today.

But what I would dispute with him is that it will solve the problem. It won't solve the problem because the pressure is still going to be there until we get into a place where we have adequate supply of rental units across the market, not just in the upper end, not just in the lower end, but across the market so that there is a smooth continuum of available rental units so that tenants who are—or renters that are looking for a place to live are able to choose from multiple places, and so that you don't have long lineups of applicants trying to get into a single unit, all desperately waiting to be taken advantage of in various ways by sometimes unscrupulous landlords.

That's not the normal experience, I think, in our city, thankfully. Most landlords are well behaved. But I appreciate what the member is getting at. He's not worried about the good landlords; he's worried about the ones that might want to take advantage of tenants, and certainly I would share his concern in that regard.

What I do want to talk about is, briefly, is in terms of how we can help renters and how we have, in fact, helped renters. And one of the best ways to do that is to ensure that they have more money in their pocket.

That's why the budget this year, for example, says that if you're a renter, a senior, a Manitoban with an income of, say, \$30,000 per year, the increase to the basic personal exemption, the increase to the tax brackets that are planned for next year, will reduce the amount of personal property tax that you pay by 23 per cent.

That puts extra money in your pocket each and every paycheque that allows you to then have a little bit more breathing room in your budget so you can pay your rent. You can also pay for, you know, the groceries—we all know the cost of those have gone up. And getting more money in the pockets of Manitobans. That's the priority of our government. That's one of the ways that we provide assistance—*[interjection]*

**Madam Speaker:** Order.

**Mr. Teitsma:** —taking money out of the pockets of Manitobans is the priority of the members opposite and their future leader. And—*[interjection]*

**Madam Speaker:** Order.

**Mr. Teitsma:** —really I would encourage him to continue with some vigour his shadow campaign for

leader. It really is the only hope that that party has, is to replace the person in the front bench. In fact, most of the folks in the front bench are less qualified and less capable and less credible than most of the folks in the second bench of the NDP.

So, you know, kudos to the member, kudos to his neighbours to his right and to his left that sit next to him in the House. I think their qualifications are in fact better than the ones that—of the people sitting in front of him. That's not a really good way to—

**Madam Speaker:** The member's time has expired.

### Introduction of Guests

**Madam Speaker:** I'm going to take this opportunity to introduce some students to you. We have from École Van Walleghem, 25 grade 3 to 4 students under the leadership of Lisa Palmer. And this school is in the constituency of the honourable member for Fort Whyte (Mr. Khan).

So, we welcome you to the Manitoba Legislature.

\* \* \*

**Mrs. Bernadette Smith (Point Douglas):** Again, I want to thank my colleague for bringing this bill forward—a very important bill, a very important voice for renters.

Renters are struggling and then you have a government over here who, you know, takes shots at this side instead of talking about the actual matter at hand.

Manitobans, you know, are at an increased homeless rate, here in Manitoba. And the member from Rossmere—or Radisson, actually said increase the supply. Well, he should be talking to his government about increasing supply.

One only has to drive by a social housing place and see all of the boarded up units. Drive down Main Street. And, you know, I'm sure they can drive by any place in their own constituency and see folks living in bus shelters.

You go to the mall, KP mall, there's people in front of there in the bus shelter. You leave here, there's people out front in the bus shelter. And that's a direct result of what this government's done: increasing rents by \$175 for Manitobans, selling off social housing units.

And you know the member from Brandon East, you know, they also have social housing units. Within Brandon I have so many people reaching out to folks on this side, trying to get help to get into housing in

Brandon, which is unfortunate when they say they're not getting any help there.

There's units available. There's units—there's people that are waiting on a wait-list while this government leaves these units derelict. They don't want to invest the money into the maintenance. They want to leave people on the streets. They want to leave people living in tents.

And they've invested more money in the shelter system instead of building an actual sustainable model, which is fix up the existing housing that they own, build some more housing so that folks can live in dignity. But this government continues to, you know, turn a blind eye to these folks to, you know, let them live without dignity in a bus shelter in -40° weather.

And you know, the member from St. James brings forward this resolution not once, twice, but a third time, or a bill. And this bill does some great things. And one of them is, my daughter lives in an apartment building. Her rent is \$850 but it's actually \$987. She gets a discount. She doesn't know when that discount is going to be gone. And most people when they look for an apartment, they budget. So they budget for the actual rent. So, when she signed her lease, she didn't know about this discount because it was kind of hidden in there.

And fortunately, she's been in her apartment for over a year and they haven't increased or taken away that discount. But they have increased her rent \$25. And for a single person that's, you know, working a minimum wage job, it's tough. You know? Thankfully she has some family support. Not everybody has that.

So, when you're seeing 25 per cent increases in rent from the RTB without even having those approved yet, that's out of people's budgets. They're going to get rent evicted, as my colleague from St. James said.

\* (10:40)

So, what happens to these folks? They end up in the shelter system. Within 30 days, they're entrenched in the shelter system. We need to make sure that we're building social housing, but maintaining the social housing that we have.

And I've talked about this; I lived at 711 Dufferin. My unit that I raised my two children in, when I found myself a single parent, is still boarded up. I think I said this about a year ago in this House: still boarded up. Three bedrooms; a family could be living in that home.

So, this, you know, this bill really sets the maximum increase, and as the member from St. James said, they can offset some of those costs. So, if I have, you know—if they have bank costs, they can incur that onto the renter. Is that fair to the renter? No, that's everyday costs that all of us have to do banking. It shouldn't be shifted down to the renter.

And then as well as going in front of the residential tenancies board, all 310 applications that came forward, every single one of them were approved—every single one of them.

Like, why were there none that were disapproved? Like, I'm sure there were grounds for some of them to not be approved, and yet they were all approved. Like, where's the equity in that for those 310 renters that all of a sudden found themselves paying higher rent and maybe had to move, maybe had to move into a smaller apartment or a smaller home?

I grew up in the North End, so I know the challenges. I see the challenges every day of folks, you know, trying to stay housed, trying to keep their children clothed, trying to keep their lights on, trying to keep food on the table.

And I know that's not only in my constituency. I know that's across the way. I know that there's many that are struggling, you know, in Brandon, in Steinbach, in Winkler, in Dauphin. Wherever it is, no one's immune to it; everyone is struggling. We're in an affordability crisis and this government, you know, could support this today.

And they talked about, the member from Rossmere's bill, and said that we voted against it. We actually didn't vote against it, we were debating it. It came to the floor once, and they expect it to be, you know, passed right away.

We need time to go through the bill, time to talk to folks, and the member from St. James has been doing that. He's brought this forward three times. He's consulted extensively. Renters reach out, not only to us, but are reaching out to that side as well. They need to start listening.

Residential tenancies board shouldn't have the ability—or landlords shouldn't have the ability to increase and make these decisions before residential tenancies board make these decisions. And certainly, if buying a drill to fix a door, you know, whether that drill is \$300 or \$200—to offshoot those costs onto renters, and then also take away that discount at any

time, maybe without any notice, so that someone could prepare.

I know with my daughter, she signs her rent year to year. So, you know, for that year, she's okay, but the next year she might not be okay.

And rents continue to increase, and things are getting harder. And this government, you know, what do they do? They leave social housing boarded up. They allow rent increases to happen. They allow people to get evicted. They increase shelter space instead of actually looking at increasing housing space, and making sure that folks that do leave the shelter to go into housing, that they have the proper wraparound supports.

So, what this bill essentially does is it makes sure that that person, whoever is living in that apartment, isn't surprised by an increase in rent, isn't surprised by getting their discount taken away, doesn't allow the landlord the ability to offset costs onto the renter.

And, you know, the member from St. James said, like, yes, roofs need to be changed, absolutely. But offsetting that whole amount onto a renter all at once will create hardship for renters.

So, what this bill essentially does is it says, yes, we understand that there are costs to maintaining rental suites and rental houses. But let's spread that out so that people can budget and they can ensure that they're not leaving—losing their housing. And they're not going into the shelter system. Or having to downsize.

Growing up, we didn't have our own bedrooms. We couldn't afford to have our own bedrooms. We're seeing that now. We're seeing, you know, 2, 3 people in one room. We're seeing moms sleeping on the couches or dads sleeping on the couches. Because rent is so expensive. Because we're allowing these increases to happen at high rates. And it's not fair to renters.

And it's not fair for this government to say, well, it's a supply demand. When they allow social housing to continue to be boarded up and not make the investments to ensure that those that want to be housed could be housed. And then they say that, you know, we voted against a bill. We didn't vote against a bill.

So, this government has the opportunity to vote with us on a very good bill, to listen to the Manitobans who brought this forward. And the ones that are working on the front lines that are saying, like, we

need to ensure that there's predictability and that costs are being offset and that people stay in their homes.

So, I encourage them to support this bill today, and I thank my colleague from St. James.

**Mr. Len Isleifson (Brandon East):** Madam Speaker, I want to start off by putting on the record that myself and members on this side of the House support Manitobans. We're not against putting protections in place that help Manitobans.

What I struggle with today, Madam Speaker, is I asked a number of questions. And the member from St. James, for my questions, really didn't provide the answers that will help me make a decision. He did start off by saying—on my first question—that this bill was non-partisan and yet the member from Point Douglas just went on about talking about how bad we're doing on this side of the House in her perception. Well, if that's not partisan, I don't know what is.

So, let's bring it back to the bill, then. Let's be non-partisan about the bill. Let's work together to support Manitobans. And, again, when I look at this, and I—the question I asked was consultation. Did the member consult with the member from Fort Garry who was on the RTB for 13 years? His answer to me: don't worry about the past.

Well, Madam Speaker, when things happen in the past, it gives us a clear indication of why we are at where we're at. It provides us this: if errors were made in the past, we can learn from those so that we don't create the same errors going forward. So, understanding the past is extremely important. And that is why I asked the question. I really—I need to know these answers and I'm not getting them.

Another question that was asked about was the voting on the PC rental application bill that would prevent landlords from charging an extra application fee. His comment was, that's a minor concern. Well, are we looking at just one piece of the puzzle in ensuring rent increases don't go above a guideline? Or are we looking at the whole picture of affordable housing, keeping rents low?

I know in—I own a home in Brandon. As most of us do here, we rent property in Winnipeg when we're in because we're from outside of Winnipeg. In my apartment complex that I've been in for seven years—going on seven years now, the rent has gone up a number of times over the rental agreement part.

So, what happens is one year, they replace two elevators. So the rent goes up. And when the member says that you get a notice today and 30 days later, you're paying that, I've never experienced that. Three months; you have to have 90 days' notice.

**An Honourable Member:** You don't even pay your own rent.

**Mr. Isleifson:** I do. By the way, I do pay my rent because the rental that we pay is higher than what we're covered for in the Legislature. So I do pay rent.

But, Madam Speaker, my point is the member said that they have 30 days to get the notice, then they have to pay, which is not factual. I got a notice three months ahead of time explaining to me that there was a rent increase application had gone into the RTB, and that we have the opportunity within the next three months to provide our comments, our concerns, anything we have towards that before the application is processed.

\* (10:50)

That's been my experience, anyways. Maybe it's different somewhere else. I can't debate that. I'm just saying, in my experience, I've always received notice three months ahead of time, and I've always been given the opportunity to address the RTB if I so wish.

The other thing, though, is when we pass bills, like the opposition, we want to know what's in the bill. And I was honest: I have not read the act, but I have read the bill. And there's a piece in this bill that talks about actual expenses versus costs and expenses set out in subsection 123. I was accused of going into the weeds, and that's not of concern right now; that the purpose is, and so on.

So again, I struggle on how to support a bill that we don't get to debate or get answers to the questions that we're asking. It's—to me, this bill, where, maybe on the surface the member thinks it's non-partisan going forward, I truly believe it's a political motivated bill.

There are many things that we can do in conjunction with guidelines. And I agree; we want to do what we can to keep those guidelines down. That's why we have members on the RTB.

Now, if the member from St. James is saying he doesn't trust those board members, doesn't believe in those board members, that's up to him to stand up and say. And you know, again, Madam Speaker, when we talked about debating a non-partisan bill, when you're getting heckling from the other side, that is partisan.

So, we just need to look at how can we provide relief to Manitobans in their housing. And, again, we could just look at our government, who has already provided an additional \$30 million towards Rent Assist benefits for Manitobans. And, again, that quadruples the previous government's—what they've ever spent.

So, we can say easily that we're providing—and can we do more? Absolutely. You'll hear lots that, you know, governments can always do more. And I agree with that; we can always do more. But, again, when we look at helping 23,000 Manitobans through Rent Assist, and a further 7,700 low-income households that are not on EIA are receiving housing benefits.

So, again, and I know the member from Point Douglas mentioned Brandon. And, absolutely, I just had a conversation this morning with the housing co-ordinator from Brandon who was here in the Legislature just before we came in here. And I'm sure the opposition probably met with them, as well, which is great. Because we do need to come together, and we do need to say: What can we do?

But, again, we need to look at the whole picture of affordable housing. Are there members from Brandon East who are calling the member in Point Douglas about housing issues? I guess maybe there is, because honestly, I've received calls from Winnipeg people as well. So, and I appreciate that, and I know even the member from Point Douglas, her constituency assistant has actually forwarded things to my office, and I appreciate that. That's called co-operation. That's called working together, and we definitely get more done when we do that, than we do arguing about other things.

But, again, to not have information about a bill and then expect to make a decision on it is really awkward. It's—I know myself, if I'm not going to get the answer to that question, I'm going to finish here today in three minutes and I'm going to bring up the bill then—and have to read the act I mean, pardon me, Madam Speaker. I'll have to go over the act and get the answers to the questions myself.

But, again, I want to just rely here on some information here that there were a total of 2,079 rent increase applications approved from 2010 to 2015; 300 and—in 2010, 312 buildings with a rent increase; 2011, 327 with a rent increase; 2012, 347; 391 in 2013; 2014 had 392; and 310 buildings had an increase above guideline in 2015.

So we can see, Madam Speaker, that through a 10-year average, 351 buildings with a rent increase amounts to an average of \$878.10. That's nearly 10 per cent of an increase that was granted, and that's over a period of time. I truly believe that we need to work closely together in all aspects of rent increases. My apologies; I hit my mic.

But, again, to suggest anything less than looking out for Manitobans in our own constituencies would be an incorrect statement to say in this House. I believe everyone in every single party has the best interests of all Manitobans, and especially those in their constituency. And if they didn't, well, they probably wouldn't be here. And, again, not because they wouldn't want to, but because the people in their constituencies wouldn't want them if they didn't care about them.

So I can guarantee you, Madam Speaker, that I, personally, myself, and I can speak for everybody on our side of the House, we care about affordability of Manitobans. That is why we are providing hand ups to organizations, to individuals. And, again, I want to look at a group like Samaritan House in Brandon East, you know, who provide amazing support to individuals.

I want to talk about homeless military veterans and, you know, the affordability of them to get off the streets into housing, which is going on right here in the city of Winnipeg. And I believe the village they are building is in the Transcona area. I'm not exactly sure of the exact location, but it is in that area. And, again, it's something that our government has supported. I actually attended the kick-off to make that happen in my role here as government.

So, again, Madam Speaker, where I do like the idea of the bill in watching out for the best interests of Manitobans to try to put some guidelines in place, but at the same time, it's really tough to support a bill where you don't get the answers to the questions that you're asking.

**Mr. Dougald Lamont (St. Boniface):** I'll say that this is a very well-intended bill. The intentions are excellent. We support its intentions. We're not confident that it'll work if it's actually passed. But, nevertheless, we'll support it.

But it's really important to say housing is not like buying a car. It's a necessity of life. You cannot have regular market transactions where one person can make a choice over whether you have a roof over your head or not. There's an incredible disparity in

bargaining power because your landlord has the power to render you homeless or charge whatever rent they want because they can. That's why the PCs brought in their bill against application fees. Landlords are abusing their power.

And when that—when someone has that level of power over you, to drive you out of your home, that is not a level playing field. That's why it needs to be regulated. It's not supply versus demand. It's who controls access to those living spaces, and it's only a few people that do that. They can charge whatever they want without adding any real new value.

And there are actually plenty of empty places to live across Manitoba. Apartments, houses, but people can't afford to live in them. There are dozens of ways in which the PCs have gone out of their way to increase the cost of housing in Manitoba while delivering massive tax breaks to landlords.

But let's not pretend that the NDP while they were in office were much better. They left Manitoba housing with a \$1-billion bill in deferred maintenance. They sold off public housing, just like the PCs. The NDP also allowed for thousands of above-guideline rent increases, just like the PCs are.

And I just, very quickly, want to talk about the challenges here and why the attempts to address this haven't worked. It's because The Residential Tenancies Act still has loopholes you could drive a truck hauling a house down the highway through it. Exemptions from rent regulation in the act say that rental units that—where the rent is equal to or greater than \$1,510 do not apply.

So, I had a mother from my constituency, she's got three kids, she's trying to—[interjection]—thank you—she was trying to rent an apartment with three bedrooms and because it's over \$1,510 per month, there are no regulations at all. So, all of a sudden she found out that, by the way, we're increasing your rent by \$400 a month this year and there was—she does not even have the capacity to appeal it at all.

So, one of the things that's absolutely essential is that these things need to be addressed, and they need to be—we need to be addressing those massive increases and that limit.

Thank you very much.

**Mr. Josh Guenter (Borderland):** It's a pleasure to rise, you know, to speak to Bill 201, The Residential Tenancies Amendment Act, put forward by the

member for St. James (Mr. Sala), and I appreciate his passionate remarks on this subject.

As the member for Brandon East (Mr. Isleifson) said, I—we feel on this side of the House that affordability is the foremost issue that Manitobans are facing today, and so we've taken numerous measures to help them on that front, including renters across this province.

\* (11:00)

**Madam Speaker:** Order, please.

When this matter is again before the House, the honourable member will have nine minutes remaining.

## RESOLUTIONS

### Res. 14—Calling on the Provincial Government to Stop Privatizing Health Care Services

**Madam Speaker:** The hour is now 11 a.m. and time for private members' resolutions. The resolution before us this morning is the resolution on Calling on the Provincial Government to Stop Privatizing Health Care Services, brought forward by the honourable member for St. Vital.

**Mr. Jamie Moses (St. Vital):** I move, seconded by the member for Wolseley (Ms. Naylor),

*WHEREAS the Provincial Governments' cuts over the past seven (7) years have consistently undermined Manitoba's health care system; and*

*WHEREAS the doctors with the Misericordia Sleep Disorder Centre are national leaders in their field, and yet the Provincial Government's current approach is putting that at risk; and*

*WHEREAS doctors have been forced to go public and raise their concerns in the media, because their cries for help are ignored by this Provincial Government; and*

*WHEREAS doctors are sharing their frustration with the province's diagnostic and surgical backlog task force disregarding public health-care solutions, in favour of contracts with private, for-profit providers; and*

*WHEREAS, despite the fact that there is existing underutilized capacity in the public system, this Provincial Government turned down proposals from doctors at the Sleep Disorder Centre because of "minimal private sector involvement"; and*

*WHEREAS Manitobans have lost trust in the ability of this Premier and the Minister of Health to prioritize*

*the best interests of patients, instead of attempts to distract from their health care cuts; and*

*WHEREAS fixing the awful state of health care caused by this Provincial Government, is the number one priority of Manitobans.*

THEREFORE BE IT RESOLVED that the Legislative Assembly of Manitoba urge the provincial government to stop its agenda of health-care cuts and privatization and stop ignoring good proposals from physicians and other specialists that would improve the delivery of services within the public system.

***Motion presented.***

**Mr. Moses:** I really appreciate having the opportunity to speak on this resolution. It's really important that we debate this today, because the purpose of this bill is to call out the cuts and privatization.

And how do we call it out? By shining a light on the problem. You can't solve a problem unless you find out about it, the details about it and then you've set up a plan to solve. And the problem, obviously, here is the cuts and privatization to the health-care system in Manitoba.

And so, I want to talk a little bit about some of the issues that I've heard firsthand about this, but I also want to make sure there's enough time for my colleagues to shine a light from their own personal constituents about the cuts and privatization that they've experienced, that they've heard about from residents here in Manitoba.

*Mr. Andrew Mickelfield, Deputy Speaker, in the Chair*

And so, I'll briefly talk about privatization. And the privatization I want to talk about is specifically related to international students, who, in 2019 had their public health-care coverage cut, completely removed by this—by the Pallister government at the time.

And, of course, that policy was carried over and continues to this very day by the Stefanson government. And so I think it's important for us to acknowledge that privatization has a critical, critical impact to the over 10,000 international students who are attending universities and colleges right here in Manitoba.

You know, University of Manitoba says in their data numbers that over 20 per cent—one in five students—at University of Manitoba is an international student. So, you're saying, one in five people who go to school and are trying to be the professional leaders

in our province and in our communities of today and tomorrow don't get public health-care coverage.

That's outrageous, Mr. Deputy Speaker—outrageous that one in five students at the University of Manitoba don't have public health-care coverage. As a result, they have to incur more costs. They are less likely to seek treatment, because providers don't often recognize public health care—or private health care.

And, if they do seek that treatment, oftentimes they have to pay upfront costs and then may seek reimbursement if the private insurer is able to cover it after the fact. That is a very, very, very burdensome proposal to put on international students, especially when right now we know we need more immigration into Manitoba.

We need to encourage internationals to come here and be the skilled workers, the labourers, the drivers of our economy into the future, and what do we do? What does this PC government tell them? It tells them that they should be excluded from public health care; that they ought to be privatized and set apart from the other Manitobans who enjoy the privilege of public health care.

And that's the privatization that this resolution is calling out today, that we are calling out today. You know, I recently took a trip to Brandon University. And when I visited with both faculty and students there, I also stopped by the office that serviced international students. And I asked a worker there who was in charge of servicing—services for international students at Brandon University.

And I said, what is one thing—the one thing you would say the provincial government could do to benefit international students? What did she say? She said the No. 1 thing was health care. Health care was the No. 1 thing that international students on Brandon University would benefit from: public health.

That's the value; that's the importance—that's what they're asking for. And this government has not only cut that health care, they continue to support that ill-advised policy to the day that drives international students out of this province and hurts not only their lives, but our economy and our society here in Manitoba as well.

And so, we're calling out that action today. We're calling out the health-care cuts. We're calling out the PCs' privatization plan, which they have gradually implemented over their seven-year mandate. And I have no doubt that Manitobans, international students and people around the world are fearful of what this

government might privatize next in health care if they're given the opportunity with another mandate.

And that's why I think not only are we today supporting this resolution to highlight the need to support public health care, listen to front-line workers, doctors, nurses and specialists who see the front lines and want to support a robust public health-care system.

But we're also trying to support Manitobans who, looking to have a reinvested, larger capacity public health-care system that supports their needs now and into the future. And that will only be delivered by a Manitoba NDP government at the next election.

Thank you, Mr. Deputy Speaker.

### Questions

**Mr. Deputy Speaker:** A question period of up to 10 minutes will be held. And questions may be addressed in the following sequence: the first question may be asked by a member from another party; any subsequent questions must follow a rotation between parties; each independent member may ask one question. And no question or answer shall exceed 45 seconds.

The floor is open for questions.

**Mr. Reg Helwer (Brandon West):** Confusing speech from the member opposite. Didn't really speak to the resolution at all. Nothing of what he talked about has anything to do with the resolution. He's talking about privatizing health care.

And want to remind members opposite that Canada Health Act establishes criteria and conditions related to insured health services and extended health-care services that the province and territories must fulfill to receive the full federal cash contribution. This wouldn't allow Manitoba to have a private health-care system.

Can the member opposite explain why they're trying to distract and—I can't use that word, Mr. Deputy Minister, but mislead Manitobans—

**Mr. Deputy Speaker:** Member's time has expired.

**Mr. Jamie Moses (St. Vital):** The resolution speaks for itself. If the member across the way wanted to read the resolution, he would know that it calls out the PCs' plan for cuts and 'privatation' in our health-care system in Manitoba. And that's what we are doing today: calling that out during this resolution debate.

**Ms. Lisa Naylor (Wolseley):** While my colleague from St. Vital has already so eloquently spoken to why it's so important to defend our public health-care system, I'd like to invite him to elaborate on that importance and talk about that a little bit more.

**Mr. Moses:** I thank my colleague from Wolseley for giving me the chance to expand on some of my thoughts about the privatization plan that this government has ill-fatedly brought upon the province of Manitoba.

And I think the—one of the chief examples is the fact that they put forward—they rejected proposals from specialists and doctors in our province because they were looking for more privatization in our health-care system. Can you imagine rejecting proposals from specialists because they determined they want more privatization?

That's what we're calling out today in this resolution. That's what we're putting a spotlight on.

And I thank the member for that question.

**Mr. Blaine Pedersen (Midland):** In 1999, Gary Doer promised to eliminate hallway medicine with six months and \$15 million. So, why would the former NDP government close 16 rural ER—emergency rooms—during their tenure?

How does that help public health?

**Mr. Moses:** You know, what we're pretty disappointed in is this PC government record on health care that closed emergency rooms here in Winnipeg; that privatized services such as physiotherapy, privatized foot care; that cut services across the board.

And now we're seeing the negative impacts of it right here in our community. Not only during the pandemic but to this very day, where we have some of the longest wait times for hip and knee surgeries.

And so, you know, I don't take the advice of the member and the statement of the member because—  
[interjection]

**Mr. Deputy Speaker:** Order.

**Mr. Moses:** —quite frankly, Mr. Deputy Speaker, his government is to blame for the state—the poor state of the health-care system that many Manitobans sadly have to face today. [interjection]

**Mr. Deputy Speaker:** Order.

**Hon. Jon Gerrard (River Heights):** Yes, the member has brought up an important point and talked about international students.



\* (11:10)

I ask the member: What would be the cost of actually providing the coverage for international students, and would it be significantly less than the \$500 million that the government got in equalization payments this year?

That was the additional equalization payments in addition to what they got before. Would it be covered by that adequately?

**Mr. Moses:** It would be significantly less than the equalization payments provided by the federal government to cover health care for international students.

You know, there's approximately 10,000 international students here in Manitoba at post-secondary institutions; more in K-to-12 schools across the province. And so, not only would it incentivize and be a bonus to come to Manitoba and know that you have public health care for international students, it actually makes financial sense because of all the economic benefits that international students bring to the country as they live and work here, but also as they set up and establish their careers and their lives here in Manitoba in the future.

And if we don't have assorted things, we might continue to see international students flee Manitoba for other—

**Mr. Deputy Speaker:** The member's time has expired.

**Ms. Naylor:** You know, it's shameful to hear the government's side of the House complain about ER closures that are very historical, yet, you know, just go full speed ahead to close a whole bunch of ERs while they—when they came into government. It's ridiculous.

So, I wonder if the member who's brought this forward can tell us a little bit about what links those recent closures, understaffing, all of the errors that they're making in the health-care system, what links that to the concerns for privatization?

**Mr. Moses:** Residents in St. Vital, the ones that I speak to, the ones that I talk to, live in between the St. Boniface ER and the—formally the Vic, right? Near University of Manitoba. And under this PC government, they closed down that emergency room. And so, now residents have to travel further. They have to now concern themselves with, if they're in an emergency, is their loved one going to make to HSC, or to

St. Boniface in time for that emergency, to get to that ER, because the one closest to them was closed.

And so, that's a real concern for people in my neighbourhood, in—residents in St. Vital. And so, I think it's—you know, it's disconcerting that members across the way are heckling during this debate.

**Mr. Deputy Speaker:** The member's time has expired.

**Mr. Helwer:** So, I'm curious. The member opposite doesn't like private health care. Full disclosure: my doctor that I've been using for many years is a private practitioner. So, the NDP would make that illegal in Manitoba, to have a private practitioner. And, news release, the majority of doctors in Manitoba are private practitioners.

So, is this member opposite in the NDP saying we're going to make all private practitioners in Manitoba illegal, not available for Manitobans?

**Mr. Moses:** Well, I didn't really actually hear a question in there from the member across the way, but what I'll say is that it's important for us to build up capacity in our public—[interjection]

**Mr. Deputy Speaker:** Order.

**Mr. Moses:** —health-care system. We need to build capacity in our public health-care system; the same public health-care system this government has stripped down.

And as a result, they now have to turn to private agencies to fill in the gaps in the public health-care system, at a cost much higher than simply paying for public health-care professionals, and making sure that they have good wages and actually not keeping them without a contract for over five years, like we're seeing today in Manitoba.

**Mr. Pedersen:** In December of 2006, the Winnipeg Regional Health Authority signed a contract with Maples Surgical Centre. At the time, Health minister Theresa Oswald said, and I quote: this health authority's deal with the clinic is in the best interest of all patients.

Does this mean the member from St. Vital now is opposed to that agreement that was done then?

**Mr. Moses:** I appreciate the opportunity to respond to the minister—to the member's question across the way. And while he makes quotes from well over a decade—was it two decades ago almost—I like to take a quote from a doctor who's actually relevant to today's

health-care system, Dr. Roberts, who actually says—  
[interjection]

**Mr. Deputy Speaker:** Order.

**Mr. Moses:** —that the health-care system that this PC government is in charge of is a mess. It's a catastrophe.

And I think that quote is more relevant to the discussion and the experiences of Manitobans today. That's the one I'm focusing on. That's the one that I'm shining a spotlight on and that's the one that the NDP government will work to fix when we're in government.

**Mr. Deputy Speaker:** Are there any further questions?

**Mr. Helwer:** So, in 2006—the member opposite apparently doesn't recall those dark times—Manitobans ranked fourth highest in spending for health care; however, we ranked last in overall health-care performance.

We had the wait—the longest wait-lists in Canada for diagnostic services and specialists. Those are the dark days that the NDP would like to return to.

Does the member opposite expect Manitobans to accept those wait times that were all-prevalent during the NDP dark days, Mr. Deputy Speaker?

**Mr. Moses:** What I think is relevant to the discussion today is to look at how they've created a health-care system that is so bloated with bureaucracy that they won't even listen to the specialists who are trying to provide reasonable suggestions on how to fix our broken health-care system. They won't even listen to them.

So, no matter how much money they want to put into the health-care system today, the bloat of bureaucracy seems to be stifling innovation, refusing to listen to doctors or specialists and, as a result, Manitobans don't have the health care that we deserve.

We can fix it. The NDP team can fix it, and we will fix it after the next election.

**Mr. Deputy Speaker:** The time for questions has expired.

### Debate

**Mr. Deputy Speaker:** The floor is open for debate.

**Hon. Jon Reyes (Minister of Labour and Immigration):** Thank you for the opportunity to put

some comments on the record to comment on the member's resolution.

Well, Mr. Deputy Speaker, when I saw the resolution, I saw the word cuts—the NDP myth of cuts that they like to use and using terms like undermined Manitoba's health-care system.

They obviously didn't pay attention to the budget we brought forward which includes a historic investment of \$7.9 billion in the health-care system, providing \$668 million more to heal health care for Manitobans; \$130 million to reduce a diagnostic and surgical backlog; continuing to invest \$200 million into the health human resource action plan; a \$120-million infusion to the Pharmacare program, including extending coverage for insulin pumps for eligible adults with type 1 and type 2 diabetes; \$1.2 billion in multi-year capital investments in rural hospitals and other health infrastructure, in addition to renovations in Winnipeg to the St. Boniface Hospital, the Grace Hospital, CancerCare Manitoba and the Health Sciences Centre; creating a new hearing aid program for seniors; an additional \$15.9 million to advance initiatives under the seniors strategy; \$55 million to implement the recommendations from the Stevenson report on long-term care and ongoing funding for RAAM clinics, including a new clinic in Winnipeg which will be Indigenous-led through a partnership with the Aboriginal Health and Wellness Centre.

Madam Speaker, one thing that I can tell you is that due to the efforts—sorry, my apologies, Mr. Deputy Speaker—due to the efforts of the government and the Diagnostic and Surgical Recovery Task Force, under the NDP's ideological approach, Manitobans would be still waiting for care. Further, over 12,000 Manitobans have received successful surgeries at private providers in Manitoba over the last two years due to the task force.

We expect an additional 13,000 surgeries, procedures will be done by Manitoba private providers over the next six months, making a huge impact on the backlog, in addition to what the public system is already doing. These numbers—the numbers of people have received a successful surgery—prove how detrimental ideology in health care can be when they would still be waiting.

We as a government are not moving away from the system of insured health care provided by the provincial government and your tax dollars. We as a government are not and will not be moving away from the system of insured health care provided by the

provincial government and your tax dollars. We have and continue to listen to all Manitobans as we heal our health-care system.

We continue to follow the legislation put forth in the Canada Health Act by the federal government, and we plan to continue following a single-payer health-care system whereby anyone who is insured is lawfully entitled to health-care services.

\* (11:20)

We continue to build a stronger Manitoba and a more health-stable health-care system through strategic investments for long-term and sustainable results.

So, Mr. Deputy Speaker, why does the member wish for Manitobans to wait longer for their surgeries? Why do they want future Manitobans from accessing life-saving, altering surgeries? Our government is acting. Last year, we have also completed just under 90,000 MRIs, just under 265,000 CT scans, just over 1,000 cardiac surgeries, just under 2,200 orthopedic hip surgeries.

I can go on and on, Mr. Deputy Speaker. We have pathed the pandemic backlog by—for ultrasounds from almost 4,500 procedures to under 2,000. The Maples gynecology program has now provided dozens of successful procedures for Manitoban women. St. Boniface general hospital has added an additional eight outpatient cases a week, and will be reducing the 'endoscopy' backlog by 416 cases per year.

But how are we supporting the public health-care system? Mr. Deputy Speaker, \$4.9 million; a fifth operating room at Concordia Hospital to increase orthopedic surgery capacity by 1,000 procedures a year; \$141 million, tripling the size of St. Boniface emergency room; \$50 million, increase HSC surgical capacity by 25 per cent; \$30 million, increase ICU bed baseline from 72 to 100; 80 new physician training seats; 40 undergraduate physician seats; 10 international medical graduate seats; 30 two-year post-grad medical seats for internationally educated medical students; \$800,000 for 30 new nurse training seats at Red River College Polytechnic; \$2 million, Swan River's CT scanner; \$8 million, a new HSC acute stroke unit.

Mr. Deputy Speaker, Investing \$2.5 million at CancerCare, we developed for chemo treatment in Russell; \$812 million, rural health: 90-bed hospital in Portage la Prairie; 60 beds in hospital in Neepawa; 30 additional seats at the Brandon Regional Health Centre.

So, when you have problems, you focus on them. The problem was within the dark days of 17 years of NDP regime, the worst wait times without a pandemic, we are and still cleaning up that mess. And even with the worldwide pandemic, action has been taken by our PC government.

So, as I mentioned, a historic investment of \$7.9 billion in the health-care system, providing \$668 million more to help—to heal health care for Manitobans. Those are not cuts, Mr. Deputy Speaker: \$130 million to reduce the diagnostic and surgical backlog; continue to invest \$200 million into the health human resource action plan.

Mr. Deputy Speaker, when I was the minister for Advanced Education, I would go to every university and college in this province. And it's great that you have students from Bangladesh, India, Nigeria coming to our province, coming here for education.

And the first question that I would ask them: why did you come to Manitoba? And the question was—the answer was, Mr. Deputy Speaker, it was because of our low tuition rates here in the province of Manitoba compared to other jurisdictions.

Time and time again, when I would see international students, going and visiting them, asking that question: why did you come to Manitoba? They came to Manitoba because of our low tuition rates compared to other jurisdictions; affordability, as compared to Ontario and to other provinces such as British Columbia.

And the member knows that. And those who raise that issue, with the issue that he raises, are not actually international students. It's those who they've convinced to agree with their ideological approach, which is a very few, Mr. Deputy Speaker.

So, one thing that I also want to add, Mr. Deputy Speaker, is that, with regards to the health human resource action plan, we are strengthening our public system by building capacity and listening to the needs of our front-line health-care professionals: the largest single investment to our public health-care system in the history of our province.

Our government is moving to end mandating overtime by adding 2,000 doctors, nurses, paramedics and allied health-care professionals with an investment of \$200 million. This is to retain, train and recruit health-care staff across the province and to bring support to nearly 50,000 staff currently in our health-care system.

Mr. Deputy Speaker, in terms of recruitment, I was very proud to lead the nurse recruit mission to the Philippines. This recruit mission goal was to recruit 150 nurses.

What I can tell you, when we came there, the incentives that we're going to give to these nurses, these recruits: paid travel, paid licensing, accommodation allowance, immigration support, workplace onboarding, paid programming.

Our goal was 150 nurses. What I can tell you, letters of intent: 190 nurses signed letters of intent; 90 LPNs signed letters—[*interjection*]

**Mr. Deputy Speaker:** Order.

**Mr. Reyes:** —of intent; 110 health-care aides signed letters of intent.

Why? Because they want to come to friendly Manitoba. Because we have a memorandum of understanding with the government of the Philippines, and we want to welcome many of them to our province, the home of hope, Manitoba.

Mission has been accomplished there. Mission will be accomplished with healing health care. That's why we'll form government again in October.

Thank you, Mr. Deputy Speaker.

**Ms. Lisa Naylor (Wolseley):** I am going to get into a long list of health-care cuts that are leading to some of the privatization in this province.

But I also—you know, I have some reflections this morning, listening to the debate. And they're similar reflections that I had when I was first elected to this Legislature almost four years ago where I was just amazed how often folks on the government's side of the House were willing to deflect, willing to not—well, just completely incapable of taking responsibility for their own decisions and their own choices and always pointing backwards, always saying, oh, someone else did it worse, someone else didn't—we didn't like what they did so, you know, who cares what we're doing kind of thing, right? You don't have to pay attention to what we're doing. Just look backwards.

But what's even more amazing is that we're at the end of another term and yet this government cannot reflect on the past seven years. This government is not at all willing to take any responsibility. What they were elected to do: take responsibility, make decisions and, you know, help our health-care system. But nope, seven years in, all they're doing is blaming the other

guy. And that's what you can count on from the PCs if they are elected to another term.

So, the PC government has cut health care. They made severe cuts to health care that harmed us during the pandemic and left us ill-prepared for a pandemic. They cut health care. They cut the funding in 2018-2019. They underspent it by \$215 million. And then budget 2019-2020 cut funding for health care by \$120 million.

Budget 2020-2021, funding for long-term care was well below the rate of inflation, less than 1 per cent. This after the terrible events during COVID and our personal-care homes. Budget '21-22 included funding cuts of \$13 million for acute-care services delivered through regional health authorities. And that means less care by the bedside.

We see the results of their cuts throughout the health system. The PCs left our hospitals unprepared for a pandemic right before the pandemic struck. We ran out of ICU beds. It's no wonder. Critical care at Grace Hospital had a vacancy rate for nurses of 26 per cent. Critical care at HSC had a vacancy rate for nurses of 31 per cent. And emergency care at St. Boniface Hospital had a vacancy rate for nurses of 28 per cent. These are 2019 numbers. Not 2006, not 1947, but right now, right here with this government.

The PCs are still forcing cuts on hospitals, even during a pandemic. In '21-22, prairie region, \$2.8 million was cut for vacancy management and Southern Health, \$2.2 million in efficiencies. Interlake, they cut over half a million dollars for streamlining. Northern, too—in the Northern region, \$2.3 million to downgrade the standard of care in personal-care homes, and elimination of subsidies for patients who have to travel within the region for care.

\* (11:30)

And the situation has deteriorated in Winnipeg. ER wait times are the highest they've been in a decade. HSC was forced to plead for staff from other units to sign up to work overtime shifts in the ER, calling the situation urgent. The situation at Health Sciences has gotten so dire that nurses were contemplating grey-listing the hospital, discouraging nurses from taking jobs at the facility.

The PC government is completely out of touch. After cutting 75 nurses at Red River, one year later they told media: Manitoba needs more nurses.

They also just finished closing the doors to another primary-care clinic, St. Boniface Family

Medical Centre, after closing the Corydon clinic and the QuickCare clinics. They pushed the consolidation of Dynacare clinics, resulting in longer waits for simple diagnosis, tests like blood work. Twenty-six of 53 diagnostic labs closed, replaced by four super sites, making it harder for Manitobans to access the care they need.

Chief John Lane has been begging the Province for funds for more ambulances, as there has not been a net new ambulance in many years. The PC government's consolidation of neurology services led to the departure of many neurologists and a 36 per cent vacancy rate.

They closed CancerCare sites at Concordia and Seven Oaks, and cancelled intravenous therapies at the Transcona ACCESS Clinic. They ran rural health care into the ground, forcing emergency rooms closed at Roblin and Grandview for months. And as the virus hit Brandon and Steinbach, they cut more, including two care team managers in prairie region, and directors of acute care and seniors' palliative care and cancer care in the Southern Region.

The PCs are privatizing health care in Manitoba. We heard a long list of completed surgeries from one of the speakers on the other side of the House, but many of those were done in private services where patients were shipped out of province. Manitobans don't want this American two-tier health-care system. The size of a person's wallet shouldn't determine their access to health care.

The PC government has created chaos in our public health system, beginning long before the pandemic. They closed three emergency rooms and an urgent-care centre. They cut 56 in-patient surgical beds. They cut 18 ICU beds, and in the last four years, closed 124 beds across Winnipeg and fired dozens of health-care workers.

Private agents' nursing has skyrocketed, and in the last five years, they've spent over \$136 million on private agencies, with \$40 million spent in the last year alone.

You know, actually I should have had this in my notes, but a nurse friend of mine is leaving the province this week to go work in the Yukon because she can't get hired. She's been working as a nurse for 35-some-odd years, mostly different contracts in community health clinics. She's at the top of a pay scale, and she believes that is the reason that the Province will not hire her in the public system. She certainly could work in the private system; she doesn't want to.

But that's what this government is doing. Many, many nurses have told me that they couldn't get hired. Another nurse in my constituency, who retired right before the pandemic, applied for over 35 positions when the pandemic was in full swing, and was never hired. She can't think of why, but after hearing this first nurse's story, I think it has to do with not wanting to pay nurses what they're worth, and when they're at the top of the pay scale, this government doesn't want to pay them. They'd rather send their money to private nursing services.

Under the cover of the pandemic, they're privatizing millions of dollars in surgical services to the private sector, yet they haven't replaced the surgical beds that they cut in consolidation. And using the pandemic, the Conservative government is quickly privatizing more health-care services. They entered an untendered \$4.5 million contract with Morneau Shepell for virtual mental health services.

You know, that was right at the beginning of the pandemic, and many of my previous colleagues, who are mental-health therapists, couldn't see their clients because services were closed down because of the pandemic. They are talented Manitoba therapists, trained social workers, trained marriage and family therapists.

They could have been providing a similar service through public health because that's who it was their employer. But nope: \$4.5-million contract, far more money than any of those community health, mental health workers were ever paid, most of whom are still waiting on their contract to be renegotiated from 2018. But nope: that \$4.5 million went out of province to a private and virtual mental health service.

They also outsourced \$16 million in COVID screening and 'sequestering'-'sinquencing' to Dynacare and they outsourced contract tracing to a virtual call centre, 24-7 Intouch, leading to many Manitobans receiving misinformation. And contracts for these services totalled over \$74 million.

The PC government cut 50 health jobs in the midst of a pandemic, saying it was essential that health regions manage to budget. But at the very same time, they contracted management of vaccine distribution to private companies, whose recruitment efforts were called a gong show by nurses.

I have so much more I could say, Mr. Deputy Speaker, that links these choices to privatization, but I will run out of time.

What I do want to say before I run out of time is, all the excuses we've heard this morning, all the—you know, the contracts that are signed, the people that are going to be brought to Manitoba nurse—none of this is happening. These are all promises or, I don't know, distractions being created in an election year by a government that is absolutely desperate in their last dying days to be re-elected to these Chambers.

And I think what we're all going to hear is a very familiar PC refrain on October 4th about the health-care system: shoulda, woulda, coulda.

Thank you, Mr. Deputy Speaker.

**Mr. Reg Helwer (Brandon West):** Well, so little time, so much that was wrong in that member's speech, and the member prior to that speaking about students instead of health care.

I—you know, maybe he didn't agree with the resolution that he was sponsoring; I don't know. It's—you know, I understand sometimes in the fragmented 'parter' that there are, they have to do things that may—they may not agree with, and this might be one of them.

As I spoke in the questions, Mr. Deputy Speaker, my doctor that I've been seeing for many years is a fine practitioner in Manitoba, is a private practitioner. And under the NDP's fear mongering, they would make those private practitioners illegal—outlawed.

But the majority of doctors in our system, Mr. Deputy Speaker, are private practitioners. Unless you are working in a hospital environment or unless you are working in a—*[interjection]*—and, you know, the member hectoring across there—*[interjection]*

**Mr. Deputy Speaker:** Order.

**Mr. Helwer:** —she just doesn't understand, apparently, that this—*[interjection]*

**Mr. Deputy Speaker:** Order.

**Mr. Helwer:** —is our health-care system in Canada; that the doctors are private practitioners. They bill Manitoba Health or they bill separately.

And it's the way that the health-care system works—*[interjection]*

**Mr. Deputy Speaker:** Order.

**Mr. Helwer:** —Mr. Deputy Speaker. Obviously, opposition member doesn't understand how the system works. And he bills Manitoba Health under my health insurance card. I get that; that's how it works.

Now, he also bills me directly sometimes, Mr. Deputy Speaker, because I have a class 1 licence. And every five years, when I was younger, I had to go for a—to get my health reviewed by the doctor, to do a physical, and there was charge for that because it was not in the public—in the private—the public system. So, he would charge me for that.

Now, as I age, I—it's not five years, I think it's every two or three years now if I want to keep my class 1 licence, which I do, Mr. Deputy Speaker, because I think it's important that the things that I've done in the past carry forward into the future, and I have been a semi driver around North America, and who knows, I may do that again in retirement.

But again, he charges me for that. I pay him, I think it's somewhere between \$75 and \$175 and he's allowed to charge for that in our system.

So, the member opposite doesn't like that idea. She wants the public pay—to pay for my driver's licence? I don't think that's fair, Mr. Deputy Speaker.

And this is the party opposite that invented hallway medicine and then highway medicine. You know, it's just—they have nothing to speak from.

And if I think back to when I was in opposition in the Legislature, I can look back into Hansard, because I had a question at that time for the Health minister. And it turned out that we were in session in Winnipeg, of course, and I needed to see a doctor.

\* (11:40)

So, I went to one clinic, Mr. Deputy Speaker, and I was turned away because I didn't have a Winnipeg address; I had a Brandon address. Under the NDP, we had two-tier health care.

So, I went to another clinic, and, again, I was turned away from the NDP health-care system because I lived in Brandon and did not have a Winnipeg address. I think that was despicable. That was health care under the NDP.

Now, the Health minister at the time, Theresa Oswald, came to me after and offered to find me a doctor. I did find a doctor in Winnipeg. At least she had compassion and care, which the current NDP does not have compassion and care, and she still does, as the head for Doctors Manitoba.

But that was the health care at the time under the NDP. And also, Mr. Deputy Speaker, we had no CancerCare in Brandon. There were service groups that would travel with people that needed CancerCare,

radiation, or chemotherapy to Winnipeg, and wait for them to go through that and then travel back with them.

And eventually, we found in Brandon and Westman that we needed better CancerCare. So, the Brandon Regional Health Foundation fundraised. They raised money to build a CancerCare facility in Brandon and staff it.

And this embarrassed the NDP government so much that they relented and, well, they built a CancerCare centre. They built it at half the size that Westman required, and they staffed it with half of the staff that it was required, to the point now, as government, where we are expanding CancerCare in Brandon and in western Manitoba to the size it's needed to service the population that lives there, so that people don't have to travel into Winnipeg for that CancerCare.

That's what our government does, Mr. Deputy Speaker. Not ignoring health care in Manitoba and making sure that we not only have hallway medicine, as we did under the NDP, but we also have highway medicine, of course.

You know, I wear this tie today in honour of a good friend who passed away of cancer. And I would visit him many times in the CancerCare centre in Brandon when he was on the treatment that he was having there, and he was very thankful for the CancerCare system and what he was able to receive. He did use private care when he could as well to see if there was another alternative.

Unfortunately, he passed away, and one of the things that his lovely wife did is—for those of us that were friends, to come and choose some ties from his collection, that were all—he's Italian descent, so they're all well-made Italian ties, Mr. Deputy Speaker. But I wear it in his honour.

I have many others, as I am myself clearing CancerCare treatment, Mr. Deputy Speaker. And we are very thankful for the care that we get in Manitoba. The people that provide that care, the oncologists, the doctors, the nurses, the support staff that make that readily available when it's needed.

You know, recently I did go to a CancerCare dinner. I think it was absolutely full over at the RBC Convention Centre. Many friends there, many people I knew. Didn't see any of the opposition members there, surprisingly. You know, but perhaps they don't support CancerCare, as they don't support many things in Manitoba.

And, you know, I understand that members can't be at anything and everything, but I think this was an important dinner to be at, Mr. Deputy Speaker. And listening to the oncologist speak about the care—and he was not political; he did attribute the care to successive governments, that all successive governments have spent money on CancerCare, have enabled treatment to come into Manitoba—new treatments for new cancers as they're discovered.

And he was speaking on the stage with one of his patients, who was diagnosed with skin cancer some 10 years ago—a young man. A little bit older now, thankfully. And the physician said that successive governments have invested in treatments in CancerCare, and he was saying that we have done a very good job: both the NDP and the Conservatives in that regard—making sure that those treatments were available.

Because this young man, 10 years ago, had no treatments available for his skin cancer, melanoma. And today there are multiple treatments available, and he's still with us.

And what struck me the most was the words of that young man. He said, I am so thankful that I live in Manitoba. Very striking words. And I am so thankful, as well, that I live in Manitoba with the medical care and the cancer care that we have available to Manitobans.

Are there problems with the medical system? Always have been. Will those continue? We'll try to fix them and move ahead with many of them. The NDP had problems when they were in government for many years. They tried to fix them. Some of them, they were successful. Others, they weren't successful. Unfortunately, Mr. Deputy Speaker, in health care, that is going to continue.

We put more money than ever into the health-care system and we try to fix those problems. We employ more people. We employ more doctors and more nurses, more support staff, buy more equipment, make more services available. And we find out what more we can do, Mr. Deputy Speaker. But it always requires more money, more time and more people.

And those are the investments that governments make in health care in Canada. We see elsewhere in the world what other governments do. But this is the health-care system that we have here.

Are we able to supplement it as the NDP did with private care? Yes, we are, Mr. Deputy Speaker. There are thousands of Manitobans that have used that

private care and gotten rid of their pain and gotten rid of their problem and found solutions. Those things will continue and our government will continue to invest in health care as we have in the past.

Thank you, Mr. Deputy Speaker.

**Hon. Jon Gerrard (River Heights):** Mr. Deputy Speaker, a few comments on this resolution. One of the first things that this government did when they came to power was to privatize the air ambulance system. That effort turned out to be relatively expensive and it has provided service which is not up to the quality that it was previously. And that's partly because of the use of slower airplanes under the current system, which don't do as good a job at servicing many—the small—well, and larger communities which have gravel runways in northern Manitoba.

When it comes to home care, what we've seen is the failure of this government to keep up essentially in terms of service. The service has been cut. We saw big cuts at the time of the COVID pandemic. And that was a time when home care was actually needed more than ever. It was needed more than ever so that we could keep people in their homes where they were safer than if they were in long-term-care facilities where we had many, many cases.

Today, as is reported this morning, you know, there continue to be deficits in home care. Ron and Mae Schepp are receiving home care. It's supposed to be six days a week, but all too often, there are days which are missed.

As the Schepps say, they need help which they can count on. And as they say, right now, we can't. They can't count on it because it's not up to scratch. They have to chase around to get home care. They have to try to contact the supervisor who's not always available. And they say that, frankly, and this is their words: it's disorganized scheduling and the whole system is just chaotic.

So, the failure to provide really essential home care, which is what is needed, has been a sad legacy of this government. There has been a failure to plan, even where, you know, commitments had been made. Dr. Serletis, who was an outstanding epilepsy surgeon, finally left the province when the commitments that had been made to him were not carried through, and he was not able to do his job adequately.

\* (11:50)

Dr. Sandor Demetre raised the concern that critical diagnostic equipment, a PET/CT scanner, which was installed some four months ago, is sitting idle, costing, every day, a significant amount of money which has been put into this equipment, but also which is being paid for the service agreement, which of course is not being used because the equipment is not being used at all.

This sort of planning, the lack of investment, it's essentially a cutback from what was planned, and it's just not contributing to the optimum operation of our health-care system at the moment.

We had another instance: a resident who was sent away to train in neuro-ophthalmology; that is, brain-related visual problems, and this is a specialty which is badly needed here. We do have one neuro-ophthalmologist, but he's going to be retiring in the not too distant future.

And it's important to be doing the planning ahead of time, to get things in place. Commitments had been made to this young doctor, and he was all set to return here in July. But sadly the preparations were not carried out, and the result is that he's not sure if he's going to return because he's not going to be able to work adequately.

And we're losing people because this government is not making the critical investments. Essentially they're doing cuts to services that are badly needed, because we have a growing population and we need to make sure we have the array of nurses, doctors and allied health professionals that we need in Manitoba.

When it comes to nurses, we've all noted that the use of agency nurses has skyrocketed, as I found out when I was working—helping people with problems at a personal-care home in Portage la Prairie, where there were agency nurses who came in temporarily. They didn't know the residents very well. Good as they were as nurses, and highly qualified, knowing the residents counts for a lot, and consistency of care counts for a lot, particularly if you're dealing with seniors in long-term-care facilities.

And so, there are needs to make sure that we're providing these services in the public system, and that we are providing the number of nurses and home-care workers and other health professionals who are needed. When it comes to international students, I raised a question earlier on. I mean, it's very apparent that the government is failing to support international students.



The result is that a number of students are falling through the cracks in one way or another, and the result is that international students have to pay additional money out of their pocket for insurance. Or sometimes, if there's a gap somewhere, that they end up having to pay directly for the health-care services.

In the last few days, I know that there's at least four people who are, in some cases, international students, but not all, but who have visas which are a few days short of a year, and the government is saying that because their visas don't last for a year, that we won't cover them in terms of health care.

This is really short-sighted, and the government has got these ideas that it can make cuts here, there and everywhere. It's actually affecting people a lot. The couple that I talked to just the other day have—he's a student and she's working, and she's pregnant and she's not sure that she's going to have the health-care coverage when she delivers later this year.

And so, they're one more example and it's just because they're a few days short of a year on their visa. They've actually been here for longer than a year, and still they're being discriminated, I would say, just—against by what are essentially cutbacks by this government.

And that is sad that it is happening. We should be welcoming and make sure that newcomers who are going to contribute to Manitoba are well supported.

The—in the last few minutes, I just want to say that we've seen changes to the health-care system which are clearly shocking in the disorganization and dysfunctional nature of how too many things are being carried out.

That is not to say that we don't have some incredible and wonderful people working in health care who are doing amazing things. And we see this in some areas which are still working well, like CancerCare. But there are too many areas where there are too many problems at the moment. and that's because this government is really not doing its job that needs to be done when it comes to health care.

**Mr. Deputy Speaker:** Are there any more speakers?

**Mr. Blaine Pedersen (Midland):** Well, it's certainly been an interesting debate on this. During the question-and-no-answer period, the member from

Wolseley said that closing 16 rural RM-ERs, 16 rural ERs, was historical. Darn rights it was historical; never happened before. And they talked about public health care, and then they closed 16 rural ERs.

And on top of that, they increased ambulance fees to \$500. So, we had people that wouldn't even call an ambulance because they were afraid they wouldn't be able to pay for it. That's the NDP solution to public health care.

And then, of course, there's Gary Doer in 1999 that ran on a campaign of going to fix health care in six months with \$15 million. All he did was create highway health care until they raised the ambulance fees, and then nobody wanted to use an ambulance because it cost too much.

And then in 2006, did—NDP government—with the WRHA, Winnipeg Regional Health Authority—signed a contract with Maples Surgical Centre and at that time, the Health minister, Theresa Oswald said, and I quote: This health authority's deal with The Maples clinic is the—in the best interest of all patients.

That was a private clinic, and they were praising it. I guess that means now that Cerebra, the centre that does sleep apnea, they're opposed to that too.

And then never mind the doctors, they're going to raise the PST—if they ever, heaven forbid, form government—they'd raise the PST to 10 per cent and bring in a wealth tax, and that will drive doctors out again, just like they did in the 17 dark years of the NDP rule.

Now, back when they were in power, I did have a constituent who needed shoulder surgery. He'd been in an accident, no fault of his, but it ruined his shoulder; he needed surgery. Went to his doctor and the doctor says, well, we can do it someday. Wouldn't give them any timeline to do it. He could go to Fargo—and he did, he went down to Fargo—they would do that surgery right away. But the NDP government would not allow the doctor to sign off so that he was able to go down and get surgery.

**Mr. Deputy Speaker:** Order, please.

When this matter is again before the House, the honourable member for Midland will have seven minutes remaining.

The hour being 12 noon, this House is recessed and stands recessed until 1:30 p.m. this afternoon.

**LEGISLATIVE ASSEMBLY OF MANITOBA**

**Thursday, May 11, 2023**

**CONTENTS**

<b>ORDERS OF THE DAY</b>		<b>Resolutions</b>	
<b>PRIVATE MEMBERS' BUSINESS</b>		Res. 14—Calling on the Provincial Government to Stop Privatizing Health Care Services	
<b>Second Readings—Public Bills</b>		Moses	2246
Bill 201—The Residential Tenancies Amendment Act		Questions	
Sala	2235	Helwer	2248
Questions		Moses	2248
Isleifson	2237	Naylor	2248
Sala	2237	Pedersen	2248
B. Smith	2237	Gerrard	2248
Lamont	2238	Debate	
Guenter	2238	Reyes	2250
Debate		Naylor	2252
Teitsma	2240	Helwer	2254
B. Smith	2242	Gerrard	2256
Isleifson	2244	Pedersen	2257
Lamont	2245		
Guenter	2246		

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