



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

**DEBATES
and
PROCEEDINGS
(HANSARD)**

39-40 Elizabeth II

*Published under the
authority of
The Honourable Denis C. Rocan
Speaker*



VOL. XLI No. 43 - 1:30 p.m., THURSDAY, APRIL 9, 1992



MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Fifth Legislature

Members, Constituencies and Political Affiliation

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

LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, April 9, 1992

The House met at 1:30 p.m.

PRAYERS

ROUTINE PROCEEDINGS

PRESENTING PETITIONS

Ms. Judy Wasylycia-Lels (St. Johns): I beg to present the petition of Dianna Hunt, Angie Nieckarz, Allison Marciski and others requesting the Minister of Justice (Mr. McCrae) to call upon the Parliament of Canada to amend the Criminal Code to prevent the release of individuals where there is a substantial likelihood of further family violence.

Ms. Becky Barrett (Wellington): I beg to present the petition of Susan Stonehill, Morray Nesbitt, Jim Jones and others requesting the government show its strong commitment to dealing with child abuse by considering restoring the Fight Back Against Child Abuse Campaign.

Mr. Conrad Santos (Broadway): I beg to present the petition of M.E. Graveline, E.K. Larsen, M. Brodsky and others requesting the government show its strong commitment to dealing with child abuse by considering restoring the Fight Back Against Child Abuse Campaign.

READING AND RECEIVING PETITIONS

Mr. Speaker: I have reviewed the petition of the honourable member for Burrows (Mr. Martindale), and it complies with the privileges and practices of the House and complies with the rules (by leave). Is it the will of the House to have the petition read?

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

THAT the bail review provisions in the Criminal Code of Canada currently set out that accused offenders, including those suspected of conjugal or family violence, be released unless it can be proven that the individual is a danger to society at large or it is likely that the accused person will not reappear in court; and

The problem of conjugal and family violence is a matter of grave concern for all Canadians and requires a multifaceted approach to ensure that those at risk, particularly women and children, be protected from further harm.

WHEREFORE your petitioners humbly pray that the Legislature of the Province of Manitoba may be pleased to request that the Minister of Justice (Mr. McCrae) call upon the Parliament of Canada to amend the Criminal Code of Canada to permit the courts to prevent the release of individuals where it is shown that there is a substantial likelihood of further conjugal or family violence being perpetrated.

I have reviewed the petition of the honourable member for Transcona (Mr. Reid), and it complies with the privileges and practices of the House and complies with the rules. Is it the will of the House to have the petition read?

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

THAT the bail review provisions in the Criminal Code of Canada currently set out that accused offenders, including those suspected of conjugal or family violence, be released unless it can be proven that the individual is a danger to society at large or it is likely that the accused person will not reappear in court; and

The problem of conjugal and family violence is a matter of grave concern for all Canadians and requires a multifaceted approach to ensure that those at risk, particularly women and children, be protected from further harm.

WHEREFORE your petitioners humbly pray that the Legislature of the Province of Manitoba may be pleased to request that the Minister of Justice (Mr. McCrae) call upon the Parliament of Canada to amend the Criminal Code of Canada to permit the courts to prevent the release of individuals where it is shown that there is a substantial likelihood of further conjugal or family violence being perpetrated.

I have reviewed the petition of the honourable member for Radisson (Ms. Cerilli), and it complies with the privileges and practices of the House and

complies with the rules. Is it the will of the House to have the petition read?

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

THAT the bail review provisions in the Criminal Code of Canada currently set out that accused offenders, including those suspected of conjugal or family violence, be released unless it can be proven that the individual is a danger to society at large or it is likely that the accused person will not reappear in court; and

The problem of conjugal and family violence is a matter of grave concern for all Canadians and requires a multifaceted approach to ensure that those at risk, particularly women and children, be protected from further harm.

WHEREFORE your petitioners humbly pray that the Legislature of the Province of Manitoba may be pleased to request that the Minister of Justice (Mr. McCrae) call upon the Parliament of Canada to amend the Criminal Code of Canada to permit the courts to prevent the release of individuals where it is shown that there is a substantial likelihood of further conjugal or family violence being perpetrated.

* (1335)

Introduction of Guests

Mr. Speaker: Prior to Oral Questions, may I direct the attention of honourable members to the gallery, where we have with us this afternoon 28 seniors from Hamilton House. These visitors are under the direction of Mary Wilkonski. Hamilton House is located in the constituency of the honourable Minister of Consumer and Corporate Affairs (Mrs. McIntosh).

Also this afternoon, we have 45 students from Grade 4, from the Teulon Elementary School. These students are under the direction of Mrs. Lyle Campbell. This school is located in the constituency of the honourable member for Gimli (Mr. Helwer).

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

ORAL QUESTION PERIOD

Economic Growth Government Strategy

Mr. Gary Doer (Leader of the Opposition): Mr. Speaker, yesterday, the Minister of Finance (Mr.

Manness) stated that we were being selective in quoting the most recent statistics in terms of growth for the province of Manitoba, a growth rate that declined by some 25 percent since the government has tabled its budget in this Chamber.

Today, we have a second set of predictions on the growth in Manitoba, and unfortunately, they are even worse. We have gone from 3 percent growth predicted in 1992, according to the Royal Bank, down to 1.4 percent growth, a decline of some 50 percent in the projected growth rate for the province of Manitoba.

These are very important numbers, Mr. Speaker. They have an impact on our jobs, on our social assistance. They have an impact on our services and the quality of life in the province of Manitoba.

I would ask the Deputy Premier, what impact will these changed forecasts downward have on the programs and services of Manitoba and particularly the vital services of Manitoba like health care which are in so much crisis today?

Hon. James Downey (Deputy Premier): Mr. Speaker, again let me respond to the member by saying that he is, of course, always prepared to bring to this House the negativism of the New Democratic Party and to continue to work on the negative side of what is going on.

Let me say that our government is committed to health care, to education, to family services, as has been demonstrated in our budget. There is no change. There are increases in our budget to look after those essential services.

Out-Migration Statistics

Mr. Gary Doer (Leader of the Opposition): Well, you have a 50 percent decline in the growth rate of this province from an independent agency, not the New Democrats, but from two banks and for two days in a row, and this government just continues to whistle past the economic graveyard of this province.

Mr. Speaker, last month we saw 8,000 fewer people in the labour force than a year ago. Last month, in February, Manitoba bankruptcies were the highest they have been since the 1930s—the highest they have been since the 1930s. Our out-migration and net migration rate in terms of a per capita number in the last quarter of 1991 was the worst in Canada. We are losing more people than any other province in Canada on a per capita basis, and ye

this government says, well, everything is okay; happy days are here again.

My question to the Deputy Premier is: What is he going to do to stop Manitobans from leaving this province and leaving us 10 out of 10 in terms of people staying in the province of Manitoba?

Hon. James Downey (Deputy Premier): Mr. Speaker, one of the things that we have done is to stop putting intolerable taxes on the backs of those taxpayers like the New Democratic Party did for the last six years of their administration, spending \$27 million in Saudi Arabia, \$30 million on a bridge without a road to it. That is the kind of hemorrhaging that has been stopped by this government.

Mr. Doer: I thank the Deputy Premier for his tirade, Mr. Speaker.

* (1340)

Employment Creation Strategy

Mr. Gary Doer (Leader of the Opposition): Again, let us look at the facts in terms of what is happening to this province. Mr. Speaker, we are suffering the worst bankruptcy numbers, personal and corporate, since the 1930s. We are suffering out-migration and net migration worse than any other province in Canada. We have, two days in a row, seen decreased growth rates from two independent agencies dealing with the economy of Manitoba. We have a \$90-million increase in expenditures in two budgets for this government for social assistance, to deal with the 51 percent increase in welfare rates in the city of Winnipeg alone.

I have another question to the Deputy Premier. Would it not make a lot more sense to have employable people who are now forced onto social assistance in the province of Manitoba, with both the policies of this government and also the recession, would it not make more sense to have people working? Would it not make sense to have some of those people, those young people who are unemployed and are on welfare right now, working in vital programs that are necessary for the province?

For example, would it not be better to have some of our young people who are on social assistance, who are employable today, have some of that money from the social assistance budget of \$90 million placed in a working program to have projects like Dutch elm disease working in our communities,

working across the province, rather than people being unemployed?

Hon. James Downey (Deputy Premier): Mr. Speaker, the member made reference to bankruptcies. Manitoba in fact has shown a decrease year over year in both personal bankruptcies and business bankruptcies, unlike other provinces of this country. We have in fact seen a lowering of the bankruptcies in this province.

Secondly, Mr. Speaker, one thing we have done as well, as a government, is try to remove some of the payroll tax—the job-prohibitive tax that was introduced by the former New Democratic Party—and introduce a job partnership program for the youth and carry on with some of the youth employment programs for summer activity. There will be many activities that they will be employed in through government support.

Child and Family Services Response Time

Ms. Becky Barrett (Wellington): Mr. Speaker, early this morning, it was reported that a two-year-old boy was found in only his diaper outside his apartment building by the caretaker, who immediately notified Winnipeg Child and Family Services. At noon, almost five hours later, no representative of Child and Family Services had yet come to investigate the situation.

Since the minister's office was also notified of this situation this morning, what action has the minister taken? Can he confirm that the delay was due to the recent recentralization and lack of adequate resources faced by the caseworkers in Child and Family Services?

Hon. Harold Gillehammer (Minister of Family Services): Mr. Speaker, I will take the specifics of that as notice and get an answer for the honourable member.

What I can tell you, as far as the centralization of Child and Family Services, we have seen no diminishing of services in Manitoba, in Winnipeg through the use of Child and Family Services. On top of that, we have introduced a number of reforms that are underway now that we have had the opportunity to talk about in the past and that I am sure we will have an opportunity to talk about during the Estimates process later today.

The Child Advocate legislation is before the House. The automation of the record keeping

within Child and Family Services is underway, and we should have a portion of that program up and running probably late spring and early summer. The high-risk indicators are being used with the front-line workers in the field, so there are reforms going on.

If the member chooses to bring specific cases to the floor of the House, this is not the appropriate place to—

Mr. Speaker: Order, please.

Ms. Barrett: Mr. Speaker, this minister's office was notified this morning—

Mr. Speaker: Order, please. This is not a time for debate.

Resources

Ms. Becky Barrett (Wellington): Is this lack of immediate action or any action—it would appear to me at this point in time—not a blatant violation of the first principle of The Child and Family Services Act, which is the protection of children? Is it not as a direct result of inadequate resources so that caseworkers have twice or three times the number of children to look after that they should have?

Hon. Harold Gilleshammer (Minister of Family Services): I remind the member that the resources that have gone into the Child and Family Services agencies within the province have virtually doubled in the last four to five budgets. The issue is not one of resources.

I have already indicated that I would take the specifics of her question as notice. I have every confidence in the professional social workers and the administration who are in charge of the Family Services agencies within the province to react appropriately.

Ms. Barrett: Given that there is a continuing lack of adequate resourcing to the Child and Family Service agencies and an enormous two to three to four times increase in caseload above what should be in place to allow for and provide for protection of children, what assurances can the minister give this House and the children of Manitoba that this situation and situations like it, which have happened many times in the past and will happen again unless something is done about it, will not be repeated and that all children in Manitoba will be assured at least of the bare first minimum of basic protection of their lives?

* (1345)

Mr. Gilleshammer: I have already indicated that in the new resources that have gone into Child and Family Service agencies over the last few years, this government has dedicated almost 9 percent of new funding to Family Services in this budget, far outstripping the budget that the member worked on and that they released the day before our budget calling for a 5 percent increase in Family Services budget.

We have dedicated consistently over the last five budgets more resources to this department, and the Family Services are seeing an increase in the amount of funds that they will be able to use for their work in the next budget year.

Child and Family Services Communication Process

Mrs. Sharon Carstairs (Leader of the Second Opposition): Mr. Speaker, I got the same phone call as the member for Wellington (Ms. Barrett), and I have been trying since I received that phone call to get in touch with the worker who was apparently supposed to be involved in this particular child.

I have learned that in fact the Child and Family Services agency attended the apartment block within 25 minutes of having been called and that the situation was resolved. I am very pleased to know that, but I want to know why the minister would not have some action in his department that he would not be immediately alerted to this kind of case which was reported to his office this morning.

Hon. Harold Gilleshammer (Minister of Family Services): Well, I thank the member for the comments, and I think this clearly illustrates the type of information that members bring to the House for political reasons. I have every confidence that the agency, the administration of the agency and the staff there respond to these issues on a daily basis.

Some of the information the department has about specific cases is not information that we are going to share in the House or with the public. Some of the cases that individuals deal with are incredibly complicated and incredibly sad.

I say to you and I have said before that I have the utmost respect for those front-line workers and those administrators who, daily and on a 24-hour basis, seven days a week, deal with some of the very sad cases in society. It does not serve anyone well to bring information here in a fashion that will

it is not hysterical, it is certainly clearly there to misrepresent the facts.

Mrs. Carstairs: Mr. Speaker, with the greatest respect, the minister did not address what I think is a very fundamental question.

He is the minister responsible for an extremely sensitive department, a department which deals with children, in this case, a two-year-old. I would like to know why someone on his staff did not notify him immediately that there was a breakdown in communication, because when the reporter called the agency, the reporter was informed it was none of his business, but it is every person's business in our community that a two-year-old child would be outside in a diaper at minus 8 degrees. It is everybody's business.

I want to know from the minister why he would not have that kind of alert team in his office that would make him aware of that kind of difficulty so that he can ensure that the processes were in place to look after this child.

Mr. Gilleshammer: Mr. Speaker, we have hundreds of workers and thousands of cases that are active across this province. Again, the agencies that we fund, whether it be the Winnipeg agency, the Central Manitoba agency, the Westman agency, the native agencies in the areas of the province where our department does that work, they deal with these cases on a daily basis. Some of these cases are brought to the minister's attention and the department's attention on an ongoing basis. This is the work that those people do. We hear from time to time of specific cases that are ongoing that take some time to solve.

I think that when cases are put in the hands of those agencies, agencies that we fund, agencies that work under provincial legislation, we allow them to do that work, that the minister's office and the senior staff do get involved with these agencies on an ongoing basis, but we also allow them to do the work that they are entitled to do.

* (1350)

Child Advocate Reporting Process

Mrs. Sharon Carstairs (Leader of the Second Opposition): Mr. Speaker, it is clear that the agency in this case acted. It is equally true that in other cases, the agency does not act. We have also seen an example today where the minister's department did not act.

Will the minister now tell this House why he is requiring the Child Advocate to report to him? What is wrong with a model that would have the Child Advocate report to this Legislative Assembly so that children would not fall between his department and the agency?

Hon. Harold Gilleshammer (Minister of Family Services): Mr. Speaker, I am very pleased the member has raised that question. Her acting critic raised that question the other day, and I am on the record with the answers to those questions.

We are setting up a Child Advocate in this province based on models that exist in Alberta and Ontario. In those provinces, those advocacy departments—or the part of that department works very well. The member and her acting critic, I think, are confusing the role of the advocate with the role of the Ombudsman. We have an Ombudsman who looks into personal cases and works with government where people feel that government is not serving them. The role of the advocate will be to work with children, and that advocate will come into place when the legislation is passed. I am sure members will support it. It will be passed this session.

We were going to have an advocate in Manitoba, as recommended many, many times, that no other government has acted on. That advocate's office will be modelled on advocates in other provinces where it works very well.

Lakes and Rivers Copper Sulphate Bulldup

Ms. Marianne Cerill (Radisson): Mr. Speaker, the federal government released today its second State of the Environment Report, which raised concerns about the water quality in lakes and rivers in the prairie provinces. There is mounting pressure then to seriously consider the effects of projects like the Assiniboine diversion and to more strictly enforce regulations that are dealing with chemical use in lakes and rivers.

More specifically, I have a letter from the Department of Environment which states that copper sulfate is no longer a registered substance to be used to eliminate algae in lakes in Manitoba. How will the minister ensure that this chemical, which has been used in the past, will not be used in lakes in Manitoba this summer?

Hon. Glen Cummings (Minister of Environment): By not permitting, Mr. Speaker.

Ms. Cerilli: Mr. Speaker, there are still communities that are bulletining their intention in the local newspapers to use this substance.

Will the minister make a commitment to implementing more inspection of those communities that have used this in the past so it will not be used this summer?

Mr. Cummings: Mr. Speaker, the bulletining that the member refers to, the community, I believe, was somewhat in error in the format that they used in their bulletining, and certainly it was not the intention of the department to permit the use of the material, as was advertised in that bulletin.

Ms. Cerilli: Mr. Speaker, one of the communities in question—or one of the lakes in question is Pelican Lake, which is horribly polluted. I would like to ask the minister if he will ensure this lake which has used almost 2,000 pounds in one year of copper sulfate, that there is sediment sampling and testing done in this lake?

Mr. Cummings: Mr. Speaker, it is confirmed that we are now talking about the same bulletin. As a matter of fact, we are, as I said, not willing to permit the use of the copper sulfate, and we have very good reasons for not doing that, one of which is that we do not want any buildup.

I do take objection, however, to the member referring to the pollution in the lake. The last time it was brought to our attention that there was considerable amount of bacterial lode in the lake, it was found that low water volumes in that lake, which are now being addressed by the structures that have been put in place combined with the high numbers of ducks and geese on the lake, was what was giving the high bacterial reading in the water.

* (1355)

Health Care Facilities Bed Closure Proposal

Ms. Judy Wasylycia-Lels (St. Johns): Mr. Speaker, it should be increasingly clear to everyone in this Chamber that there is chaos in our hospital system. Patients are worried, staff are fearful, administrators are concerned as a result of this government's secretive approach to changes to our health care system. In particular, the Health Sciences Centre has been trying to deal with this very difficult directive from the government to make

big cuts to beds in its budget. The board of that facility met last week and discussed its response to this government directive and sent that plan to this minister.

Will the Minister of Health share that information with the people of Manitoba and table that plan here in this Chamber?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, after yesterday, when my honourable friend brought not one, not two, but three pieces of incorrect information to this House, it almost seems as if it is epidemic that they have what I have come to affectionately know for the New Democratic Party as the "leader's disease." I will not reflect on that bad information that my honourable friend brought to the House yesterday.

What my honourable friend is correct about is, yes, the Health Sciences Centre and other hospitals have been developing their operational plans to meet their budget allocations for this fiscal year. The process has been one of feeding back into Manitoba health, into our facilities co-ordinator, the associate deputy minister, those plans of action for this fiscal year.

Mr. Speaker, those plans are under active consideration by the department. I would hope that when my honourable friend chooses to move along the Estimates process so that we reach the hospital line in the Estimates, as I have urged her to do now for 12 hours, we will have a full and complete discussion of the issues with my appropriate staff there.

Ms. Wasylycia-Lels: Mr. Speaker, if we cannot get information about this government's plans for our hospitals, could we at least get from this minister the plans of facilities, tabled with this minister, in response to this government's directives?

Mr. Orchard: Mr. Speaker, the plans of government and the respective hospitals will be abundantly clear, as I have indicated several times in the Estimates process, over the next ensuing several weeks.

I just want to note to my honourable friend that when she is making these sorts of requests of government, one would assume from casual observation that those would then become policy that a New Democratic Party would put in place.

I want to remind my honourable friend that any budgetary plans from hospitals to the Department of Health have never been shared by New Democrat

Liberal, Conservative government in the province of Manitoba. They are working documents of the ministry. I do not intend to change that longstanding tradition, neither do I intend to change the policy put in place by Howard Pawley and the NDP of not allowing deficits in the hospitals. I know my honourable friend from opposition has flip-flopped on that policy, but a little bit of consistency would be appropriate for my honourable friend in her questioning and her future policy development.

Ms. Wasylycia-Lels: Mr. Speaker, never before have we had a government which has refused to provide information about—

Mr. Speaker: Order, please. This is not a time for debate.

Ms. Wasylycia-Lels: Would the Minister of Health not now agree that it is time to end the fears and concerns and confusion in our health care system and provide, for all of us here in this Chamber and for the public at large, details of this government's plans for hospital beds and budgets?

* (1400)

Mr. Orchard: Mr. Speaker, I have told my honourable friend for the last 12 hours in Estimates that when we get to the hospital lines, those kinds of details on this year's budget can be made available with the appropriate staff. My honourable friend wants to chew away on phantoms. That is her privilege.

Mr. Speaker, I reject totally and completely the false accusation by my New Democrat friends where they say that this is a secretive government. This government has opened up the discussion process more than any other government in the history of the province of Manitoba and, I submit, opened the discussion process more than any other government in Canada around health care reform.

That is why we have tabled Centre for Health Policy and Evaluation studies on the health care system, to enlighten my honourable friend to the challenges facing all Canadians in reforming the health care system. That is why we have tabled, for my honourable friends, the Health Advisory Network reports as I have received them and made them public. Mr. Speaker, this is the most open government that the province has ever had in its history, and my honourable friend persists in—

Mr. Speaker: Order, please.

Point of Order

Ms. Wasylycia-Lels: This is a very serious matter. The minister has five advisory network reports since last summer, and he has not tabled one or made any of them public—

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

Economic Growth Prairie Provinces' Co-operation

Mr. Reg Alcock (Osborne): Mr. Speaker, I was interested in some of the information that the Leader of the Opposition (Mr. Doer) brought forward today because I think it does underline the very difficult position that this province finds itself in, in part, as a result of changes in federal policy that have I think served to weaken the ties that bind the prairie region together.

On February 13 and 14, a number of people met in this city to look at some ways in which we can build some strength back into the prairie economy. Representatives from all three provinces were there. The Minister of Trade is aware of the outcome of that meeting, which was an attempt to look at the ways in which the prairie provinces can work together to build strength in this region.

I would like to ask the Minister of Trade if he has had an opportunity to discuss these proposals with his provincial counterparts.

Hon. Eric Stefanson (Minister of Industry, Trade and Tourism): Mr. Speaker, I have received some of the information from that conference that took place in Winnipeg. Subsequently, I had a discussion with one of my counterparts in Saskatchewan. As economic ministers, we meet occasionally as western ministers, and we both agreed that a useful topic the next time we meet would certainly be the whole area of western co-operation. Whether one talks about integration is a bit further removed, but there are already areas where we are co-operating in tourism through development of standards and certification and science and technology with an earth-space initiative.

In other areas of co-operation recently, in the environmental field on the environmental industry side, we are co-operating, so there is extensive co-operation to build on already, and we agreed that the idea of continued co-operation and potential

enhancement would be a very useful topic of discussion at our next meeting.

Mr. Alcock: I am very pleased to receive that answer from the minister.

Can the minister tell me whether or not the suggestions about creating greater co-operation and perhaps joint research among the prairie telephone systems is one of the items that will be up for discussion at those meetings?

Mr. Stefanson: The honourable member for Osborne refers to one specific recommendation out of, I believe, 12 or 14 or 16 recommendations that flowed from that conference. As I have indicated, at this stage, discussions would be at a preliminary stage in terms of the whole issue, the areas of co-operation. We are already doing some that I have outlined.

I think there is opportunity for more. At what stage we would get to dealing with the specific recommendations would remain to be seen. Obviously, they also impact on other departments within our government that would require review. Once we have had an opportunity to go through the documentation that flowed from that particular conference in Winnipeg, we will be sharing it with all of my colleagues, Mr. Speaker.

Mr. Alcock: I wonder if the minister can tell us whether he or the Minister of Finance (Mr. Manness) have had discussions with the other two provinces about creating a pension pool for the three provinces to provide capital for the development of projects in the prairie region.

Mr. Stefanson: At this stage, Mr. Speaker, no, we have not. I think most members of the House will recall from the western Premiers' meetings that took place in Nipawin last year, what flowed from that was the concept of the code of conduct in terms of investment promotion to halt, we will call them, the bidding wars that occur occasionally amongst provinces, certainly in western Canada and across all of Canada. That is certainly going to be a topic of discussion.

What the honourable member for Osborne refers to ultimately might be something that certainly as a topic of discussion could flow from that very issue because the whole issue of us competing as provinces for investment, the cost to the taxpayers and so on, is one that is very timely and is actually to be discussed by all internal Trade ministers here in Winnipeg at the end of the month.

Winnipeg International Airport Protection

Mr. Doug Martindale (Burrows): Mr. Speaker, last year, over the objections of the Minister of Transport, the Minister of Housing (Mr. Ernst), with the support of the Premier (Mr. Filmon), approved funding for the Rotary Pines project, thus potentially jeopardizing 130 jobs at Winnipeg International Airport. Now, the City of Winnipeg and the Winnipeg Chamber of Commerce are requesting the provincial government to protect the airport from encroaching development.

Does the Minister of Transportation still support airport protection legislation as he did last year and as he did as early as 1989?

Hon. Albert Driedger (Minister of Highways and Transportation): Mr. Speaker, most definitely.

Mr. Martindale: Has the Minister of Transport brought to cabinet the pressing need for airport protection legislation on the Alberta model and convinced his colleagues, especially the Premier (Mr. Filmon) who is unaware of its success, since much of the land in question is not within the city of Winnipeg but outside city boundaries?

Mr. Driedger: I want to indicate that I am working closely with my colleague, as well as my Premier and the City of Winnipeg, in terms of setting up under Plan Winnipeg protection for the airport.

Also, at the same time, there is federal legislation being developed that will also tie into that. I am confident that by the time we are through with this, during the course of this summer, the protection will be in place.

Mr. Martindale: The real question is whether the minister is going to rely on the City of Winnipeg and Plan Winnipeg, which is not at all reliable. We know that prodevelopment councillors in the past have amended Plan Winnipeg to allow things that are not proper.

Will this minister bring in provincial legislation to do what the city is now requesting so that the province can have some control both in the city and outside the city?

Mr. Driedger: Mr. Speaker, I want to indicate that the authorities who have power to make certain decisions at the present time, if they will not adequately address the protection of the Winnipeg airport, the Minister of Urban Affairs (Mr. Ernst) and myself will make sure that they will be addressed properly.

55 Plus Program Indexing

Mr. Nell Gaudry (St. Boniface): Mr. Speaker, it is now clear that the 55 Plus program will again not be indexed to inflation. As a result, those already recognized in law as living below the poverty line will be forced to accept an even lower standard of living.

Can the Minister responsible for Seniors tell this House why his government has chosen to deprive seniors in this way?

Hon. Gerald Ducharme (Minister responsible for Seniors): Mr. Speaker, I almost lost a bet when I saw seniors up in the audience and I bet that I would have a question.

Mr. Speaker, to the member for St. Boniface, at a time of difficult times, our government has kept payments equal. We are looking after our seniors both in the health field and the family services. This government has its pride to work with the seniors throughout the province with our senior abuse, our financial abuse system, throughout all our portfolios, and will continue to benefit the seniors of this province.

Mr. Gaudry: Mr. Speaker, I thank the minister for the cheap shot.

Can the Minister responsible for Seniors tell us how the seniors are to pay increased costs of hydro, telephone, food, clothing, all of which are increasing, many above the rate of inflation, when this government refuses to provide any help?

Mr. Ducharme: Mr. Speaker, we are—not a cheap shot—increasing through our health services, through our many benefits. Unlike the previous administration, they taxed those seniors who were at the low level at a percent of 2 percent on the net tax.

Mr. Gaudry: Mr. Speaker, can this minister tell this House the cost of Seniors Day here at the Legislature, and will they consider using these dollars to provide for indexing the 55 Plus?

* (1410)

Mr. Ducharme: Mr. Speaker, we have different seniors groups who have come forward to us. We sit down with those seniors groups, and they tell us the different ways they would like their money spent. For instance, on continuing care, we are increasing it on all personal care homes. If they are concerned about the health care in personal care homes, for instance, as announced by the Health minister, we

are going to establish 600 personal care homes shortly in this province. That is the way we will benefit the seniors.

Port of Churchill Efficiency

Mr. John Plohman (Dauphin): Mr. Speaker, the Minister of Agriculture's position on the transportation talks is now abundantly clear. His April 4 letter to the Free Press demonstrates that he has swallowed hook, line and sinker the federal position with regard to Churchill rail line abandonment and method of payment. He says it is all in the name of efficiency. He says the federal government has conducted an internal review of transportation efficiencies to make the transportation system from farm to port more efficient.

Since it is well known that Churchill has a \$20, at least, advantage in shipping over St. Lawrence ports, I want to ask the Minister of Transportation why he has not informed his Minister of Agriculture (Mr. Findlay) of that fact and whether he agrees with his Minister of Agriculture that in fact shipping more grain through Churchill would not make the system more efficient rather than less efficient.

Hon. Albert Driedger (Minister of Highways and Transportation): Mr. Speaker, since I took office as Minister of Highways and Transportation in May of '88, many versions and many figures have been thrown about in terms of the advantage or disadvantage of shipping through Churchill. The member well knows that there are opponents to the Port of Churchill. When I had federal Minister Shirley Martin out last year to Churchill, the one assurance that she gave me was that there would be precise figures, accurate information brought forward. That is being worked on by the federal government. However, I have to indicate that we will be watching the figures and information very closely.

We have the assurance that somewhere along the line, when that information comes forward, we will be able to have a chance to dialogue and check, and we will scrutinize very closely that kind of information that is being brought forward.

Mr. Plohman: Mr. Speaker, it is clear that that information is already there, and this minister fails to recognize it.

Why has this minister failed to ensure that the transportation talks, \$1.1-million consultative sham by the federal government, did not include balanced information, accurate information, on the efficiencies of a greatly expanded role for Churchill? Why did he not make sure that information was in those hearings?

Mr. Driedger: Mr. Speaker, I have the same information that the member had when he was the minister, but I have to indicate to you that there has been lots of additional, which I consider, wrong information that has been out on the hustings and for the public of Manitoba as well as for the federal government in terms of I do not believe that we have accurate information. I believe we have accurate information, but I believe there is a lot of inaccurate information that is out there.

I am hoping that within the next three, four, six months, we will be able to establish precise figures that are going to be not just beneficial to us, that we use, but that everybody will be able to make themselves available of that, which will show that there can be viability in Churchill and that Churchill should stay for the benefit of the people of Manitoba.

Mr. Plohan: Mr. Speaker, this minister has the accurate information. Why is he not putting it out there? He knows it is accurate information.

I ask him whether he will ensure that his Minister of Agriculture (Mr. Findlay), his colleague, travels to the Hudson Bay Route Association next week with him so that he too can learn the facts about Churchill.

Mr. Driedger: Mr. Speaker, I am not going to be taking the Minister of Agriculture along, but I want to indicate that I am prepared to take the member for Rupertsland (Mr. Harper), the member for Thompson (Mr. Ashton) and whoever else—if they want a member from the Liberal Party. Not all of them, but certainly I am prepared to take—

Some Honourable Members: Oh, oh.

Mr. Speaker: Order, please.

Mr. Driedger: Mr. Speaker, let me rephrase that. I am prepared to take members of the opposition along, as I did last year, to the Hudson Bay Route Association meeting that is taking place on Monday. We will again have a chance to discuss this, where I will raise serious concerns about the future of Churchill, where I think it is very important that all members of the House are speaking from the same song sheet when we deal with this issue.

Public Schools Enrollment Decline

Mr. Dave Chomiak (Kildonan): Mr. Speaker, my question is to the Minister of Education.

We have learned that since coming to office, this government has seen enrollments at private schools increase by 13 percent or 1,245 students while, in the same period of time, enrollments at public schools have decreased 1 percent, or down 1,907.

Can this minister advise the House what steps this government is going to take to prevent the creation of a two-tiered education system in the province of Manitoba?

Hon. Rosemary Vodrey (Minister of Education and Training): Mr. Speaker, I would like to remind the honourable member that in the independent school system, some schools set up for many reasons. Some of them are for religious reasons in this province, and parents in fact have the opportunity of free choice.

Mr. Chomiak: Mr. Speaker, the minister is well aware that these schools have been in existence for 75 years. Can the minister answer the question and indicate why the increase, since the Conservatives came to office, is 13 percent in the private schools in enrollment, and it is down 1 percent in public schools? Has it something perhaps to do with government funding at a windfall basis to many schools?

Mrs. Vodrey: I certainly hope that my honourable friend is not indicating that he considers that there are some extremely drastic difficulties within the public school system, because we on our side of the House, Mr. Speaker, recognize that the public school system is in fact doing an extremely good job. There are many hard-working teachers and administrators and trustees working in that system.

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

ORDERS OF THE DAY

Hon. Jim Ernst (Acting Government House Leader): Mr. Speaker, I would move, seconded by Minister of Environment (Mr. Cummings), that Mr. Speaker do now leave the Chair and the House resolve itself into a committee to consider the Supply to be granted to Her Majesty.

Motion agreed to, and the House resolved itself into a committee to consider of the Supply to be

granted to Her Majesty with the honourable member for St. Norbert (Mr. Laurendeau) in the Chair for the Department of Health, and the honourable member for Seine River (Mrs. Dacquay) in the Chair for the Department of Family Services.

COMMITTEE OF SUPPLY (Concurrent Sections)

HEALTH

Mr. Deputy Chairperson (Marcel Laurendeau): Order, please. Will the Committee of Supply please come to order. This afternoon this section of the Committee of Supply meeting in Room 255 will resume consideration of the Estimates of Health.

When the committee last sat, it had been considering item 1.(b) Executive Support (1) Salaries on page 82 of the Estimates book.

Chairperson's Ruling

Mr. Deputy Chairperson: At this time I would like to bring my ruling forward from the other day.

On April 6, 1992, during the Department of Health Estimates in Room 255, the honourable minister used the phrase, "I can engage in no more debate with hypocrites." The member for St. Johns (Ms. Wasylycia-Leis) raised a point of order stating that "they impute motives and cast slander on members of this side of the House."

As I mentioned to the committee yesterday, Beauchesne Citations 489 and 490 have ruled the term "hypocrites" both unparliamentary and parliamentary. A review of the Manitoba Speakers' Ruling has revealed a similar pattern. I would draw to the member's attention Beauchesne Citation 486(1) which states, "It is impossible to lay down any specific rules in regard to the injurious reflections uttered in debate against particular Members, or to declare beforehand what expressions are or are not contrary to order; much depends upon the tone and manner, and intention, of the person speaking; . . ."

I should also remind all honourable members that the Chairperson's Rulings, once made, are not subject to question. I would like to remind the honourable minister that I had asked him to withdraw the word "hypocrite."

Hon. Donald Orchard (Minister of Health): I will certainly comply with your request, Mr. Deputy Chairperson.

Mr. Deputy Chairperson: Thank you, Mr. Minister.

* (1430)

Ms. Judy Wasylycia-Leis (St. Johns): I am wondering if I can make a suggestion in the spirit of co-operation that is beginning this set of Estimates. Given the minister's indication that he is prepared to answer questions on hospitals if we proceed to that line, I would make the suggestion that we move directly to 5.(b) and then having completed that line, return to where we have left off.

Mr. Orchard: In the interest of that same spirit of co-operation, let us proceed as we have always done, line by line. The quicker we get to the hospital line, the quicker we will have all of the answers including on Mental Health, Continuing Care, and all of the other very, very important areas of the ministry of Health.

I am not hung up on the acute care hospital line alone, I have a ministry of Health of importance to all Manitobans. I appreciate my honourable friend's singular focus on hospitals only, but there is a much larger department to discuss and I would prefer we discuss that as we always have, in order.

Mr. Gulzar Cheema (The Maples): I have not given any thought to that, I tell you very frankly. I think that the way we have done it in the past and if you want to change and want to have agreement with the House leaders, that is fine. But, as far as I am concerned, I have been told by my caucus to proceed the way we have done in the past. If there is any change from my caucus, then I will proceed. The direction to me is to proceed line by line.

Mr. Steve Ashton (Thompson): Mr. Deputy Chairperson, if the minister is talking about what is normally done in Estimates, the minister who has been in this House for quite some time should be aware of the fact that there have been different approaches in dealing with Estimates. It is not unusual in dealing with Estimates, in terms of a number of departments, for the minister to have dealt with all questions on one line item and then pass all the resolutions at the end of Estimates. I remember several departments where that was done last session.

It is a question of a choice of the committee which is obviously, most significantly, a choice of the minister and the government because presumably the minister and the government has control over the committee. The minister might not have too

much control over this committee right now, but I am sure he would rather quickly pull in members sufficient to out-vote the opposition. So, it is the government's choice; it is the minister's choice; and the real bottom line here is not a question of what is normally done. The minister knows that we can normally do anything that is felt advisable. This committee has control over the agenda in that sense. We allow questions of varying degree of varying generality depending on the preference of the minister.

So what the minister is saying, if he is saying that he and his majority on this committee does not wish to move to the hospitals line to be able to deal with the serious questions that have been raised, to be able to give him the opportunity to provide what I thought was an offer this afternoon in Question Period, Mr. Deputy Chairperson, which is essentially to provide information when we get into the discussion of that line item, we are offering him that opportunity.

I believe his response will have very little to do with what is normal in this committee, because as I said, the normal thing is that the committee has control over its agenda. It can deal with whatever it wants. What the minister is saying if he wants to go line by line, if he does not want to follow up on our offer, is that he does not want to get into the discussions to what is happening in our hospital system. He does not want to get into providing the information that day after day after day our Health critic has been attempting to obtain from the minister. What the minister is doing then is essentially avoiding the very serious questions that are being asked.

Mr. Deputy Chairperson, the minister knows full well the length of time that we often spend in Estimates. I remember when I was Health critic we spent 44 hours. I believe that my successor has spent more than that or close to it and the Liberal Health critic along with the minister in the past several years. What is happening here is we are willing to deal with the hospitals right now. That is the urgent situation. We need to know what is going on, but we are not in any way, shape or form going to rush through other items that also have legitimate questions that need to be asked. Let us not forget, this committee deals with the budget for the entire year. If we pass a line item or a series of line items, that is it for this year. There is no further discussion in terms of Estimates.

What we are saying is in the interests of following up on the kind of offer I thought was made by the minister, to provide the information to see if it is a real offer, we are saying let us deal with the hospitals now. If the minister is saying no, he is saying no to answering the questions. He is further stonewalling getting the kind of information that the public wants, not members of the opposition strictly, Mr. Deputy Chairperson, the public wants. They want to know what is going on in our hospitals. They want to know what is going to be happening in terms of possible bed closures, other changes in terms of the hospital system.

The minister ought not to play the kind of game that we are seeing on this issue. The minister ought to say right now, with his control of this committee, that he will be reasonable and follow up on what we feel is a very reasonable offer which is let us deal with the hospitals now. Let us get the information now. Let us clear the air. Let us get the information the public of Manitoba wants.

Mr. Cheema: Mr. Deputy Chairperson, being not very particularly astute, I am really puzzled. This is something that was supposed to be discussed among the caucuses and then this issue can be discussed and now they are putting us in a very difficult situation. If I say I will support him, they will say that is supporting the government. If we say we do not want to discuss the hospital, then we are against hospitals.

It is my belief that what we have done for the last five years is to follow the directions within the committee. The committee's normal procedure is to go line by line, and we are not talking about one chair somewhere and we are going to move from here to there. We are talking about a major department, and I will feel more comfortable if we are discussing the whole policy rather than going here and there and whatever suits the needs of the day.

I think that is very dangerous, and I am not personally going to support that. I want to make it very clear, I will still check with my caucus. Whatever they want to do, and I am sure they will agree with me, because I think that some kind of game is being played and I am not going to be part of that stupid game.

Ms. Wasylycia-Lels: Mr. Deputy Chairperson, I regret that the member for The Maples has made such derogatory remarks about our suggestion. It was not done for political reasons. It was not done to put him in an awkward spot. It was done because

we have a serious, urgent, pressing matter before us. I remind all members at this committee that after a series of questions over the last 16 hours about general funding policy with respect to hospitals, general health care reform plans of this government, we have been getting no answers.

The minister has said, if we just move along quickly to that line, we can get to that information. The minister knows that there are a lot of serious, substantive issues between the line we are presently on and the line dealing with hospitals and community health services, and he will be fully aware that we should all have a serious discussion on all major components of his department.

It was the minister's suggestion that we could be dealing with this matter in short order if we were on that line, so we are simply following through on that offer and asking the minister to follow through with that offer. He says the information is ready. He says that he will tell us what budgets hospitals are getting, what the plans are with respect to reform, what the plans are with respect to bed reduction targets and budget reduction targets for hospitals.

He has the information. We are simply asking, given the urgency of the situation and with the co-operation of everyone here, to move to that line so we can discuss this very serious, pressing matter.

I want to stress to the minister and others here that we are not raising this as a tactical suggestion, that hospitals are not our only preoccupation with the health care department and with this minister, but right now we are dealing with a very critical situation.

* (1440)

Every day, we are hearing from hospital department heads and administrators who are perplexed and confused and concerned about directives that they are getting from this government. Every day, we get letters and calls from patients who are deeply worried and afraid about whether or not they will be able to have access to the quality health care services they believe are a right in this province.

Every day, we are hearing from staff, professionals, nurses, workers in our hospitals who are living in fear and paranoia, who are living in such fear and paranoia, they are questioning whether they are able to actually fully do their jobs because of that overriding concern, a concern and a fear and

a paranoia that has been caused by directives for which this government and this minister will take no ownership.

Mr. Deputy Chairperson, we cannot allow our hospitals to continue along that path. We cannot allow for that kind of worry and fear and paranoia and concern to permeate our hospitals, our health care facilities that provide such important care to people in urgent situations requiring emergency care, needing surgery, needing immediate attention, needing longer term care.

It is too much of a risk. It is far too serious for that and we feel, given the lack of responsiveness on the part of this government to release its plans, the details, to provide information to the public, to the hospitals and to the Legislative Assembly, that we have an obligation and a responsibility to get to this matter as quickly as possible.

The minister has said he has the information ready. Our suggestion is reasonable. We therefore would ask again if we can all agree to move to line 5.(b) immediately, the line dealing with hospitals and community health services, and if the minister needs a little time to get his relevant and appropriate staff here, then I think we would all be willing to co-operate in terms of a short recess for that purpose.

Mr. Deputy Chairperson: I would like to inform members of the committee that the correct procedure for considering items in the Committee of Supply is line-by-line manner. In order to skip ahead or to revert back to lines already passed, unanimous consent of the committee is required.

Mr. Cheema: This is the fifth time we have gone through the Health Estimates, and each and every time we had major issues that were affecting the health care of Manitoba, but we always have gone through line by line and followed the procedure.

I would like the New Democratic Party to tell me, do they think that everything else in health care is not important? [interjection] No, no, can I just have my time to say what I would like to say?

Mr. Deputy Chairperson: Order, please. At this time I would like to inform the committee that I have made the statement and it has become quite clear, and I will ask the question, is there unanimous consent to move on to point 5 at this time? No? Then let us carry on with the normal business and we will be dealing with 1.(b) Executive Support.

Point of Order

Mr. Ashton: I just want to indicate we will be raising this matter again, and I want to give notice to the minister, and I know the Liberal critic, who had some concern, did not have a chance to discuss this with his caucus, that we will raise this again on Monday. The minister may wish to have staff available if he changes his mind over the weekend. This will give the Liberal critic the opportunity to deal with it as well. We will be raising this again.

Mr. Deputy Chairperson: The honourable member did not have a point of order.

Point of Order

Mr. Cheema: Mr. Deputy Chairperson, these things are a part of the caucus discussions. They should have had the discussion with the Minister of Finance (Mr. Manness) who is the House leader, and Mr. Lamoureux, the member for Inkster, and had those decisions made, and then come back here. Now, next week they are going to again test who is supporting the hospital, who is not supporting the hospital, that kind of situation. I am not going to get into that.

Mr. Deputy Chairperson: Order, please. The honourable member does not have a point of order. If we could carry on, 1.(b) Executive Support.

* * *

Ms. Wasylycia-Lels: Mr. Deputy Chairperson, let me just thank you for your ruling and indicate to you that we are concerned about the situation. We will continue to pursue questions pertaining to hospitals given the current looming crisis in our hospital system and health care system, and will keep raising questions about government plans in that area. As my colleague the member for Thompson (Mr. Ashton) has suggested, if the minister is still unwilling to give answers, we will suggest again that we move directly to the line dealing with hospitals on Monday.

I would like to begin this afternoon by asking if the minister is now able to respond to my question of the last sitting of Estimates. When did he first know about the summer bed closures that became extended bed closures at the Health Sciences Centre last summer?

Mr. Orchard: Mr. Deputy Chairperson, I want to generally respond to the gamesmanship played by

the official opposition in terms of wanting to advance the Estimates.

The reason ostensibly is, according to their contacts of CEOs and I do not know what other numbers of people, that—my honourable friend says, all over. Well, that is all levels, all over.

Now, my honourable friend is therefore maligning every CEO in the health care system, that they are personally telling her that every vice-president of every hospital, every head of a surgical department, medical department, every head of a department is talking to the NDP and giving them these dire stories.

Mr. Deputy Chairperson, that is not accurate. My honourable friend, in persisting that all of these people are providing her with all of this information, is maligning a lot of very good professional people. She could remove the cloud that she is putting over those people if she would simply identify some of these phantom sources. But, of course, she will not. She prefers to malign every professional caregiver in the health care system.

She also wants to create the aura that the system is crumbling. As we sit here and discuss Estimates of the Department of Health, the hospital system is admitting patients who are ill, injured, going in for elective surgery, emergency and urgent surgery. The health care system, the hospital system is operating as it operated five days ago, 10 days ago, two weeks ago. People are receiving medical treatment. People are not dying on the streets because our hospital system has collapsed as my honourable friend might want to create the aura and the impression.

When she uses this language that all of these professionals are telling her and her caucus of the chaos and all of the other allegations she makes, she maligns every professional group that is working in a dedicated way to deliver health care services and is delivering those health care services.

The crisis exists in my honourable friend's mind, and here is the problem my honourable friend the New Democrat has, because in, for instance, the province of Ontario, and I want to deal with this right now because I am getting tired of this allegation in Manitoba.

In Ontario, thousands of hospital beds are closing under the NDP. Now, is this because they have this malicious spite for health care, that they hate

hospitals, that they hate the patients of Ontario? No, they would prefer not to make those decisions, but they have to because of the fiscal circumstances of Ontario.

In Saskatchewan, there was not a \$101 million increase in funding to health care as we are debating in these Estimates. There is, without a budget, preliminary indications that the health care system will get 2.6 percent less money than it got last year. Do you think the Saskatchewan government composed of New Democrats is enjoying having to put that kind of a budget forward? Of course not.

In Manitoba, no such chaos exists. My honourable friend the New Democrat is frustrated that in each province to the east and west of us, there are those circumstances going on that my honourable friend is so wont to happen in Manitoba, the kind of multi-thousand bed closures, layoffs, curtailments of service, et cetera, reductions in budgets as is happening in Saskatchewan. She would dearly love that to be happening in Manitoba, so she would have some legitimate case for complaint.

When it does not happen, my honourable friend maligns all the professional caregivers in the province by saying they are telling her. She will not identify who the "they" are, but she is saying they, these people are telling her of difficulties and of problems in the hospitals, maligning all of those professionals who are working with government to develop action plans to reform the system of health care.

* (1450)

My honourable friend may not like to hear that we have a very, very excellent plan for reform in health care. She may not like to hear that because it contrasts so starkly with what is happening in Ontario, where I read the analysis of the Ontario reform, that it is the blunt instrument of budget cut so that the system will organize itself from the bottom up and hopefully will be able to care for the needs of the people of Ontario.

That is not what we endorse as a reasoned system of change in Manitoba. It is not like the chaos in Saskatchewan where there is 2.6 percent less funding. It is a reasoned approach. I laid it out clearly in my opening remarks Monday, two weeks ago.

We intend to move budget with patient from high cost institutional care to lower cost more appropriate care centres, be that an urban hospital, be that a rural hospital, be that a personal care home, be that continuing care services in the person's own home, and where we can do that and empty beds in our teaching hospitals, for instance—and I have used this example I do not know how many times—we will close the hospital bed at the teaching centre, because we do not believe we should be spending an average of \$800 a day to provide for services to a patient who can be cared for in an environment as low as an expense item as \$110 a day in continuing care. The people who win in this are the patients requiring care, and also, coincidentally, the taxpayer is better served.

That is a reasoned plan that I have laid out, that is being discussed at hospital boards. They are developing their plans right now, Mr. Deputy Chairperson, right now. They are reporting back to government as to how they can accommodate the changing environment in health care delivery that is in place right across the length and breadth of this country.

They are working in a co-operative fashion. They are not saying, as my honourable friend says, these unknown "theys" whom she talks about without identifying, that this is wrong, this is inappropriate, this cannot be done, this is the wrong thing to do.

They are expressing legitimate concerns about being able to accommodate patient care in a changing environment, but everybody is concerned about that. They are pleased as CEOs, as board chairpersons, as professional care deliverers that at least this government has a plan of action that is under discussion, of moving services and budgets with the patient, that protects the integrity of care to the individual requiring care, that is underpinned with the kind of research I have shared over the last 14 hours of Estimates about where admissions to the Health Sciences Centre are inappropriate.

They can be provided in lower-cost hospitals, but my honourable friend wants to perpetuate that monolith of hospital care. That has been her entire and only focus in 16 hours. My honourable friend has not asked anything about any other area. I give credit, again, to my honourable friend, the member for The Maples (Mr. Cheema). He has taken a system-wide approach to health care, because you cannot discuss one hospital, one professional group, one program of government in isolation

because we are dealing with a health care system and its reform.

Now, let me offend my honourable friend that there is reason, there is knowledge, there is research, there is scientific evidence underpinning the plans that we have for reform of the Manitoba health system, the plans that I outlined to my honourable friend for her to listen to, to read time and time again from my introductory remarks in Hansard.

My honourable friend does not like that because it is a reasoned approach. It is a planned approach. It is an approach underpinned with research, with knowledge, with co-operation, with discussion, with consultation, contrasted directly with the two NDP provinces immediately to the east and to the west.

I am sorry I cannot deliver the kind of chaos that the NDP are delivering in Ontario and Saskatchewan. I am sorry that I cannot give my honourable friend that political opportunity to make political hay. I am sorry, I do not intend to and never have intended to. That is why I have spent four years, almost, developing a knowledge and an understanding and a co-operative approach with health professionals in this health care community of Manitoba.

That kind of an approach will deliver the best change, the most progressive reform of health care service delivery in Canada, in this province of Manitoba, not because of me, but because of many hundreds of professionals within the senior levels and all levels of my ministry, from professional groups, research organizations like the Center for Health Policy and Evaluation, Manitobans who have served on the Health Advisory Network and study groups under the Urban Hospital Council, from literally tens of thousands of Manitobans who have provided input, knowledge and information to this government in order that we, as a group of Manitobans, knowledgeable as citizens, consumers, caregivers, administrators, board members and professional civil servants, make decisions that are appropriate for the changing environment of health care delivery.

I know my honourable friend finds that offensive because it has too much logic, it has too much sense, it has too much contrast to the difficulties faced in provinces governed by her soul mates. I cannot do it any differently, and I will not do it any differently.

I am sorry I cannot give my honourable friend her narrowed, political approach to carping and harping that she wants to have for her mailers across the length and breadth of Manitoba. I am sorry I cannot do that, but for my honourable friend to try to interrupt all of the proceedings of this committee that deal with the system of health care, to deal with continuing care, to deal with mental health, to deal with all the other programs that this ministry develops, to have her fixation, her lust for knowledge, her total dedication to the hospital system and nothing else satiated. I cannot do that, because I have a system of health care delivery to debate, to answer questions and to proceed through line by line.

Mr. Kevin Lamoureux (Inkster): Mr. Deputy Chairperson, I know in that past few days where I have come into the Health Estimates, and it seems that we are in around 15, 16 hours already, and there are a number of issues that need to be raised during the Health Estimates.

We are very concerned in terms that the member for The Maples (Mr. Cheema) wants to get on the record on a number of the issues. In Estimates, there are only 240 hours which means it is very limited. We share many of the concerns regarding the hospitals. We, too, are just as interested in the number of bed closures. I understand that the opposition House leader (Mr. Ashton) has come to the table suggesting that we go to that particular line. As in the past, I would suggest that we go through each line by line so that all areas of the Department of Health are in fact debated. I know that the opposition House leader has come before the committee—

Mr. Deputy Chairperson: Order, please. I would like to remind the honourable member for Inkster that we have already concluded the decision on that, and the ruling has already been put in place on it.

Ms. Wasylcia-Lels: Mr. Deputy Chairperson, first let me note that the minister did not answer my question about the discrepancy between the information he provided on record to the Legislative Assembly with respect to extended bed closures at the Health Sciences Centre and the actual time when he received that information, but we will come back to that.

Let me address some of the concerns and issues and suggestions that the minister has made and, as well, deal with some of the statements being made

by the Liberal members of the Chamber at this committee.

Mr. Deputy Chairperson, what we have been asking for over the last 16 hours or more have been the detailed plans of this government for health care reform. That is a general request. That is a matter that covers every line in this budget. When we have asked for those plans, the minister has said we should wait until we get to the line dealing with hospitals.

Well, first of all, let me say this is an overall matter. This is not a specific issue. This has to deal with our health care system in a general sense and the plans underway by this government for that system and for health care reform.

* (1500)

Mr. Deputy Chairperson, the minister has just said in his remarks that this government has an excellent plan and refers to his speech, his opening remarks, and other general statements made in this committee and in the Legislature, but we never get beyond the fact that the plan has to do with moving the budget from the hospital or the bed to the patient. We never get beyond broad statements that we are dealing with a change going from high-cost to low-cost care arrangements. We never get beyond any broad platitudes and generalities.

We do not know what the plan of this government is for health care reform, and how we are finding out about it is through hospitals, through administrators at hospitals, through staff at hospitals, through professionals at hospitals and through patients at hospitals who are finding out bit by bit, piece by piece about this government's agenda. So we are engaged in a massive jigsaw puzzle to try to figure out what the health care reform plans of this government are.

That is not, in my estimation and in the estimation of the NDP caucus, fair to the people of Manitoba. In our view, it is only fair and only right and only appropriate for the government to come forward with its plan in terms of how it impacts on hospitals, on community clinics, on continuing care arrangements, on mental health needs, on doctors' salaries, on the fee-for-service arrangements, on remuneration questions, on technology, all of those aspects which are part of a health care reform plan. Mr. Deputy Chairperson, at no time has this minister ever had the decency to come forward with that kind of a plan.

He says the plan before us is an excellent plan, but there is no plan. We are expected to take the minister's word. I have told the member for The Maples (Mr. Cheema) over and over again and have pointed to examples where we cannot take the minister's word because he has always broken that word. He has never been up-front and straightforward and direct with us.

So, Mr. Deputy Chairperson, we are on this line. We are stuck on this line because it is the appropriate line to hear what this government's plans are with respect to health care reform, so we have a context, a starting place, a way to assess, a way to determine whether we agree or not.

We are going to keep asking for those answers, Mr. Deputy Chairperson. We are going to keep asking the general questions and specific questions as we hear about it from communities, from hospitals, from staff, from patients. We are not going to be satisfied with a minister who turns the tables each time and poses the questions back to us and suggests that all of this has to do with a no-deficit policy for hospitals.

Interesting, let me as a footnote note, that suddenly, not consistent with the general remarks made at the beginning of this set of Estimates, but as soon as we got into the issue of the bed reduction targets and the budget reduction targets for hospitals, the minister said out of the blue for the first time that the central part of any health care reform strategy, the starting place, the focal point was the question of no-deficit policies for hospitals, not a better health care system, not a more cost effective system, not a system based on prevention and promotion in the community-based needs, no. Out of the blue when he did not want to answer questions about hospitals and bed cuts, he throws in this new angle.

Mr. Deputy Chairperson, we cannot sit there and accept that nonsense when we know and read about hospitals who believe they are getting zero percent from this government. The minister did not correct the record on that matter, or change it, or tell us if we were right or wrong, or give us the percentages for each hospital. He will not give us something as basic as the percentage increase for each hospital so we can make some judgments and understand his plans.

We are going to ask again for this minister's detailed plans with respect to health care reform, not

general platitudes and broad statements that we all agree with obviously, moving from high cost to low cost facilities when one can do it, ensuring quality of patient care at all times. Give us a break, Mr. Deputy Chairperson. Of course, we all agree with those statements. This minister is in charge. This government is calling the shots, and this is the time for us in this Assembly and for Manitobans everywhere to hear what those plans are.

I am going to ask again what those plans are, and I am going to also ask the minister if he would like to now clarify the record with respect to the fact that he clearly did not present the truth on July 10, 1991, regarding the summer bed closures and extended bed closures at the Health Sciences Centre, and also, if he will now provide the information about those closures that he said he would at our last sitting of Estimates.

Mr. Orchard: Mr. Deputy Chairperson, I know my honourable friend is frustrated, but you know, for my honourable friend to say it is nonsense for government to be concerned about deficits in our hospitals underpins what I have been saying for the last 14 hours. Howard Pawley's government put in a policy. The member for St. Johns was at cabinet and did not disagree with that policy I presume, because it is a policy of government. She says now that no-deficit policy is nonsense.

Point of Order

Ms. Wasylycia-Leis: Mr. Deputy Chairperson, that is an outright fabrication. I did not say the no-deficit policy was nonsense.

Mr. Deputy Chairperson: Order, please; order, please.

Ms. Wasylycia-Leis: He has taken my remarks out of context and he should apologize and withdraw those remarks.

Mr. Deputy Chairperson: Order, please. Is it the will of the committee to take a recess?

Mr. Orchard: No, absolutely not.

Mr. Cheema: Mr. Deputy Chairperson, I will proceed with my questioning. It is too bad the member for St. Johns (Ms. Wasylycia-Leis) is not here, because every time the member gets a chance she just puts on the record a few things which are not even politically correct, you know. I am not talking about intellectual corrections here, but saying that we are not co-operating and we are

not for the health care and we are not dealing with issues.

* (1510)

I want to deal with the issues in a very systematic way. For the last 16 hours—until we deal with each and every issue point by point, we will not reach any conclusions. That is the whole issue of the Estimates that you go line by line and you discuss all the issues. If the sky is falling apart then, we can with the consent of the committee, with the prior consent of the caucus members and with their discussion—and we have done that in the past in a very minor variation. So I want to proceed with the questioning.

I asked the Minister of Health (Mr. Orchard) yesterday—I had some concern in terms of the urban hospital working group. My question here again is, the minister knows what the working group is saying and now he agrees with the conclusion of that report saying that the same body, Misericordia Hospital, in terms of the emergency care is not a medically and financially sound one. I would like the minister to note that on June 30, 1991, we had a discussion in detail on page 3310. We made it very clear that some of the things which are very clear in that report, that the closing of the emergency at Misericordia Hospital is not going to be medically sound and not going to be financially sound because it is very clear that the Emergency Department is a gateway to any given hospital—

Chairperson's Ruling

Mr. Deputy Chairperson: Order, please. Just one moment, please.

Due to circumstances beyond my control, I could not bring it forward a few minutes ago, but at this time I would like to ask the honourable member for St. Johns (Ms. Wasylycia-Leis) to withdraw the word "fabrication" from her last statement. It was unparliamentary under Citation 489.

Ms. Wasylycia-Leis: Mr. Deputy Chairperson, I will certainly withdraw that word.

Mr. Deputy Chairperson: Thank you very much.

* * *

Mr. Cheema: I was simply emphasizing the point of the recommendation which has come out of the committee, and if the minister's staff would care to read that. It is probably the same discussion that we had at that time. I would strongly recommend

him to cancel the plan for the discontinuation of the Emergency Department at the Misericordia Hospital from 10 p.m. to 8 a.m. The information is there, and I think that to proceed in any further direction on this particular issue will simply be a wastage of the working group's time and also the other people who are involved, especially people who are taking an active role in terms of the Wolseley Residents' Association. Probably they are not aware of these things. I think they should be told that this is not a viable option, and I would like to hear what the minister has to say on this issue.

Mr. Orchard: Well, Mr. Deputy Chairperson, as I indicated when my honourable friend posed this question I believe yesterday, the working group report was developed and presented to the Urban Hospital Council. I say to my honourable friend that I have kept the process under the Urban Hospital Council consistent with the one that we used with the Health Advisory Network where a report comes to the council, is circulated to affected—maybe modified by the council. At any rate the report, whether in its original form or modified by the Urban Hospital Council, is circulated to the affected facilities for their comment. Their comments are fed back and any other suggestions they might want to make around the issue, and further consultation is encompassed into a report by the Urban Hospital Council, which they make to me.

The final report is the only report that I will assume ownership of. Okay? The working group report has not been either recommended or not recommended to me by the Urban Hospital Council. I am hoping that we receive reports this month on some of the issues from the Urban Hospital Council, and I am fully prepared, as I indicated earlier, to share the report and the government's decision and subsequent action plan, if any, on any of those decisions.

But look, my honourable friend has indicated his concern about that recommendation or even that issue, period, from square one and I appreciate that concern. In reality, I guess I have to say that is exactly why I said earlier today and have been saying consistently to the member for St. Johns (Ms. Wasylycia-Leis) that our process in Manitoba is the most open and consultative process there is.

(Mr. Bob Rose, Acting Deputy Chairperson, in the Chair)

If we did not have those kinds of issues being discussed, there would not be interim reports

floating around for people to speculate on, to offer comment on, as the member for The Maples (Mr. Cheema) has offered on. I mean, that is the essence of the strength of our process in Manitoba. It is the most open process of attempting to come to reasoned decisions that has ever existed in the province, and currently, the most open process that exists anywhere in Canada.

That is why, from time to time, I get a little distressed with the accusations by the New Democratic Party that we have somehow this hidden agenda, this closed-shop approach. I mean, those issues are almost wide open for discussion, but I am not taking ownership of any of the decisions until the Urban Hospital Council has made their final report.

I will accept or reject or accept in part some of their recommendations. I still have those options open to me, and at that stage of the game I am prepared to share with my honourable friends the member for The Maples and the member for St. Johns the report and government's decision and action plan, and it can be critiqued, disagreed with, modifications can be suggested.

I am open to those kinds of reasoned suggestions, but I say to all who are listening, that is the whole strength of the open process that we brought in. I will continue to do that and I will run the risk of having speculative discussion around what government might do. I will take the risk of that and the potential fears that some can generate in the community over those action plans compared to not discussing the issue. I mean, not discussing the issue gets us absolutely nowhere.

So, Mr. Acting Deputy Chairperson, I accept my honourable friend's concerns, and I will certainly look forward to receiving his advice on issues as I accept reports and give action plans reflecting them.

Mr. Cheema: Mr. Acting Deputy Chairperson, I want to discuss the issue further because the minister says the process is very open, and there are a lot of committees. That is one of the reasons he is telling us that we get reports, because the process is open, and that is not entirely true.

This press release is from January 15, and the working group met on February 6. How can the minister have a press release and say that the recommendation is already accepted by the council and that was one of the recommendations, and the committee meets almost three weeks later and says

they did not have adequate information to make a decision on many issues? That is on page 4 of the report.

It clearly says that this is a wrong decision, and they should have consulted them before the minister issued a press release because that does create a lot of fear in the minds of people. I think we may be wasting some time here because if the consultation was done in a proper way, you have full information and your deputy minister is a chairperson of the meeting of all the working groups, so he, in fact, the government is fully in charge of the whole process, and that is true.

It may be that the deputy minister does not discuss everything with the minister, but still, there is a connection within the department and that is the perception. We want the minister to, in the future, when they are issuing all these press releases, consult with the groups, see what those groups are saying and open up the process.

Without that, I do not think that some of the issues, which are very controversial and it will be to the minister's advantage to get people on his side.

When I am going to interrupt something, if it was valid, and it is very, very risky to be constructive in the opposition and we discuss for 16 hours and was there any positive media news?—nil, zip.

* (1520)

The only thing is if there is a noise—but we are not going to do that, but I want the minister to be a little bit more sympathetic to the open process. It has to be open, not only from the minister's point of view, but it should be from a public point of view. I would again urge him to open the process to the public more than what they are right now.

I will ask the minister that, as he promised in June of '91, that he will convey some of the issues that we raised in this committee to the emergency care committee because things that we said, the committees are saying exactly the same thing.

There are a number of other issues that the committee has brought forward, one issue is the whole creation of a paramedic system which is going to cost about, according to them, \$1.5 million. I will not go into that detail. I will certainly ask the minister that somebody in his department should read that report and probably let the minister know some of the very controversial issues.

My further question is in terms of the next line, not on the Executive Support staff, but on the Evaluation and Audit Secretariat. If we are willing to pass the present line, then we can go further and ask the questions.

Mr. Orchard: Ask if you wish, it is the will of the committee.

Ms. Wasylycia-Lels: Mr. Acting Deputy Chairperson, we were at the point of, the minister was I think, going to address some requests made last week, rather earlier this week, regarding extended bed closures at the Health Sciences Centre. I am wondering if he has the information now.

Mr. Orchard: Mr. Acting Deputy Chairperson, I was about to provide that information, but unfortunately I did not want to provide it without my honourable friend having the benefit of hearing it.

I do want to take the opportunity to correct my honourable friend, even though this may cause her some angst. My honourable friend said to be concerned over hospital deficits is nonsense. I mean, you cannot talk about the provision of health care in changing the way we approach health care if you allow the largest single spending line in your department to operate without any fiscal control.

Everybody recognizes that because the dollars you allow, if you allow deficits to balloon in your hospital system, the dollars you consume must come from every other area of the department, a number of which my honourable friend mentioned. You take them from Continuing Care. You take them from Health Promotion. You take them from Mental Health. You take them from Community Services.

My honourable friend further went on to say that we all agree of moving patient services from high-cost institutions to low-cost institutions and lower-cost community alternatives. Well, I know that we all agree about that. But where I have taken it one step further, which is new, and no government has ever discussed it before, is the intention that when we move those services with the patient from, for instance, the teaching hospitals to a lower-cost institution and/or the community, that we will be closing the bed that was providing those services, I submit inappropriately, at the teaching hospital to save the budget there to move it with the patient.

My honourable friend went part way in that she agreed with moving from high-cost to low-cost areas

of service provision, but does she agree that it is necessary to close the bed in the high-cost area that was providing the inappropriate service? Because that is where we are moving. That is what we are discussing now with those very same hospitals. If my honourable friend does not agree with that, then my honourable friend ought to state that. Because that fundamentally changes this so-called commitment that we sometimes hear from the New Democrats, that they believe in reform of the health care system. I mean, you cannot have it both ways. That is why both Hospital line and Community Services line in 15 successive budgets have both gone up in parallel, because as we have placed more services in the community, we have left the beds intact, and there is an old maxim in health care that a bed is never an empty bed. There will always be a patient admitted to it.

Those patients do not need to be admitted to some of our very high-cost institutional beds. Services can be provided elsewhere, and when you do, you curtail the service delivery, the patient admission, by closing the bed. That is what happening in Brandon right now.

That is the kind of informed change in the system that the board, the administration, in co-operation with the community service providers have been able to achieve. That is as reasonable a model of the kind of reform that can take place as exists, probably, anywhere in Canada. That is why I supported that process in a press conference with the board and the chairman.

I will provide my honourable friend with the information she requested, but first of all, I want to indicate to my honourable friend that when she picks pieces of information, she tries to leave an impression that is not accurate. I want to indicate that my honourable friend, when she questioned me in July of last year, she said: Now that we know he knows, will he deny approval for the 60 to 70 beds closed now at the Health Sciences Centre and being extended as bed closures until March 31, 1992?

My honourable friend maintains twofold in her questions today, first of all, that I did not acknowledge that there was summer bed closures going on, and furthermore, that I indicated in my answer in July that I had no knowledge of summer bed closures, and that secondly, I had approved the extended bed closures and did not give accurate information.

Mr. Acting Deputy Chairperson, that is not accurate because in my immediate answer, I said to my honourable friend: Mr. Speaker, as I indicated to my honourable friend yesterday, summer bed closures are in process right now at the Health Sciences Centre and at a number of hospitals throughout Manitoba.

I did not, as my honourable friend alleged yesterday, deny that beds were being closed over the summer period—No. 1 correction of fact for my honourable friend. Secondly, I had a number of other pieces of information that I will not use with the committee.

Mr. Acting Deputy Chairperson, I go on to answer: My honourable friend said to put those bed closures on hold—and by those, I was referring to the extended closures to March 31, and by those bed closures, she meant the extended ones that Health Sciences Centre has proposed until the Urban Hospital Council has reported, and a co-ordinated plan taking into account the needs of patients is presented to the people and dealt with.

When I indicated that was the second part of her question, here is my answer: That is exactly the status of that proposed extension on a number of beds at the Health Sciences Centre. No decision has been made to close them, nor will any decision be made to extend any closures beyond September until the Urban Hospital Council examines the impact on the system in Winnipeg.

Again, I provided my honourable friend with the information that was accurate in July, that there was no decision to grant the request made in June for extended bed closures when she posed the question in July. So my honourable friend erred factually by saying I denied knowledge of summer closures at the Health Sciences Centre, because I acknowledged the beds were being closed, as I answered, for the summer closure period.

Secondly, my honourable friend alleged that I had given approval to the extended bed closures. My answer clearly says that this issue was not given approval. The Urban Hospital Council was dealing with it. Subsequent to that, the Urban Hospital Council did deal with that issue.

Those beds, some 42 of them, have been closed and are closed right now. Those are RR-5, 10 beds; RR-4, 10 beds; CK-3, six beds; WS-5, 12 beds; and D-5, four beds, which were not in the original plan, as I can understand here, but were closed for a

dining room area for geriatric beds. In other words, the room for those beds has been converted into a dining room for geriatric patients at the Health Sciences Centre.

*(1530)

But those extended bed closures on those above-mentioned wings were granted after it was determined that the Health Sciences Centre would be able to operate in a reasonable fashion in terms of admissions and service delivery. There are an additional 23 beds on E-6 that are closed, but they are still considered to be a temporary closure and may, I say only may, be opened depending on decisions by the Health Sciences Centre around the budget process for '92-93.

Ms. Wasylycia-Leis: Mr. Acting Deputy Chairperson, I appreciate the information. I will not get into the minister's explanation for the apparent discrepancy in terms of information—

Point of Order

Mr. Orchard: Mr. Acting Deputy Chairperson, there is no discrepancy in the information. I read from Hansard, July, the time my honourable friend asked her questions and alleged I denied knowledge of summer closures and had approved extended closures. I answered to neither question, as she indicates. There is no confusion around the information except that my honourable friend wants to fabricate untruths.

Ms. Wasylycia-Leis: I would suggest that the minister withdraw the term "fabricate." [interjection] Well, then I will withdraw my withdrawal.

The Acting Deputy Chairperson (Mr. Rose): Order, please. I have been informed that the term "fabricate" is a variation of the word fabrication, and since we asked the honourable member for St. Johns (Ms. Wasylycia-Leis) to withdraw that word, I would ask the honourable minister to do the same, please.

Mr. Orchard: As you wish, sir.

The Acting Deputy Chairperson (Mr. Rose): Thank you, and on the point of order, there is no point of order.

* * *

Ms. Wasylycia-Leis: Mr. Acting Deputy Chairperson, I was not trying to question the minister's explanation. I simply was pointing out the fact, as I had noted before, that on June 26 his

department and his commission received detailed information about extended bed closures, and on July 10 the minister said neither he nor any member of his staff, nor the Commission, nor commission staff, nor associate deputy minister were informed. I will leave the record to bear out the issues at hand.

Let me ask just a question about the 42 beds that have been permanently closed, and let me not put judgments on the information provided by the minister. Let me ask for a clarification. Did the minister say that 42 beds of those extended summer closures had then permanently closed, and could I further ask if those beds will be included in the present bed-reduction target to the Health Sciences Centre or are in addition to the target that has been suggested to the Health Sciences Centre by the minister's own department?

Mr. Orchard: Mr. Acting Deputy Chairperson, to again clarify my honourable friend's quandary that she has put herself in, my honourable friend does not acknowledge my answer in which I said summer bed closures are ongoing right now at the Health Sciences Centre and that no approval was given for any extension beyond September, as detailed in the memo from Mr. Thorfinnson. At the July 17 Urban Hospital Council meeting the issue was discussed, and it was concluded that the bed closures would have no impact on other facilities. As a result of the July 17 Urban Hospital Council meeting, which surveyed the other hospitals, it was determined that there would be no impact on the group of facilities in the Urban Hospital Council to grant the extended closure, and hence it was granted and those beds remain closed.

Mr. Acting Deputy Chairperson, I cannot and I will not get into the discussion of my honourable friend's last question, because I have not been informed by my department of their analysis of the Health Sciences Centre's response to this year's budget.

As I indicated in the Question Period today, their preliminary budget estimates were given to them some several weeks ago. They were preparing plans which would detail their operation, and how they would handle this year's budget. Those plans have been brought back to the ministry. The ministry staff are analyzing those plans, and I have not seen a finalized analysis and approval of those plans.

That is why when my honourable friend takes the quantum leap from my answer today in Question Period, saying I have all the answers, I am afraid

that I have to tell her that I do not have those answers, because the analysis has not been completed and I have not been informed of how the respective facilities will meet their targets.

I fully expect that information to be available when we arrive at the hospital line that my honourable friend wanted to rush to today. That is what I have told her consistently, and she will have her answers when we get to that line.

Mr. Acting Deputy Chairperson, I cannot answer the second part of her question. I want to indicate to my honourable friend that the 42 beds plus four, which were retired from services in order to make a dining room area for geriatric beds, and the 23 beds on E6 still remain out of service. Apparently, the impact on the operations of the Health Sciences Centre appear to be as expected at the Urban Hospital Council meeting of July 17 of minimal impact. I will indicate to my honourable friend why.

In 1989-90 the total admissions to the Health Sciences Centre were 34,052. In 1990-91 that total admission figure had declined to 32,826. That is primarily because of the 31-day nurses' strike where the admissions were down somewhat for the month of January 1991. In 1991-92 the period of time for which those beds have not been in service, admissions to the Health Sciences Centre have been 34,313, some 250 more admissions than in the last full year of service delivery at the Health Sciences Centre uninterrupted by the nurses' strike.

In terms of patient days of service, the 1989-90 patient days of service totalled 327,026. In 1990-91 they were down to 316,328. For 1991-92, and again I will give my honourable friend the normal precaution that I give, '91-92 figures are not finalized. They are preliminary because the year-end is only nine days past, but the preliminary indication on patient days of care is 319,631.

* (1540)

That would tend to conform with the direction that we are moving in acute care service provision of shorter average length of stays. As I noted to my honourable friend, the admissions were up, but the patient days were down, so that means that patients were having stays in the hospital of lesser duration. The indication, Mr. Acting Deputy Chairperson, is that those closures have not adversely affected the level of patient care at the Health Sciences Centre. In fact, it appears as if they have been able to increase admissions with fewer beds in service.

(Mr. Deputy Chairperson in the Chair)

Ms. Wasylycia-Lels: Let me ask the minister about the process he has put in place for dealing with the responses by all facilities to this minister's budgetary and restructuring plans.

He has indicated that in the past it has been the Urban Hospital Council that has given final approval for, or some approval—I wish the minister would not shake his head because I am seeking information about how this actually works. I always had understood that approval for changes in our hospitals, bed reductions or cuts or summer bed closures or whatever, rested with the department and with the minister.

He has indicated that with respect to—for example, last summer's extended bed closures at the Health Sciences Centre went to the Urban Hospital Council for approval on July 17, and I appreciate the clarification vis-a-vis the information I had brought to this committee. I am just checking to see, is there a new process then in place in terms of who responds to recommend to plans or proposals in response to government budgetary targets, or whatever, than was previously the case, or am I misunderstanding what the minister has said?

Mr. Orchard: Mr. Deputy Chairperson, the same process exists for approval of hospital budgets that always existed, and that is that government gives the approval to the budgetary plans of the hospitals in terms of the budgetary process. That has existed, I suspect, for as long as we have funded hospitals centrally.

What is new to the process, and is the informed part and the progressive part of the system of change we have put in place, is the opportunity to understand the system-wide impact of one institution's proposal.

In the case of the request by the Health Sciences Centre to extend to March 31 certain bed closures, which was an unusual request, we had the opportunity and the benefit of the Urban Hospital Council to seek the opinion of the other institutions that may be affected by such a decision by one institution to indicate whether in fact it would have an impact.

That is a reference ability that strengthens the comfort that the ministry has that the decisions we are approving will have minimal impact on the level of patient care delivery.

That is the much more informed, much more co-operative, much more enlightened process of change that I refer to and have been referring to consistently for the last year and a half that is envied by all other provinces because none other has an Urban Hospital Council to serve as that sounding board for system-wide change. That is the new approach, the new and enlightened approach by this government, replacing former approaches that dealt only with individual hospitals without the sufficient opportunity, I might indicate, of understanding the system-wide impact of individual hospital approval of decisions.

Point of Order

Mr. Cheema: Mr. Deputy Chairperson, are we still discussing the hospital budget? I do not want to be excluded from the whole process. We had a discussion last Monday, Tuesday, and if we are going to talk about the same issue, then I would like to get some time also.

Mr. Deputy Chairperson: The honourable member for The Maples did not have a point of order.

At this time, I would like to remind the honourable members, we are dealing with item 1.(b) Executive Support. If the minister chooses to answer questions in other areas, that is at his discretion.

* * *

Ms. Wasylycia-Lois: Mr. Deputy Chairperson, I will be happy to give up the mike at some point in the near future. I just want to clarify—[interjection] The Minister of Transportation (Mr. Driedger) suggested that it would be next week. Well, I was only continuing on because the member for The Maples said he had no more questions on this line, but if he is reconsidering that, I will certainly pass over the mike in a short time.

I did want to point out that I am asking some general questions here about process that does very much involve the deputy minister. It is important for us to understand so that we do not ask, in the minister's words, silly or uninformed questions, and it will become critical over the next short while as more and more rumours start coming out, so I want to understand.

Now taking what the minister said about the process and what is new in that process, do I take it then that in terms of the present situation, with

hospitals responding to how they will meet budget targets by this government and how they will respond to restructuring plans of this government, that all proposals and all plans will come forward and be assessed by the Urban Hospital Council before they go a step further and before any beds are cut or any budgets are finalized?

Mr. Orchard: Mr. Deputy Chairperson, that is not what I indicated in my answer to my honourable friend. I indicated that government will make the decision, or the ministry will make the decision on approval of requests by individual facilities where appropriate, as was appropriate last year on the request for extended summer bed closures. We deemed it to be an appropriate vehicle to vet that request by one institution to see whether it would have any impact, and over a series of meetings starting July 17, the Urban Hospital Council concluded that the system could accommodate such a request by the facility. That is the advantage of the Urban Hospital Council.

We will use appropriately the Urban Hospital Council to seek similar system-wide challenges, but it is not a requirement of process. It is an additional enhanced opportunity that we have put in place to make the process a more informed one.

Ms. Wasylycia-Lois: Mr. Deputy Chairperson, I appreciate that explanation from the minister. I was certainly not trying to leave the impression that I thought it was a requirement. I am just trying to understand the various steps that will be taken for vetting these proposals and the opportunities that there will be for input and for advice from different sectors of the health care community.

I am wondering if—and I would like to refer the minister to a memo that he would be aware of from the president of Health Sciences Centre to all staff following their retreat on March 18 and 19 to try to begin responding to the government's budgetary directives and announced plans for restructuring.

That memo indicates that the executive staff and board of directors must now take the next step by drafting a set of recommendations to government together with our observations on the impact those recommendations would have if adopted. Government and hospital officials will then review our recommendations, together with those of other hospitals. Final decisions on the restructuring of the provincial health system rest with the government of Manitoba, of course. Is that an understanding on the part of all hospitals, that their plans in response

to the current government's targets for the budget and for restructuring purposes will then happen on a collaborative basis involving all hospitals. I would assume that means all urban hospitals.

* (1550)

Mr. Orchard: Mr. Deputy Chairperson, if I understand my honourable friend's question, my honourable friend is asking whether the process as outlined in the memo from Mr. Thorfinnson to all staff in that they are developing plans around budgetary numbers and are advancing those plans to government which has the final approval for acceptance, et cetera. Yes, that system is in place for all hospitals, and all hospitals are in the process of developing their plans of service operation for '92-93. That is the same kind of information that has been brought in for how many years—too many to count, so that is the process. The difference in the process or the advantage in the process that we have compared to previous administrations and even previous years in this administration is that we have also the opportunity through the Urban Hospital Council to have the discussion of system-wide issues if we deem it an appropriate discussion to undertake.

That was the reference I made to the request by the Health Sciences Centre last June. That may well be the vehicle used on growing numbers of issues, but the final decision as indicated in that memo rests with government and will always rest with government. We will attempt, as we have, and as we are reinforcing almost monthly, our opportunity to seek wider discussion and opinion on issues in health care. The Urban Hospital Council is one of those forums, and I can name a number of others that are available to us, so that we have a more open opportunity for discussion around the issues than has ever existed before in the province of Manitoba and, indeed, far more open discussion and decision-making process than any other province in Canada.

Ms. Wasylycia-Lels: Just a quick follow-up to that and then I will pass it over to the member for The Maples (Mr. Cheema). I just wanted to see if I could get an understanding of the minister's definition of "appropriate." I know we have had some difficulty in terms of talking about numbers, of proposals pertaining to bed closures. I am wondering, if there is any truth to these numbers of 240 beds being closed at the two teaching hospitals and another 200 at our community hospitals, if those kinds of

numbers warrant special consideration by the Urban Hospital Council or any other mechanism for consultation, any input. Is that in line with what the minister means when he says "where appropriate?"

Mr. Orchard: Mr. Deputy Chairperson, my honourable friend is talking in terms of bed closures. I have indicated to my honourable friend that we will be developing systems of moving services with the patient. Where we remove a patient and provide the care in a lower cost institution and the teaching hospital happened to have been the place where the service was delivered, if we deliver that service in a lower cost place, the bed at the teaching hospital will be closed. That is part of the process of reform that we are embarked on. The request by the Health Sciences Centre for extended summer bed closures was vetted through the Urban Hospital Council. It was deemed not to have a system-wide impact, hence was given approval.

Those issues are vetted appropriately to seek system-wide advice. Let me give you an example. A couple or three years ago before we had the Urban Hospital Council, following the no-deficit policy put in place by Howard Pawley and the NDP, one hospital was mid-year approaching a significant budgetary problem. One of their proposals for budget containment was to curtail chemotherapy for patients suffering from cancer.

Clearly, Mr. Deputy Chairperson, we did not have the forum of the Urban Hospital Council, but very quickly the decision was made that that would be an inappropriate system-wide decision, because all you would do is move that patient requiring chemotherapy to another institution, and it becomes their budgetary problem.

That is why the reform process that we are embarked on has the patient as the centre to the theme. The budget as much as possible will move with the patient. That way you avoid those kinds of inappropriate decisions that would simply transfer costs from institution "a" to institution "b." That is not reform. That is attempting to transfer management problems. We did not accept that, naturally, three years ago. We certainly would not accept it today. So that is why underpinning the reform process is movement of the budget with the individual.

Mr. Cheema: Mr. Deputy Chairperson, can the minister tell us within the policy direction by the executive support staff and specifically the issue of the LPNs, because that is not part of the major reorganization and has not been very clear with the

membership as such. They are in a major confusion as to what is going to be their role in the future. There are about 3,800 LPNs who are practising in the health care profession, and they do perform many duties which include from the active in the hospital to the personal care homes and in the communities. Some places they are even performing more duties than are legally covered for, because maybe they are the only person who is available for those duties.

Manitoba, as the minister knows full well, has done very well in terms of LPNs in this country. They were suppose to be having one of the best programs. Now with the program out of the Red River College, there has been a moratorium put on that program and there is speculation and a possibility of a program at the St. Boniface Hospital for the training of LPNs. So these professionals are very worried, because they have to decide on a number of issues.

Number one is: What is their role going to be now? The second issue is in the present system and is: For their role in the future system in terms of if they go for further training to be RNs and within two or three years they have to retrain themselves to BNs, what is going to happen? Are they going to continue to re-educate themselves and not really find a suitable role? We have raised the issue in the House. At that time the minister said that he had not received the final reports from the hospitals and other places.

I would like the minister to tell us what the government's policy is in terms of the role of LPNs in the reform of the health care system.

Mr. Orchard: Mr. Deputy Chairperson, I think the LPN as a professional group can play a very important role in the health care system today and on into the future. However, that role may well be changing in some institutions in some areas, because my honourable friend has been informed of the same staffing changes that I have in certain hospitals where under reorganization of staff there will be circumstances where several LPNs would be laid off and replaced with a combination of RNs and nurses' aides in the workplace to provide care and also in these cases to contain budget.

* (1600)

Mr. Deputy Chairperson, I cannot give my honourable friend—and we have had these discussions with the LPN association—a clear

answer as to the role of the LPN a number of years out, nor for that matter, given the dynamics on the education side, for the registered nurse with the baccalaureate program being certainly an objective of the professional association MARN to have as a minimum entry to practise.

There is a lot of consternation, I guess one might say in terms of nursing education. We have over the past year and a half, I guess, had a study group on the MARN side which led to the commencement of a collaborative program at Health Sciences Centre. Currently a proposal for St. Boniface is on hold for a similar collaborative program.

Now, I do not have perfect answers as to who ought to be the caregivers in the workplace five years out, so what we undertook as a department was in January of this year, because what really speeded up the process was this whole controversy over Red River Community College moratorium on LPN rumour—well, not just a rumour. I mean, the St. Boniface board actively considered the closure of the school of LPN nursing at St. Boniface I believe in late November.

We developed a survey in the ministry, and all institutions have been asked to provide us with their current staffing complement, BN, RN, LPN, nurses' aides, RPNA, RPN, so that we have a sense of what the current employment patterns are in acute care, long-term care. I believe we have done community health facilities as well, I think, in that survey, but for certain at the long-term care as well as the hospital side. We have asked those same employers to indicate to us five years from now what they expect their staffing patterns will be. We expect to have that survey in and analyzed toward the end of June.

Now that is going to present us I think with one of the better opportunities to try and answer the question that you have posed, and that certainly the LPNs—because I think they are feeling pretty crowded in the workplace right now—to try to give some direction to them, so they know where their future goes. Furthermore to provide government with a sense of how much training capacity we ought to have for LPNs at St. Boniface, at Red River Community College and at any other location that may be appropriate for graduation of LPN nurses.

There is the same kind of consternation, however, amongst the registered nurses with two years training, because they have the same fears that the system is going to crowd them out and that they

must go back and upgrade their education to baccalaureate. Well, yes, certainly that would be, I think it is fair to say, the professional goal of MARN, but what I have cautioned MARN and certainly have cautioned the employers is that we have to understand what you need to adequately undertake patient care.

I do not know how to put this genteelly, but the entire focus on length of education can be an argument which develops a life of its own without any attachment to care delivery in the workplace, like who actually does what for the patients when they are in hospital or on an outpatient basis or receiving services through continuing care in their homes. So we hope that this survey gives us that kind of sense of requirements that the managers of the system view as their needs and their institutions five years out. Hopefully, that gives us the opportunity to guide both education and training and preparation of professional staff in terms of qualifications as well as numbers of those different qualified individuals that we will need to meet projected needs in the workplace 1996. That allows us to structure training programs appropriately. I am hoping that midsummer we have some pretty definitive direction.

Mr. Cheema: Mr. Deputy Chairperson, can the minister tell us or table any communication in terms of his communication with the LPN association? Because when the issue came out, I think the membership was not very clear. The membership was not blaming anyone in particular, because the one hospital was telling them something else. The other personal care have their own policies and in a way these 3,800 individuals who are practising in the field were getting very mixed messages. They were frightened and they are still not very clear.

If the minister thinks that the government thinks these individuals have a very important role to play, but then at the same time that is not what they are feeling right now. They are really frightened because there is a major group of the other health care providers—the RNs and then there are the services being provided by either the nursing aide or the other support staff so LPNs are being squeezed out. That is a reality of life.

They have to feel confident that their role is very important. Specifically, they have mentioned that they could even play a more important role in personal care homes where the LPNs are playing a major role as compared to the other professionals.

I want the minister to tell us if there is any communication from his department to this association and the other hospitals, even though the minister says the hospital as the managers have to make a decision. There has to be a policy from the government that we are going to protect these people who have a very, very important role to play. I think it is going to be very economical to use the LPNs in many health care services because of their training, because of the other work they do.

Out there, some individual may say that, well, LPNs are just doing minor work, but that is not true. They do a very important role and that is a message they were trying to convey through the public campaign. I am sure they were very successful, and that is why I think the minister is very sympathetic to their cause. Still, there has to be clear direction from the minister's office.

I would like to know if there is any communication in written form he can share with us and the kind of survey they are doing so that we can also make an informed judgment.

Mr. Orchard: Mr. Deputy Chairperson, there has been the survey go out and then prior to the meeting where one of the issues that the LPNs were going to put before their membership was of a consideration of a salary rollback. There was communication prior to that meeting. I will check with the association and see if they have any concerns with me sharing that with my honourable friend. Certainly, I do not have any difficulty with sharing that information.

* (1610)

(Mr. Bob Rose, Acting Deputy Chairperson, in the Chair)

The LPN is a professional association. I think it is fair to say that they were the victims of a number of dynamics in the workplace, the professional dynamics of registered nursing which had management positions making decisions on staffing patterns which they viewed as compromising their continued employment. They had concerns that they expressed to me about the dedication or the commitment by MNU in terms of representing them in those layoff circumstances. My honourable friend is quite correct. There was one heck of a pile of concern and anxiety. The LPN association had a number of discussions with employers, and I think the employers, some of them at least, indicated that the dynamics around staffing patterns was a tough

one for them as administrators. As we indicated back in January of 1991, by "we" I mean MHO and ourselves as government doing the nationwide survey, the registered nurses in Manitoba had fallen to about eighth or ninth in terms of relative salary comparison, whereas the LPNs were at that time the highest paid LPNs in Canada.

That circumstance has, I think, varied maybe slightly so that they are second, slightly behind, I think, British Columbia now. In some of their discussions with management, it was indicated to them that the new staffing patterns, where there was in some institutions a replacement of the LPN with a combination of RN and nurses' aides was able to offer staffing patterns at a lowered cost.

I think the indication given by some administration people was that the hourly rates of LPNs led to that sort of circumstance. That is why the executive put the resolution to their membership Thursday two weeks ago, I guess.

For whatever reason and for whatever dynamics that resolution did not pass. So nothing has changed, and I do not think there is any question that probably the LPNs are still believing that those dynamics within the workplace are working against them rather than for them. I committed to the president of the MALPN association when they were taking that sort of a bold step, that if as an association, as a professional group, they passed a resolution like that, it would certainly be an indication that they were willing to participate and preserve their role in the health care system.

For whatever circumstances, that resolution did not receive approval of the membership, and I am wanting to set up a meeting with the executive of the MALPN as soon as we can. Estimates are kind of causing difficulty in that regard, but as soon as I can I will be meeting with them to hear directly the dynamics of the meeting.

Mr. Cheema: I just want to share with the committee that with our discussion with the LPN association and also their membership, and I know that they have met most of the MLAs belonging in their own ridings. That kind of exchange took place, and we made a commitment that the LPNs have a very important role to play.

As a member of the Legislative Assembly and as a policy maker, I think this government has a responsibility, a very important one, to make sure that even though their numbers may be small as

compared to other associations, they play a very important role. We do not want them to get turfed out of the whole health care system, and that is the perception they had.

I think with the exchange they have with the minister and in the future after this survey is done, we would like to reinforce again that they should and they will play a very important role. Also it could be a very important part of the cost-effective system, most specifically in terms of their role in the personal care homes which is going to be very essential, and also in the community level.

Some services where you do not need the home care worker or you do not need the RNs, you need a specialized care where the LPNs could play a very wide role. Right now they are not playing a major role there. I think that is one area to explore for further development as far as the LPNs are concerned. That will be very positive. The member for Inkster has a couple of questions on the LPNs, and then I will go back to the other issue.

Mr. Lamoureux: I had the opportunity as many, no doubt, other MLAs did to meet with LPNs from our own ridings. I took advantage of that opportunity and met with them and shared a number of the concerns that the member for The Maples (Mr. Cheema) our critic has brought forward, and I appreciate the minister being so forthright with the answers that he has given.

I would ask the minister if he has looked at what the other provinces are doing, or the general direction of the LPNs in other provinces?

Mr. Orchard: Well, not all other provinces have LPNs, and that is one of the difficulties of comparability. I think only about two other provinces have what you could call a comparable professional training; other provinces have nurses' aides, or certified nursing assistants, et cetera, the difficulty being that the training program is not necessarily consistent province to province.

There are comparable programs in a couple of other provinces that contrast with the RNs. For instance, RN two-year diploma nurses essentially train consistently across Canada so they have some mobility. That does not necessarily apply with the LPN because certified nursing assistants, or nurses' aides and other classifications have differing training requirements, duties in the workplace. That makes comparables difficult across Canada, but there are two other provinces with similar programs.

Mr. Lamoureux: Having said that, two things come into my mind: One is the minister here made reference that the LPNs were the highest paid in Canada and more recently the second highest. I guess when you say that, are we comparing it to what then in the other provinces, like when we look at Quebec or B.C. are we comparing it to that one step lower than what we would classify a LPN? I would assume an LPN in Manitoba then would have some further education than let us say what would be the equivalent of an LPN in another province that might justify that second-place finishing.

The second question would be the one of those two provinces that do have LPNs that we can compare to, are they looking at expanding, or are they even looking at the issue?

Mr. Orchard: Mr. Acting Deputy Chairperson, the comparison that was used, for instance in January, were our LPNs and were for the level of training, et cetera, and duties. The comparison was made with British Columbia, where apparently the LPN program is very similar in terms of training and opportunity for care delivery in the workplace. We were slightly higher at that time, so that made us No. 1 is my understanding, but in the last year and half we are a few cents per hour below.

* (1620)

Alberta for instance has an LPN program which is new. That may not be fair; it is not new. They are now calling what they used to call RNAs, with additional training, they are now LPNs, so I guess in essence you could say they are new. Now their training program appears to be at least as long and maybe longer than our training program in Manitoba.

I will source this information to my executive member for the LPN association in my area that I met with. Indication that she gave me was that the Alberta program for LPNs actually, she believed, developed maybe more skills for the workplace. She indicated to me also that the Alberta health care system was employing the LPNs quite extensively, and used that as an example.

That begged the question, and she shared some information with me which I subsequently was able to confirm in terms of where the Alberta LPN placed in terms of salary compared to our LPN. Our LPN effective January 1, 1992, which is now, starts at an hourly salary of \$13.81 and with six years of experience will achieve a maximum salary rate of

\$16.94 an hour. The starting rate for the LPN series in Alberta, apparently as of April '91—so this is year-old and apparently they are into negotiations, so this will probably change—but as of now the starting salary is \$11.81 an hour and has a maximum level at the end of year five in Alberta of \$13.42 an hour. You can see that if the information appears to be accurate, they are more highly skilled, they can offer more skills in the workplace, the Alberta top of the range in salary at \$13.42 would be about what?—39 cents below our starting salary in Manitoba.

I would suspect that in Alberta they are being hired quite extensively. I am not able to confirm that, but just looking at the comparable salary rates, that would certainly seem to confirm the information given to me by my executive member of the LPN association that Alberta was moving very quickly to the utilization of LPNs in their health care system.

Mr. Lamoureux: Mr. Acting Deputy Chairperson, the concern in most part was about that, was in regard to the salary. Many felt that in fact that is one of the reasons why. They had attempted to explain to me what it is that the LPNs do. Part of their concern was that they were going to be phased out and replaced with nurses' aides, because they are cheaper and potentially in the future those nurses' aides would become a form of an LPN but just at a different pay scale and possibly with a different name.

The other concern that was brought to my attention, and I guess all of us can sympathize with it, and that is that you have 3,800 LPNs in the province, and there are a large number of rumours that have been out there, and I understand it is more than just since January of '91 or '92, that it has been there for a number of years. For many of them they are at a crossroads. Do I go back to school? If I go back to school to upgrade, there really are not very many positions open for RNs. Do I have to go back to a nursing assistant? What type of a future is there for the LPNs?

The minister made reference to the survey that is being done. Without any sort of expertise like my colleague for The Maples (Mr. Cheema) or the background information that the minister has, a concern that I would have is that this survey that is coming out, that is going to be coming back to the minister from the professionals, from the institutions and the administrations will be one that will indicate that we are going to see some form of phasing out

of the LPNs because of the bottom line being the cost factor.

I would ask the minister to comment, I guess, on the first part, and possibly to ask if the minister is going to be making available those survey results to the individual MLAs and also to the LPN association so they can distribute it for comment from the LPNs.

(Mr. Jack Reimer, Acting Deputy Chairperson, in the Chair)

Mr. Orchard: I forget what the first part of the question was that I was to respond to, so I will respond to the last part first.

We have not made any decision about circulating the individual responses of facilities, because we did not ask for that co-operation with the knowledge that we would be circulating them beyond. But the results are certainly going to be there.

Let me anticipate my honourable friend's next question, because I have had this discussion with the LPN association and they have a concern that the surveys will be filled out by nursing administrators who are non-LPN. Okay, do not ever worry. We have thought of that concern, too, because that has been the concern expressed by LPNs. That is part of the turf protection, if you will, in the workplace that has caused them some of their problems. Okay.

You see the advantage of the survey, as I see it, is that the LPNs make the case that there are some institutions that hire degree nurses and nurses' aides and establish that staffing pattern, and there are others who really favour LPNs. So I think we are going to get an accurate reflection facility by facility, because those facilities that the LPN association says utilize their members to a high degree are certainly going to indicate that in today's survey and into the projection into the future.

I recognize the concern that they have expressed, but it will show up in the survey if there are pretty substantive differences in terms of the future projections. Of course, that is the major concern: Who is making the future projection? I know that we will only know after the survey is completed. But I know very well that there will not be consistency in terms of response, because some facilities will reflect what they view as a different staffing pattern in the future.

I do not think you are going to find these surveys consistently eliminating the LPN, as is the fear. Taking for granted and presuming results, I think it

is going to give us probably our best indication of what the future trend is going to be.

Let us look at the issue of the cost, because my honourable friend has indicated it; for instance, and the comment has been made: How can you save money if you hire BNs and nurses' aides? Well, good question. I have asked that myself. If, for instance, someone who is a manager says that five years from now we are only going to have—let us speculate—BNs on our nursing staff, they are going to have to ask why they have proposed that staffing pattern as being in the future when a similar facility may well have proposed that they expect their staffing will be a mixture of a number of trained disciplines. It will not be too difficult to do a future projection on costing.

The survey is offering us a pretty fair opportunity to try to get a handle on what the future holds and to give some of that advice, not only to LPNs, but to two-year trained RNs, BNs, nurses' aides, as to what the future may well hold. I know of no better way to try and give that sort of projection into the future.

* (1630)

Mr. Lamoureux: Finally, to the minister, I would ask is—the survey itself is a good idea—what I would ask the minister is: Is there any process that will allow the different levels of health care professions to have some form of equal input into a final decision being made?

For example, the minister has a number of committees, but not all the committees have that broad representation from all the health care professionals. I would wonder if the minister would be willing to make a commitment of sorts to ensure that there would be some process put in place, so that before a decision is made one way or the other, however it might turn out, that all the health care professionals will in fact have had some sort of input in hopes that there would be a consensus of sorts that, yes, this is the way to move to have better health care professionals overall.

Mr. Orchard: I guess that is exactly the dynamic we are in, and it has never been done before. The survey is going to be, I think, a pretty fair indicator. Bear in mind, although there is the perception that I can order the hiring of any particular trained professional anywhere in the health care system, that is not accurate.

I mean we have global budgeting and we tell institutions, here are the dollars that you have to undertake your operations for the fiscal year, and we leave them with the management decisions as how they can do that within the budget and to provide the appropriate patient care.

We do not tie their hands by saying you must do all of this or all of that. There are some founding guidelines which are driven by legislation which establish the nature of some staffing and hence the expenditures driven by that, but the LPN association believe that I could take a magic wand and order their retention and their expansion within the system.

(Mr. Deputy Chairperson in the Chair)

Well, I cannot do that for LPNs; I cannot do it for diploma RNs; I cannot do it for baccalaureate RNs; nor can I do it for nurses' aides; nor should I do it, because that is not the role of the Minister of Health. The Minister of Health is to provide overall policy and guidance to health care provision and budgets to the institutions.

But I tell you, we pay some pretty decent salaries to our senior management in our health care institutions. If I can be so blunt to say—and follow up from my honourable friend the member for The Maples—a heck of a lot more than what I get paid for being the minister. But that is not an issue. We pay professional people to manage the system. We are asking those professional people to tell us what they project the employment requirements will be five years down the road. I do not know who else will give us a better indication of that.

If we cannot trust our senior managers to give us what is their best indication, I do not know where else we can go. I mean, will I sit down and between myself and my honourable friend the member for St. Johns, will she and I sort of smoke a peace pipe and create the staffing patterns five years out? I do not think that would be appropriate.

Number one, I am not capable of making that kind of decision. I do not have the knowledge that is required to make that kind of decision. I am not saying that my honourable friend has or has not, but I would suspect that she would be pretty uncomfortable trying to make that decision because her skills development has not been in management of health care facilities. Neither has mine.

You have to go to your professional managers to get the best indication. There is still apprehension

and fear about that by the LPNs. I appreciate that, but I do not know of a better system with which to seek the information to guide our training decisions, what kind of schools of nursing of all types of nursing, LPN, Diploma, Two-year, RPN, BN. Hopefully, this will give us as good an indication as we have ever had.

What was the first part of the question?

Mr. Lamoureux: Mr. Deputy Chairperson, this will be the final question that I will have for the minister. The final, final question if you will, and that is even though I can buy most of what the Minister of Health is saying on this issue, the only thing that makes me wonder is that if we agree that the services that the LPN provides and the quality of professionalism, and for whatever reasons we believe that because of their salary they are receiving that it has virtually priced them out of being able to possibly play a major role in our health care field, that because of those dollars we find that we have to phase them out and take up the lower paying nursing assistant, and possibly have that nursing assistant doing some of the tasks that an LPN would have been doing that would have had more qualifications.

That is the only caveat that I would put on some of the remarks that the minister had put on the record, and if he would like to respond to it, he can.

Mr. Orchard: I do not quite follow my honourable friend's line of thought there, because my honourable friend is talking about the care delivery, the professional care delivery, and I do not think anyone questions that. That it becomes an economic factor, I think that is true.

I do not know what the solution to that is because, as I indicated earlier on, our LPN series in Manitoba has a starting salary of \$13.81 an hour and a top salary of \$16.94 an hour, where indications I have gotten from Alberta is their LPN series starts at \$11.81 and has a maximum salary of \$13.42 an hour. So that although the training appears to be at least equivalent in Alberta, certainly the salary schedules are not. So to make a comparison that using LPNs to a greater degree in Alberta versus Manitoba is accurate, but then that begs the question, why?

Well, health care managers and employers in Alberta are not much more flush with cash than we are in Manitoba. Certainly they are probably going to get more money than any other province in Canada, but they are not fat, their pockets are not

dribbling with money anymore. So their decisions on staffing patterns, I know doggone well will be influenced by the salary schedules of their LPNs versus their RNs, because in Alberta their RNs are paid slightly more than our RNs in Manitoba. So the differential between LPN and RN in Alberta is certainly greater than what it is in Manitoba. So when our managers make decisions, of course they have to budget a day's salary cost on a ward of their blend of staffing, and they make those decisions. In some cases, as the LPNs have observed, they have done a replacement of LPNs with a combination of RNs and nursing assistants.

Mr. Lamoureux: I know I said "final" twice. This will be the last time, Mr. Deputy Chairperson.

If the bottom line when it comes to the LPNs is a question of dollars to administrations, then I am wondering if it would not be most appropriate to bring that particular issue to the negotiating table and think in terms of not only this year, but five- or six-year agreements, that the unions or the individuals that are going to be affected should be well aware of what it is the intentions of the administrations are.

For example, if they say that over the next eight years, you are going to be receiving a 3 percent increase, and if you do not accept that 3 percent increase, well, we just will not be able to afford to retain the LPNs or will have to phase them out. Well, at least the LPNs should be made aware of it, that the reason why they might be phased out is because of the dollar. It is not because of the service that they provide for our health institutions.

* (1640)

I would suggest to the minister that if in fact that is the issue and when these surveys and when all of the consultation is done, if that is the issue, that at least those professions, whether it is LPNs, RNs, BNs, whatever it might be, should all be entitled to know the reason why the administration and the government are moving in that particular direction, that we do not want to just give the platitudes to those professions, that we want to be straightforward and let them know exactly as to why something is being done.

Mr. Orchard: Mr. Deputy Chairperson, I can seek some agreement with what my honourable friend is saying with one exception, that the government is not saying that. Government does not say that because government gives global budgets to the

employers who then establish the staffing patterns. If I can be so bold as to conclude, that is exactly the message that Manitoba Health Organizations gave in December of 1990 in trying to reach a settlement with MNU on January 1, 1991.

The employers were given a lump sum of money from government to cover the costs of a two-year contract, and we give to MHO—and this has always been their role, to craft that funding commitment of government into an offer to the MNU. In that offer, because of the relative positioning of the RN in Manitoba compared to other provinces, roughly at ninth I think at that time, they said we are going to focus all of our resources in year one of the contract, 1991, on the RNs, and because our LPNs, and at that time their information was they were the highest paid in Canada, you might recall they put a no-increase offer out for the LPNs—zero percent. That was the signal they were trying, I think, to send to the LPNs of Manitoba through the bargaining process.

Now, you know, I am not certain, and I am not a labour expert, so I cannot say whether the managers of the system can accept my honourable friend's advice to tell them that there is zero percent on the table, because if you take any more you are going to price yourself out of the market. I do not know, that might be challengeable before the Labour Board as an unfair practice, as intimidation—I am not certain.

I do think it is fair to speculate that the managers of the system, the employers of the system, MHO in January of 1991 clearly signaled to LPNs through a zero offer for year one and clearly stated the reason for that, because one observing without knowledge might say, well, why are you picking on LPNs and giving all the money to RNs? Well, the public information that they put out, and certainly the information they put out to MNU, was as I have indicated that the relative positioning of RNs at that time was ninth in Canada of the provincial comparison and at that time the LPNs were the highest paid in Canada. They made that known at the negotiating table as well as publicly, because there were questions publicly: Why are you offering zero to the LPNs?

I was on Peter Warren, and there were a lot of LPNs who phoned up and were very angry at being offered a zero percent with the MHO structuring of the offer. I indicated that the reason MHO would put that on the table was, as I have explained to you this

afternoon, at that time their information was they were the highest paid in Canada. That has not been the relative positioning that we have had in health care or in any other endeavour of public sector compensation. We have always attempted to be somewhere in that five and six range. That is where we have traditionally been, you know, five, six, seven, somewhere in there.

Mr. Lamoureux: Mr. Deputy Chairperson, I have to respond also as the Labour critic on this, because I do not want anything to come back to haunt myself, and that is that I am not suggesting a percentage increase or trying to give the impression that LPNs are underpaid or overpaid. Rather, that if the bottom line is in fact the dollar then what is necessary is there is a responsibility to negotiate so that in fact LPNs, whatever the health profession, even outside of health, know exactly what they are dealing with and potential consequences.

Mr. Daryl Reid (Transcona): Mr. Deputy Chairperson, like the member for Inkster (Mr. Lamoureux), and I am sure many MLAs in this Legislature, we have had our meetings with LPNs throughout the community. I am sure the minister is well aware of some of the concerns that the LPNs have been raising for some time now. I listened with interest to the minister's comments talking about the recent resolution that the MALPN had put forward to its membership whereby the salary or the wage structure of the LPNs was going to change, and they had proposed a 3 percent reduction per year over three years for their members as a means of widening the gap between the LPNs and the RNs. I found that was an interesting resolution for an organization to put to its own members and obviously showed the seriousness of the situation here and maybe one of the ways that they thought that the minister might be interested in looking at, or the administration of the hospitals would look at, retaining LPNs in the system as we know it today.

My question for the minister is, by the minister's comments that he was making earlier, does he see that the level of payment to LPNs would be the only way that he can see the hospital administrators retaining LPNs in the system to keep them an integral part of the health care system as we know it today?

Mr. Orchard: Mr. Deputy Chairperson, I cannot answer that as being the only way. As I indicated to the President of MALPN I think that would be, as my honourable friend used his language, quite an

interesting resolution to put before the membership. It would certainly put a signal to the employers across the system that they were serious about retaining their role of health care delivery. I told the president that would be a signal that certainly could not be ignored either by myself or by employers, but for me to answer whether that would have made everything perfect and well, I simply cannot give my honourable friend that judgment.

I will tell you that it was a very, very bold resolution to even consider putting before the membership, because no other group that I am aware of in public service at the executive level has put such a resolution out for discussion amongst the membership in general. It was, to me, a very sincere signal that the LPNs want to continue to care.

Mr. Reid: I have had many meetings with LPNs in my own constituency. They are very, very worried about what appears to be a policy direction, whether from an administrative point of view or from the government's point of view, because they are not sure where the policy is coming from at this time. Nevertheless, they are worried about their jobs and what the future holds for them.

Those who are advancing in their years find that it would be difficult for themselves to go out and seek some kind of retraining. For those who have newly moved in to the work force or have been in the work force for just a short period of time that have just achieved their LPN training, they find it difficult to have to be put into a position where they might have to go back to school again to take themselves out of the work force effectively and to seek some kind of retraining.

* (1650)

From the minister's comments that he made here just a moment ago, I am interested in what the minister's thoughts are. If he sees this proposal, this MALPN proposal, this resolution that was brought forward as a way of achieving in his opinion the retention of LPNs in the system, or is there something he sees that may be greater that would be required to achieve the retention of LPNs in the present health care system of the province of Manitoba?

Mr. Orchard: Mr. Deputy Chairperson, first of all, my honourable friend said there appears to be a policy, whether it is government or the employers, to eliminate LPNs. My honourable friend says that

is the impression that the LPNs have. Yes, that is right, they shared that concern with me as well. There is no such policy in government, and I do not believe there is such a policy within the institutions. What is happening and it varies institution by institution. It is by no means consistent across health care in Manitoba. Managers are making differing staffing decisions. In some cases those staffing decisions result in LPNs being laid off and replaced by a combination of RNs and nursing assistants. In those instances, naturally, there is a great deal of concern for the future of remaining LPNs in those institutions. Other institutions are not doing that. It is not a consistent approach institution by institution.

My honourable friend wanted to know if I believed that resolution would be the end-all and be-all solution for the LPNs. I told him, and I will tell him again, I do not know, but certainly it would have been quite a signal of commitment to remain as a care provider in the system, should it have been passed.

I would say to my honourable friend, that kind of a signal from a professional group to my knowledge has never been given in the 15 years that I have been here and would be a signal that was of sufficient seriousness that it could not possibly be ignored by the employers in the system, that the employers would have to very seriously consider the LPNs' role if they were willing to widen that gap between RN salaries and current LPN salaries.

Whether that is the only signal, I cannot answer that. I indicated to the president of the LPN that I would think that would be a very important signal for them to send to the workplace, but for whatever reason—I am sure that will be shared at my future meeting with the association executive and president—that resolution did not succeed, I do not know. I do not know what the debate was. I was not at the meeting and I am not privy to the kind of discussion that took place there.

Mr. Reid: Mr. Deputy Chairperson, it is my understanding that the debate was heated, because the LPNs themselves were quite concerned on the impact upon their own personal lives that this type of resolution would have held for them. There was some understanding that had it been for a wage freeze then they would have only had to eat the cost-of-living portion of salary impact. The proposal of a 3 percent reduction on top of the cost of living was something, from my understanding, more than they felt that they could bear at this particular time.

My question for the minister, though, goes more along the lines, because he has indicated time and again in the House that he has an advisory council, the Urban Hospital Council, that advises him on these matters concerning the health care system. It is my understanding that these are comprised of administrators in the various hospitals throughout the cities that are in this working group.

Have these administrators advised the minister that they would be interested in this type of a proposal and this would be the impetus that would be needed for them to seriously look at retaining LPNs in their particular facilities? Have these administrators given the minister any kind of indication on their intent?

Mr. Orchard: No, Mr. Deputy Chairperson, and of course the Urban Hospital Council is the CEOs of our eight facilities in Winnipeg and Brandon General Hospital. The survey has included them plus all the other facilities, long-term care included. The survey ought to give us a system-wide analysis of current as well as projected future staffing patterns.

Mr. Reid: One last question, Mr. Deputy Chairperson. One group of LPNs that I met with were employed in a personal care home in my community, were quite concerned about their jobs in the future, what it holds for them.

As well, the administrators of that facility are concerned because, if the availability of LPNs is reduced for them—they rely quite heavily on LPNs in their facility there to provide the necessary care—does the minister see, because there is a perception out there that there is going to be a reduction in the number of LPNs available in the system—at least it is moving in that direction from what I am hearing from those who are employed in this field—that it may create some budget difficulties for these personal care home administrators in the future because they will not have access to LPNs to make up for the normal attrition rates that they would incur in their operations?

Mr. Orchard: Mr. Deputy Chairperson, I do not see that as an immediate problem. The moratorium at Red River Community College is just that, a moratorium pending determination in an accurate way of what the future demand might be, because education has attempted to put some sense to that, too, because Red River Community College put the moratorium on that training program.

That is the whole essence behind the employment survey. What we are trying to achieve is some sense of what the requirements for not only LPNs but RNs, BNs, nurses' aides, registered psychiatric nurses will be in our institutional side of the health care system, so that we can take with some greater degree of accuracy—because you are never going to be perfect, because nursing is cyclical; we are up and down in nursing; we have gone from surplus to scarcity over a fairly regular basis—to try to give us some sense of the future so that we can provide realistic training goals so that, hopefully, upon graduation there are employment opportunities.

I would find it most discouraging if I was a person entering nursing, given the expectation that there was going to be employment, to graduate finding none was there. I would feel more cheated than if I had been advised upfront, look, you may have difficulty working your way into full-time employment because things are tight right now.

So the employment survey, hopefully, will give us that kind of guidance on training program tight-end capacity.

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

FAMILY SERVICES

Madam Chairperson (Louise Dacquay): The Committee of Supply is dealing with the Estimates for the Department of Family Services. We are on page 60, item 3.(d) Regional Operations: (1) Salaries.

Will the minister's staff please enter the Chamber.

Ms. Becky Barrett (Wellington): Madam Chairperson, before we continue the Estimates process in Regional Operations, I would like to take the opportunity, as publicly as we are here, to apologize to the minister for the inaccuracy of the information that I had this afternoon in the question that I asked. I have spoken to the minister directly and have stated that had I had the updated information that the Leader of the second opposition party (Mrs. Carstairs) had available to her prior to Question Period, I would not have asked the question that I did because it would not have been, to my way of thinking, a legitimate question to ask in Question Period. I did not have that information.

I asked a question based on inaccurate information, and I just wanted to apologize to the minister for that.

Hon. Harold Gilleshammer (Minister of Family Services): Madam Chairperson, I appreciate the comments made by the member for Wellington. I did take the question as notice. I wanted to assure her that we would do a follow-up on these circumstances that brought forward the issue, and I will reserve the right to bring that information back to the House in a timely fashion.

* (1440)

Ms. Barrett: Madam Chairperson, I have a couple of further questions on Regional Operations, if I may.

At the end of my time in Estimates on Tuesday I was discussing with the minister the possibility of having the 24 annual trips for disabled Manitobans who are accessing social assistance to be, instead of having to be requested by the individual of the staff and having a maximum of two a month, allowing the disabled recipients of social assistance have the flexibility of the 24 trips credited to their account, if you will, at the beginning of the year, and then they would have the responsibility for using those trips in a responsible manner, thereby leading to a greater degree of independence.

I would like to ask in that same general area—another request that has come forward from the disabled community that I would like to ask the minister to respond to and hopefully to be able to come up with a positive answer is the issue of grocery shopping, a major concern for people, particularly those who are disabled. The actual physical problems attendant upon getting to grocery stores and being able to buy enough food and carry it home is a logistical nightmare at times.

The suggestion has come forward that there be one trip a month through the Handi-Transit system, through the transportation system, paid for by social assistance for grocery shopping which would be an additional up to 12 a year, and that those trips not be credited against the 24 annual trips that they already have.

I am wondering if the minister has considered that suggestion, and if not, if he would consider it for implementation.

Mr. Gilleshammer: Madam Chairperson, I indicated when we last met that the issue of trips for social allowance recipients, and particular those that are in the handicapped category, is an issue

that is before the department and one that I think over the next while we could take a look at, and the member has said, would we look at additional trips and additional funding.

Staff were just doing some rough calculations, and the request the member is putting before us may be upwards of \$2.5 million, and again, I guess we have to look at requests. The member asked about telephones the other day, and there is a cost to that, and I guess a cost to any enhancement of programming.

This budget year we did some enhancements that are a cost to government, and I guess Estimates is about cost and about expenditures, and I reference the program for the disabled being at about \$8 million. The 3.6 percent, of course, was at a cost. Even the liquid assets has a cost to it, so it is a part of the total of the additional \$41 million that we have put into social allowances.

Having said that, certainly we have committed to look at this area of trips, particularly on the issue of flexibility that the member raised, I believe, on Tuesday. I think as we start preparing for next year which will start in the coming months, and looking at the budget, and I think the member knows that in the area of social allowances, we have tried to make those announcements in October, November, December.

Because for historical reasons those budgets are adjusted on January 1, as opposed to April 1. So the request is, I suppose, timely, and we will look at the whole area of transportation. I am not sure what we can do, but if it is a matter of flexibility within the current budget, I think that is possibly the area that we would have the most success at addressing.

Ms. Barrett: Madam Chairperson, yes, I appreciate the minister's willingness to look at these issues and hope that we will be able to see some progress in those regards.

Just a brief comment on the additional costs, for example, for telephones: The minister spoke the last time that 18,000 of the 24,000 Manitobans on social assistance do have a telephone. Some of those are telephones that are paid for by social assistance for medical reasons and after proven abuse or concern for safety. I know there are some women who also have the phones paid for out of social assistance. The vast majority of those 18,000 Manitobans are finding that money out of their current social assistance rates.

My suggestion to the minister is that if the basic phone rate was paid for, for those social assistance recipients, they would then have that \$12 or whatever the basic rate is a month, additional revenue. The minister could perhaps look at the whole disposable revenue that a family on social assistance would then have access to and could perhaps moderate the rate increase each year.

I hesitate to bring this up, because I am not advocating a lessening of the percentage increase, but if the minister gave social assistance recipients the basic phone rate, then that would free that money up to be used for other elements and could be taken into account when looking at the entire social assistance budget. So it does not necessarily have to mean a 100 percent of that increase of that amount over what the recipients would normally get.

One final question, and this is an issue that I do not know the answer to, and I am not at all sure what parts of it are federal and what parts of it are provincial, but we have information that the income tax credits are now able to be garnished for past student loans and that particularly this final income tax lump sum credit that social assistance recipients are accessing for the final time. Is that accurate? Does the minister know, and if that is the case is it a federal or a provincial matter?

Mr. Gilleshammer: I did see something in the media on that issue. It is a federal issue, and my understanding of it is that the federal government was going to try and recover outstanding student loans through achieving that money through the income tax refunds that were available to individuals as opposed to through any welfare program. You may recall that there is a case currently before the courts dealing with the whole issue of the responsibility to pay back overpayments. Anyway, the issue you raise is a federal issue.

Ms. Barrett: I have no further questions in this area.

Madam Chairperson: Item 3.(d)(1) Salaries \$20,582,300—pass; 3.(d)(2) Other Expenditures \$4,513,000—pass.

Resolution 44: RESOLVED that there be granted to Her Majesty a sum not exceeding \$378,771,300 for Family Services, Income Security and Regional Operations for the fiscal year ending the 31st day of March, 1993—pass.

Item 4. Child Day Care (a) Salaries.

Ms. Barrett: Madam Chairperson, yes, several questions about this particular issue.

* (1450)

Mr. Gilleshammer: I would like to introduce a new member at the table who is responsible for Child Day Care, Gisela Rempel.

I would like to just advise members of a correction in the Departmental Expenditure Estimates, on page 62, the second-last line where it says: Financial assistance for parents of approximately 7,000 children. That should be 8,300.

Ms. Barrett: Madam Chairperson, my first question for the minister in this category was going to be that I compared the Expected Results from last year's Estimates with this year's Estimates and found them to be exactly the same. So I see that in one area at least they are not exactly the same.

I would like to ask the minister, in the Expected Results category: How with all of the additional licensed spaces and activity in this area three of the four expected results are the same? There are additional families eligible for financial assistance, but the licensing of numbers of spaces and centres and homes and financial support are exactly the same.

Can the minister explain how those figures have not changed at all over the last year?

Mr. Gilleshammer: Our projections, or our actuals from last year, were somewhat less than the projections. There has been turnover. With the pause in the licensing, our projections are similar to last year's projections and perhaps somewhat above last year's actuals. We certainly did correct that one area though that was an error.

Ms. Barrett: Last year in Estimates the minister supplied us with quite detailed information on the number of spaces in the city of Winnipeg and in the regions, and the number of children who were actually filling those spaces. I am wondering if the minister could provide us with the information that they have as up to date as possible.

Mr. Gilleshammer: We will certainly get that information for the critics, and I think we could have it later this afternoon for you.

Ms. Barrett: Also, last year the minister provided us with information as to the number of organizations and the regional breakdown of those organizations requesting daycare spaces and the number of spaces that they were requesting. In addition to the number of spaces and the numbers

actually occupying those spaces, could the minister also provide us with the number of organizations requesting additional spaces and the location of those organizations as well?

Mr. Gilleshammer: Yes, I believe we can provide most of that information, if not all of it for you.

Ms. Barrett: Last year the minister announced \$370,000 additional funding for the program for children with disabilities, allowing for an increase of approximately 50 children. According to the expected results that figure is virtually the same for this year as it was when you added in the approximately 50 children from last year. I am wondering if that is accurate, and if that is the case, if the minister can tell us if there are additional children who have asked to be funded under this program?

* (1500)

Mr. Gilleshammer: Yes, I have some figures that might be helpful dealing with children with disabilities. There are 206 centres that have children that fall into this category, and over the course of the year some 577 children have been served by this program. There is a small number that have not yet been accommodated and I think it is fair to say most of those are in the city of Winnipeg.

The number of children that I gave you represents the total number of children served from April 1, 1991, to January 31 of this year. I point out that some of the children are enrolled for only part of the year and one space could be filled by more than one child. That happens from time to time. The actual number of children enrolled as of January 31 was 327. So the increased funding last year did accommodate more children. There are still some that are not accessing the program.

In addition, I have indicated the children that are accommodated in the centres. There are also approximately 25 children in family daycare homes in Manitoba where child daycare provides some grant funding.

Ms. Barrett: Last July when we were last in Estimates, in response to the same area, the minister said there were 178 centres across the province accommodating some 400 children with disabilities and 25 children in family daycare homes.

So what the minister is now saying is that there has been a substantial increase in the number of centres that are providing services for children with special needs, from 178 to 206. That seems fairly

clear. I am wondering if the minister can clarify for me the actual number-of-children figure?

I understand that children do not stay in the program or they do not come in, all of them, at April 1, and they do not all stay all the time, but the figure that was given last year was 400 children with disabilities. Which figure for this year does that one relate to? Is that a comparable figure to the 577 or to the 327 snapshot picture as of the end of January?

Mr. Gilleshammer: The number compares to the 400, where we are now serving 577. I might just say that I can give you some more detail on the centres and where these children are located if it is helpful.

There are 125 centres in Winnipeg serving 194 children; in the Interlake, there are 13 centres serving 28 children; in Westman, there are 27 centres serving 45 children; in South Central, there are five centres serving 21 children; in Central, there are six centres serving 17 children; in the Norman region, there are five centres serving 28 children; in the Parkland region, there are eight centres serving 11 children; in Eastman, 11 centres serving 27 children; and in Thompson, six centres serving 21 children. Those totals again would be 206 centres that provide services to children with disabilities, and they are accommodating 577 children.

Ms. Barrett: As of January 31, they were accommodating 327 actual children. Over the course of that nine-month period, they had accommodated 577. Yes, it does appear that there has been an increase in both the numbers of centres and the numbers of children.

I cannot remember if I asked the minister if he could give us information on the number of children that are waiting for special needs subsidies.

Mr. Gilleshammer: We do not have an official waiting list, but there are a few, I think primarily in the city, who are waiting to be accommodated. It appears that through the changes that take place in the centres, the capacity is there in a fairly reasonable length of time to accommodate them.

Ms. Barrett: Last year I asked the same question, and the minister's response was that there was no official wait list for children in this category. He indicated that the centres themselves had that information, and that that information had not been compiled at the daycare office. He said he would attempt to compile that information.

It appears that there still is not a central compilation of wait list for special needs children. Is that an accurate statement and, if so, could the minister explain why that particular activity has not been undertaken?

Mr. Gilleshammer: I guess the answer is that the system we are employing, in working with the centres and with the families of children with disabilities, appears to be working. The children appear to be accommodated without any lengthy period of waiting.

Ms. Barrett: My understanding for the special needs program is that the subsidy that is made available to enable children with special needs to attend daycare is attached to the daycare centres rather than following an individual child. Is that correct?

Mr. Gilleshammer: The manner in which the system works is that the grant for the special needs child does go the centre. The subsidy, however, goes with the child. Not every centre has a staffing pattern that allows them to accept the special needs child without making certain adjustments. So I guess it is fair to say that certain centres have been developing that service, and not every centre has. So the grant, again, goes to the centre and the subsidy goes with the child.

* (1510)

Ms. Barrett: I was probably misusing the word "subsidy." I did not mean the subsidy that we talk about and will be talking about as far as the fee structure is concerned. I guess I meant the grant that allows that enriched programming and staffing for special needs children. I meant grant, so I thank you for that.

So because the grant goes to a centre rather than being directed towards a special needs child, in effect what that means is that the families of special needs children have less flexibility or less choice in their daycare provisions than another family without a special needs child would have. Would that be an accurate assessment of the situation?

Mr. Gilleshammer: The special needs grants are only extended to fully funded centres, and that is, I suppose, the reason that they are not extended to all centres.

Again, I think the practice in the evolution of centres is because of facilities and because of staffing patterns, there have been some centres that have developed a capacity to accommodate those

children. But I think it is fair to say that all of the fully funded centres are in a position to accommodate special needs children.

Just in regards to your comments about the error you made between subsidies and grants, this is something that happens even with the people who work in the system and are knowledgeable with the system. I think it is sometimes a source of confusion to the general public when you talk about subsidies and grants, and I think one of the things that we have to keep talking about and making that distinction so the general public has a better understanding of the daycare system.

It is probably more true in rural Manitoba than it is in the city of Winnipeg. I can recall talking to a group of mayors and reeves and municipal councillors in my area. Just because of the fact that there are not a lot of centres and daycare homes in that part of the province, there are different attitudes towards it in the first place, and I think the member would appreciate that.

But certainly, when you get into a discussion of grants, and grants for the children with disabilities, and the whole system of the subsidies, and the subsidies varying with family income, it is not an easy concept to explain, even with people who have some knowledge of the system, but it is confusing for those who are not using that information on a regular basis. So it is not an uncommon mistake.

Ms. Barrett: Can the minister explain the difference between a fully funded and a not fully funded centre?

Mr. Gilleshammer: The partially funded centres receive half of the grant that the fully funded centres receive. This is, again, part of the evolution of the system, dating back a little while, that, in adding more spaces to the system, some centres came on stream with the full knowledge that they were going to be partially funded and awaited the time when, I suppose, funding and government were able to fully fund them. So there is a distinction.

Ms. Barrett: The system is very complex, and by its nature it is complex, and it has gotten even more complex over the last year. I guess the issue that I am raising is an issue that has been raised with me by parents, more than one parent, of children with special needs. Their request and their concern is that they as parents of special needs children do not have the same access or choice as parents of children without special needs to—assuming of

course that the ability to pay, but let us assume that is a given. Within that, a parent of a special needs child does not have the geographical access to a range of child care facilities; nor do they have the range of the number of child care facilities that a parent of a nonspecial needs child would have.

Their recommendation is that money that currently goes to the grant to a daycare centre or a family to provide for special needs would instead go with the family of a special needs child who could then say, I want to go to the daycare that is closest to me, and I am bringing with me this amount of money to facilitate one half or a full child care worker. If the centre could not work that through their staffing patterns, that would be one thing, but the choice would then rest with the family rather than the family having to go to a less than totally accessible range of services.

Mr. Gilleshammer: In the evolution of daycare and nursery schools, one of the things that happened last year—if you recall in the budget that prior to last year and the restructuring, only a third of the nursery schools were funded. Our decision in last year's budget was to use that funding so that all of the nursery schools received some funding. This did increase the eligibility of nursery schools to receive special needs children instead of only a third of them being able to do it, all of them.

I recognize the member was talking about daycare, but we did by those changes expand the ability of nursery schools to qualify for special needs children. The member is right that the full choice—and is frequently right, not always—by the funding structure now for daycare it is only those fully funded daycares that accommodate those children. I suppose you are faced with the dilemma here of sharing that funding with all of the daycares, both the fully funded and the partially funded, and creating that ability, and then parents having that complete and wider choice and not, perhaps, allowing some of the daycares to, I might say, specialize in or accommodate a larger number of special needs children. If the criticism is that all daycares, both the fully funded and partially funded, are not accommodating those children, that is correct. Either there is an additional cost to it, to have that freedom of choice, or you make the resulting changes within the system; and perhaps there would be fewer daycares totally to accommodate the children with disabilities.

Again, it is not an issue that daycares—and I will have my staff correct me if I am wrong—have been raising with us, that we should have every daycare able to accommodate special needs children, nor have I, I do not think—you said, you have talked to some parents. I do not recall in reading the literature and the mail that I get that it has been a major issue. But I recognize what has happened within the public school system on the issue of choice.

* (1520)

The fact of the matter is that we do not have a sort of a daycare system that blankets all of Manitoba either, having centres everywhere. In fact, as you know, many rural areas are asking for an extension of the Child Minder Program, as opposed to centres, to accommodate the needs out there. It is one that we have met with the Women's Institute on, and it is an issue the department is working on because I am well aware of the special needs at seeding time and harvest time.

Another idea brought forward by the Women's Institute was even to have a registry, in communities, of people who would want to be interested in minding someone else's children. The thinking of the Women's Institute was that there may be a neighbour who would just love to help out at harvest time but nobody asked, and if the department could perhaps put into place a process, so that very short-term but odd hours of daycare, be accommodated for those people. So there are some ideas that we are looking at in that area.

Ms. Barrett: Yes, I believe that the member for Swan River (Ms. Wowchuk) raised this very issue last time we met in Estimates.

On the issue of rural child care, rural daycare, yes, there is no question but that the needs in rural Manitoba are different in amount and quality. Certainly, they flow more with the seasons in many parts of rural Manitoba, particularly in the farming communities. We have been advocating very strongly more flexible child care provisions in all parts of the province, which is part of the same continuum about the earlier concern I raised about the special needs grant.

On the whole issue of the rural daycare centres and families and flexible provision of service, we, too, have spoken with the Women's Institute about their resolutions about the Child Minder Program and other forms of rural daycare, and there was

some interesting information about programs in Alberta that had been undertaken in a pilot project manner. I am wondering, can the minister expand on that whole issue of rural child care? At what point is the department in possibly looking at more and varied forms of child care for rural and small-town Manitoba?

Mr. Gilleshammer: The member is correct regarding the needs in rural Manitoba. I am mindful of some of the small schools that are out there, and I know that other members are as well.

I think of them in Rolling River School Division, where I am told there will be two children in kindergarten at the school in Onanole next year, and the village of Sandy Lake I think has three or four children. School boards are struggling with ways to accommodate those children. In the past, where they have had a full kindergarten either for a half day or on odd days and even days and had a teacher employed, now they are struggling with that dilemma.

What do you do with two children? Do you hire one teacher to look after two children? Do you bus them to the next school? That is a dynamite issue, because you may have heard about schools that have moved children even within the community where perhaps there was a K-8 school and a 9-12 and they wanted to combine the sevens and eights three blocks away, and all of the horrors that anybody could ever think of happening to their children in school come out.

So school boards are very mindful of public opinion out there about what to do, and so very obviously the answer is, you do not move kids from one community to another, especially at the age of five, to attend kindergarten. One of the solutions is probably to add them to the Grade 1 class on a half-day basis or on an alternate-day basis.

Why I am telling you this is, it does reflect the small number of children in some of these communities, and I know the member is not advocating a daycare centre in every community, because it is one of the things that simply is not in the cards, and it will not work.

So we have looked at the Alberta model. We have worked with the Women's Directorate and the Department of Agriculture and the Women's Institute and others, and we have some working papers that are before the department now where we are evaluating what is being done in those other

jurisdictions and looking at how they may be used here in Manitoba.

I guess I talked about this earlier today in reference to the Child Advocate, that we have looked at the Alberta model and the Ontario model and certain things from them. So that is an issue that is before us. Certainly, I would like to think we can move ahead with some initiatives in the near future there.

Again, I am not sure how well the member is aware of the different attitude in rural Manitoba, particularly in small town rural Manitoba where there is not a daycare centre within many miles. Probably it was part of what my colleague was saying, there is a different attitude to even the responsibility of looking after children and the use of extended family and neighbours and so forth that we do have to find other solutions. I think the Child Minder is one, and a registry where those friends and neighbours who would like to be involved on a short-term basis at little if any remuneration, they simply want to be asked.

I think we have a role to play there in determining some suitability. As you well know that any adult working with children now has to pass certain basic tests of suitability. I think there are some solutions out there that I would hope we can move on within this year.

Ms. Barrett: Yes, I would agree that the needs and the desires and the programming for rural Manitoba, and in many cases northern Manitoba, are different from the traditional model. I look forward very much to seeing what comes out of these evaluations of other programs and the looking at the suggestions that have been brought forward by the Women's Institute among others.

I would just like to strongly recommend that any program that is put in place or any assistance that is given to programs that are generated from the community itself have a very strong suitability component however that is defined and also some training. I know there is a difference between having extended family members watching a child on the odd occasion and some more regular program, but I do believe that if the government is involved in providing services and resources to a variety of programs which is what we are all looking for, that the government also has a responsibility to ensure that those people that are on a registry or a part of a Child Minder Program have basic training

in such things as Red Cross, as emergency procedures, this type of thing.

We do not know, we cannot determine what will happen with children or what kinds of problems or issues may arise in dealing with children. All of our children whether they are in a very relaxed informal atmosphere in a very small community or in a large bustling inner city daycare centre deserve competent, caring, compassionate, trained individuals who are working with them. I would just like to urge the minister that that component not be forgotten when they are looking at providing additional and more flexible resources.

* (1530)

I have some questions as well that deal with issues that are being faced with, particularly by daycare centres outside the larger urban communities in our province, issues that have been, to their way of thinking and certainly to my way of thinking, exacerbated by the fee structuring changes that took place last spring. The minister well knows my views on the fee restructuring that he instituted last spring and the harm that I think that is doing to the daycare system in Manitoba.

One of the things that it seems to me is an outcome of that fee restructuring is that the individual centres are finding in many cases that they have less flexibility, less control over, less knowledge of, what their financial resources are going to be, because their funding is more volume driven and less based on the operating grant that it has been in the past. Because there is less flexibility in that regard, many centres especially those outside of the city are finding that their costs are not being able to be met through the new system and the new structure.

In particular, issues such as telephone expenses, equipment expenses, office supply expenses, transportation costs, the ability to go on field trips, all those things that are a problem for families who live outside a centre are as much, if not more, a problem for rural daycare centres. I am wondering if the minister can respond to those concerns that have been raised by centres.

Mr. Gilleshammer: I think the member is really saying that centres are having to take more responsibility for management of the operation of the centre and be acutely aware of the costs and the empty spaces. I recall under the previous system that empty spaces were not as great a concern,

because they were being in essence funded, and part of the restructuring is that they are finding themselves with more management responsibilities and it is the same thing that school boards go through as well. I know we have talked before about St. James-Assiniboia having to close 12 or 13 schools in that area of the city because of the demographics and the population shift and so forth.

We have regular meetings with the staff in daycare not only with the union representatives from MCCA, but we also meet with the Family Day Care Association and the independent daycares as well. There are a variety of opinions out there that we do respond to. Certainly, putting a pause in the licensing has been well accepted by the centres and the homes that are affected by that. Even though there were tremendous pressures on government and on the department to find funding for new initiatives, we were able to increase the operating grants this year by some 4 percent.

There are difficult economic conditions out there as well, and I know that staff have met with centre directors and boards and, in my experience, there is a recognition of the tough economic times which leads in some cases to less need for daycare spaces. Those are other factors that come into play. We will just have to see what changes are taking place. We monitor the uptake in spaces and the changes, whether they be changes from centres to home-based care or to private care. There are something like 18,000 close to 19,000 spaces out there now.

Maybe I could give the member those figures that she was asking for. In the centres and homes—and I will give you the number of facilities as well as the number of spaces across the province—in Winnipeg there are 626 centres and homes and they are responsible for 12,420 spaces. Out of the 18,000 or 19,000 spaces, around 65 percent to 70 percent of them are in the city of Winnipeg. Probably that exceeds the percentage of population of the province that lives here. In the Westman area there are 205 centres and homes accommodating 2,272 spaces; in Eastman there are 54 centres and homes accommodating 890 spaces; in Central Manitoba there are 85 facilities with 1,199 spaces; in the Interlake there are 57 centres and homes accommodating 757 spaces; in the Parklands region, 29 of these facilities and 403 spaces; in the Norman region, 24 facilities and 350 spaces; in Thompson we have 21 facilities and 484 spaces.

Across the province then we have 1,101 facilities and 18,784 spaces. I think that was what the member was asking for.

Just in relation to her other comments at the beginning of her last question about the need to do some regulating in terms of who is a child minder or looking after children, one of the programs that we do have is the Competency Based Assessment program where people can become certified simply by presenting themselves and their credentials and going through a program offered by the department.

I had the pleasure last year, I think it was, of attending a graduation that was held here in the Legislature of a group of students, if I can call them that, or participants in the Competency Based Assessment program, where they had worked with department staff and with others to reach a level where they were able to look after children. The point is well taken.

I guess it is fair to say, probably, we have never been more conscious of the fact that the adults who are working with children or looking after children have to be screened when they are not family members. One only has to open one of the local journals day after day to see examples, if not in residential schools across the country or in families or wherever, the amount of abuse that is being disclosed.

I think that awareness has made any organization and certainly government, who are responsible for licensing individuals, whether it is in the public school system or in the nursery school system or in daycares or wherever or treatment centres—we have to have that essential confidence that the people who are working there have the best interests of the children in mind.

* (1540)

Ms. Barrett: Madam Chairperson, yes, I appreciate the statistical, numerical information and also hope that before we leave this area, I can get the vacancy figures for those spaces. My understanding is, those are the total spaces available, and what the actual numbers of children in those spaces is at the latest point in time.

I want to comment, I hope briefly, about some of the comments that the minister made in response to my question about the rural daycares and then ask a question about the Competency Based Assessment program.

First of all, the Manitoba Child Care Association is under no definition of the word "union" that I am aware of a union. It is an association that is joined voluntarily by child care centres and providers. So it is, I believe, a misrepresentation of what the association does to call it a union. It is an association.

The minister also stated that under the new funding formula, centres are taking, quote: more responsibility for the management of the centre.

If I were a member of a board of directors of a daycare centre in the province of Manitoba, I would take strong exception to what I see the minister's comment saying. Maybe he is not meaning to say this, but it sure sounded to me like he is saying that prior to that boards were not taking responsibility.

I believe that centres have managed very effectively, the majority of them. I mean, there are always a few centres that are not able to financially function, but, generally speaking, in the past daycare centres in this province have been able to provide adequate and competent service to the children of the province.

The one thing that has changed in the last year is the funding formula. The impact that that has had on many centres is their going from a surplus, an operating surplus, to in the first year having to utilize all of that surplus that in many cases centres were using for potential future capital improvements, moving, being able to put that money to enriched programming, field services, field trips, toys, et cetera. They have used that entire money, and in many cases they are tens of thousands of dollars in the red.

Nothing has changed in the management of those daycares except the way the money flows to the centres. The boards in many of these cases are virtually the same people; the staff in many of these cases are virtually the same staff. They are attempting to provide the same kind of programming; they do not have adequate financial resources.

I think it is a misnomer to try and say that, if boards make better and more responsible use of their funds, everything will be fine. It is the same kinds of statements that the minister made a year ago, just about exactly a year ago, when he was talking about the concerns that were raised and the issues that were being raised about the Child and Family

Services agencies. It was up to the boards of those agencies to manage their resources effectively.

I think he is making the same kinds of statements, and I think they are as unreflective of the reality of the situation as his comments were in regard to the Child and Family Services agencies.

Mr. Gilleshammer: To just comment on that, I think the member is misinterpreting what I was trying to say. I meant no reflection on volunteer board members, who, I am sure, work very hard to make those management decisions.

What I am saying is in difficult economic times, whether it is at the family level where the income perhaps is not as great as it once was or because of other circumstances expenditures are running higher, there are difficult decisions to make.

I know parents who have two children in university at this time and may be from rural Manitoba, where not only are you looking at tuition but also board and room, and it is costing \$7,000 or \$8,000 per child. The decisions made within that family are all of a sudden far more difficult, whether it is to do with transportation, whether it is to do with holidays, or other expenditures.

I am saying that, if enrollments in centres are not full and there are some vacancies, then the management decisions become more difficult.

I can say to you what is happening in the school system. A division I used to work with in about 1970 had 4,000 students. Today it has barely 2,000 students. It used to have 200 teachers; now it has 140 teachers. The downsizing of those school divisions and the management of where those resources go has been difficult. What I am saying is when enrollments were going up in the school system and the funding that flowed because of student enrollment, it was easier. Management in difficult economic times, whether it be at the school division level or the family level or with the centres, is more difficult. That was the point I was trying to make with the member. I know that she would not want to portray my comments as being that management was not there at those centres. I am just saying in difficult economic times those decisions become more difficult.

The member alluded to funding with Child and Family Services agencies and decisions that those boards have to make. I can tell you I was in Brandon recently, and met with one of the board members there who works at the local hospital—and I know not

unknown to the member across the way—who indicated to me that they now have a surplus of \$1,000,000 in their funds with the Westman Child and Family, and felt that recent funding decisions that government had made had served that agency very well. Certainly, they would like to have more workers. They would like to have more staff in the field to deal with increasingly difficult family situations and children, but recognize in the economic times that funding changes had not been negative towards that particular agency.

I can tell you—and we will get into those lines a little later today perhaps, or the next time we meet—that there are additional funds for staffing with the Child and Family Services agencies that we will be working out with them in the near future. It is sometimes simplistic to say that the issue with boards is funding. I am aware that all boards which rely heavily on government funds would like to have more, because they can think of additional things to do.

I know when I have been out at Portage at our developmental centre there and met with the advisory board, there are dozens of things they would like to improve at that centre. At the Pelican Lake Training Centre where we have some 76 or 77 clients—and I do not know whether members have been there, but it is almost as if you took the automobiles away and you walked onto that campus, if there were horses standing at the hitching rails, you would get a picture of a very pastoral scene with old, old buildings. There are needs there as well.

So there are tremendous demands on government to provide funding to boards, whether it be school boards, hospital boards, boards of Child and Family Services agencies, but we have increased the funding year over year and I think it does not make the decision making any easier nor the administration any easier as they apply those funds to staffing and other costs and do the best job that they can do. So, I would say that I am aware that it is not easy managing and that a lot of these boards would ask for and require and be very pleased if there were more and more funds yet. We have tremendous demands and we make those decisions as best we can.

Ms. Barrett: There is no question that every agency that comes to this government for funding in every department could use more money. I am not suggesting that is not the case in the child care

system. I am suggesting that there are daycares that are saying that even if you did not give one additional cent more than the \$46,685,300 that you have budgeted for this year that the problem for daycares is compounded and made worse by the restructuring formula.

* (1550)

The fact is that it is far more volume driven than it has ever been in the past, that the operating grant has been effectively cut back, that the salary enhancement grant has been eliminated, and the funding available for fully trained staff has been cut back by in some cases a third because of the change in the funding formula. It is the change in the funding formula that is the single largest contributor to the financial problems that daycares are finding themselves in. When you add to that the worsening economic situation, which is a reality and everyone would agree with, it is a desperate situation for many daycares.

The St. Joseph's daycare, which we have had in the media in the last while, which since 1956 has been operating through good times and bad times—the 1981-82 recession was fine. I mean, they were not fine, but they managed to stay open—they have always had a wait list of upwards of two years up until last year. Now they are going to be forced to close at the end of June due to a combination of factors, not the least of which is the fee restructuring, which focuses attention on volume at a time when the fee has increased upwards of 50 percent for an infant in care, 20 percent for a preschool child, the economic downturn in the economy and the fact that the subsidy ceiling has not anywhere near kept pace with the fee increase. Add all of those together, and if you had not changed the fee structure and had maintained this figure here daycares would not be in the situation they are in now.

I will just parenthetically add that the underfunding, the underspending in this department in this division has been substantial over the past years, and we are certainly hoping that the increase that is budgeted here all gets spent.

I would like to ask the minister about two more things. First, the Competency Based Assessment program that he talked about earlier, could he explain what that program is and who is eligible for it and the parameters of that program and how it reflects on the issues that we were discussing about making sure that people who are providing services

for children are trained and have adequate background?

Mr. Gilleshammer: The member mentioned a number of things including the St. Joseph's daycare and did reference the history of that particular centre and that board. There are other circumstances and I do recognize that the member said that there were other circumstances besides restructuring, and I would just like to mention some of them to her.

First of all, when the board made that decision and sent the letter out, they did so without ever having contacted the daycare office to indicate that they wanted some assistance, and assistance has been offered but declined. There are a number of reasons for that. Pardon me, I should not say it was declined. The agreement was that offer would be passed on to the board.

One of the things that Sister Gerard said publicly is that now there are so many spaces, and what she was doing was recognizing that there was a time in history, as a nursery school, that it had provided a service in an area of the city that was in demand. There has been a large number of spaces in the St. James area and just as I referenced the school division having to make those difficult decisions on downsizing their buildings as their population went down, one of the things in that area of the city is that there is less need and also an overabundance of spaces.

The other thing that has happened that Sister Gerard referenced is as the enrollment has gone down, this has also been accompanied with the fact that there are no new sisters joining the order, and that they are not willing to make other changes that would allow them to become more marketable. I think I also recall a comment made by staff is that they were providing a service in time that was not readily available. I may be reading between the lines a bit but now that that service and those centres and those spaces are so readily available there is not the need that a church-based organization would rush in to fill. I think it is a recognition of changing times that they are not bringing into the order more members who want to work there.

So there are many, many issues. I know the member said there were and that it was not just a restructuring, and I appreciate her acknowledgement of that.

The member mentioned underspending. The underspending had occasionally happened where the money dedicated for subsidies was not entirely subscribed to, and we did not have the capacity to simply flip that over and spend it somewhere else. It was dedicated to subsidies. I am not sure what the situation is in this past year, but there certainly has been a greater increase on the call for subsidies.

Finally, the member asked about the Competency Based Assessment program. This, I suppose, could be referred to as an on-the-job training program where workers are able to upgrade to the Child Care Worker II level from the Child Care level I. Our child daycare office hires an adviser or trainer to work with the candidate. We enroll about 40 students per year in Winnipeg and rural Manitoba.

How long has this program been in effect? I am told it has been in effect since 1985. I guess it was an attempt to do this on-the-job training and allow people to get this training without having to enroll in a longer course where you become a full-time student. Again, it is just a small part of the total daycare package.

Ms. Barrett: I appreciate that information on the Competency Based Assessment program. I would assume that this program as it has been defined would not specifically relate to the Child Minder Program kind of training that would go into the Child Minder Program. It looks like it is more a program for upgrading workers who are in more traditional child care facilities.

* (1600)

Mr. Gilleshammer: There is a difference between the Competency Based Assessment and the Child Minder Program. In the Child Minder Program one of the basics is a knowledge of first aid and some other training, just more extensive first aid and I am told infancy CPR so that they can react if necessary.

Ms. Barrett: Could the minister give us an update on the needs assessment tool that he talked about last July as far as working with the evaluation of existing spaces and new spaces? There was work that was beginning, I understand, on a needs assessment tool, and if he could share with us any updates on that particular part of the program.

Mr. Gilleshammer: Yes, this is an issue that staff have been working on, one that the work should be completed in the next six weeks or two months, and

will be implemented when we are slated to resume licensing in July 1.

Ms. Barrett: Can the minister give me a general idea of what sorts of elements will be part of this tool when it goes into effect in July?

Mr. Gilleshammer: The work done in this area, I suppose, is largely research work. The MCCA has asked if they can have a look at this material. We will be in a position to share it with them in the not-too-distant future, but some of the research and work that is being done is looking at the demographics of the area, and I referenced the St. James area before. Some information, certainly, is gathered from the Family Allowance program, some federal information. We look at labour market statistics and, I suppose, monitor the economy and reflect the needs of the area through that. We are certainly looking at the number of vacancies that are existent in the system.

I might tell the member—and I may have done this one other time. I think it was in December that some staff and I met with three board presidents and directors who came in to talk about their centres. They varied in terms of the vacancies and the budget and the needs. Some had made some adjustments rather rapidly, and others were in the process of doing it.

One of the things that they asked—and I think it was a recognition of some vacancies in certain areas of the city—the fact that in certain areas of the city there appeared to be too many centres. As you know, people access a centre for a variety of reasons. Perhaps it is close by home or it may be close by the job, or there may be other reasons for accessing that centre which may have programming or other amenities that attracted that family. What they were asking is if we would work with them in some sort of merging of centres, who felt that they wanted to look at the resources and the facilities, and merge to make them more viable and perhaps have a situation where the centre would serve people and be virtually full and be more viable in the long run.

This whole question of where people are going to access their daycare is an interesting one. As the member knows, we have something called workplace daycare. I recall reading an article not too long ago of a workplace daycare which seemed to have been built with all of the right intentions and with, I think, excellent accommodations and staffing,

but for some reason the staff who had children who were expected to use it and access it were not.

They were busy studying why that was the case, because I think in many ways workplace daycare would seem to be the absolutely most convenient in that the children would go to the same place where one or both of the parents worked. For some reason it was not being used, and they were busy trying to see what the reason was. There were a variety of reasons, I think, that came forward which surprised them.

So this whole concept of people accessing the daycare of their choice is an interesting one. It may be because it is close by in the neighbourhood, it may be because it is at the work site or it may be because they have a history with another centre.

We are also seeing people who are making the determination to have their children in a home-based daycare or for a variety of reasons it may be in one of the private centres that are part of the market here in the city. So this whole idea of choice is important, and sometimes it is difficult to know what the reasons for those choices are, but I think our feeling is that parents should have that choice.

Mrs. Sharon Carstairs (Leader of the Second Opposition): Madam Chairperson, I am delighted to join in this debate. Sorry I could not join you earlier, but at that point I was still having some difficulty breathing.

The minister himself has just opened a very interesting avenue of questions, because he speaks about what the reasons are. Why are people, for example, choosing to leave centres and go into home care? Is it because they genuinely want their child in a small situation with several children or is it because there are financial constraints on the family that is forcing them to look at a less expensive care for that child?

What kind of studies and evaluations are going on by this particular section of his department to find out what those reasons are for making the choices that parents seem to be making?

Mr. Gilleshammer: I think I certainly speak for all of us in saying that we are pleased that you are back and able to join us in the Estimates process, and I do believe we are speaking for everybody here.

The reason people are choosing that care is an interesting one, and we are monitoring it. When parents are entering daycare and exiting, we are

doing a survey to record their comments and compile information on these choices. Certainly, no question, one of them is cost. When we did the work with the working group and the members of the community in studying the whole issue of daycare, we did establish a cost of care.

That cost of care was part and parcel of the changes that we made in the funding for daycare. With the work that was done by the department and the working group, it was established and agreed that child care in a centre was more expensive than home-based care. So one of the outcomes was this cost of care. Of course, it was more costly because of the ratios to have an infant in care than it was to have a four-year-old in care. I think parents are making those decisions for a variety of reasons, and cost is certainly one of them.

*(1610)

Our belief is that these millions of dollars that we put into the daycare system should, to a large extent, go to the children of families who do not access a lot of income. As a result, there is a subsidy level and a subsidy scale which attempts to reflect that. When we made the changes, we extended that subsidy scale, and it is very detailed depending on the size of the family and the age of the children and the income that family is accessing. The scale we look at is the net income of that family as opposed to the gross income, and the subsidies are allotted accordingly.

So we are attempting to monitor the system. Senior staff meet with the members of the association on a quarterly basis. We also meet with the home-based care people, and they are also surveying the families as well. We also have a relationship with the private centres. So this monitoring is ongoing and we are gathering information on reasons people select certain care.

Mrs. Carstairs: If he is doing these kind of so-called exiting and entering polls, can he give us any statistical data as to what is the percentage of parents who are looking to move from licensed centres to licensed homes and, more particularly, those who are moving from licensed centres and licensed homes to nonlicensed, totally private care with no controls on them whatsoever?

Mr. Gillieshammer: Madam Chairperson, I know the member did not mean to reference the exit information and the entrance information lightly, because this is very important information where

parents indicate, as their children graduate from the system, some of their thoughts and feelings about the system, and that information is vital to a lot of the work that we do.

I will just give you some numbers from 1987 and comparing it to 1992. In 1987 there were 445 facilities and there were 12,695 spaces. Today in 1992 there are 465 facilities and 13,924 spaces. In the family daycare homes there has been a greater increase. There were 392 in 1987 and 596 in 1992. They accommodated 2,067 in 1987, and now we can accommodate 3,375 children in family daycare homes. The private centres in 1987 were 29 with 1,288 spaces, and today there are 40 with 1,485 spaces.

We have seen some shift in the number of spaces occupied in centres and the growing number occupying homes. I am not sure if we have that data right here with us. There is a shift that is taking place in some areas.

The question on the unlicensed spaces or the arrangements that parents make, whether it is with their parents or their relatives or their neighbours, we do not have that information because those children are not registered.

I recognize that the media and sometimes the opposition reference the grandparents and the extended family or what other arrangements that are made as the black-market care system, because there may not be fully trained and licensed individuals and there may not be receipts issued. That sometimes is not a completely fair version of the arrangements that families make. We do recognize, too, that there may some circumstances where the onus is completely on the parent to check the arrangements that they make and that they are responsible for. Again, that is a decision that parents make and that government has not got the ability to, in some cases, interfere with.

Mrs. Carstairs: The government certainly does not have the right to interfere with a parental choice. Well, what the government can do is to find out if because of changes they have made to the system, more and more people are choosing to access an unlicensed system. Now if you are in fact monitoring what is happening to children when they leave the child care system, surely one of those things that you are monitoring is to find out if any of those children, and what percentage of those children, are going into unlicensed care.

When we know that they go into unlicensed care, it does not automatically mean it is bad care. But if there is a significant increase, it behooves us to find out why they are choosing that option when they were not choosing that option in the past. They were choosing a licensed home, or they were choosing a licensed child care centre. Are a significant number of them, according to your data, now choosing to put their children into an underground economy system?

Mr. Gilleshammer: We do have more children in care today than we did have in the late 1980s. When we do that exit information, parents may indicate that they are making alternative arrangements without getting into any specific information on it. Certainly, one of the things that has happened—and I know members opposite are aware that we do have more unemployed people in the community at the present time than we did a year ago, and some of those, because of the economy, do not require child care. I can tell you in terms of the subsidy caseloads, the current number on subsidy has increased to 8,607, whereas in 1990-91 it was 7,500; in 1989-90 it was 6,409; in 1988-89 it was 5,370. So we have seen a continual increase of the uptake in subsidies over the last number of years.

* (1620)

In fact, the number on subsidy in 1991-92 is more than double what it was in 1984-85. So the shift in government dollars is into the subsidies and providing those subsidies for families that qualify for it. As the member for Wellington (Ms. Barrett) has acknowledged, it means that there are fewer dollars that have gone into the grants to centres, but that has been more than made up with the dollars shifting to subsidy. Again, our vision of daycare is that government should be involved in providing resources to those who want to access daycare but would have difficulty doing it without a partial or full government subsidy.

Mrs. Carstairs: Nobody is arguing that there are not more people in child care spaces and there are not more subsidies being paid. That is really not the issue because I could point to a whole other range of statistics which will show you there are more working women in the workforce and, therefore, the need for child care has never been greater.

There are more single-parent mothers in our society, increased by rapid numbers, and therefore there are more children who require care.

My concern is what kind of information are we collecting about children who are being put in unlicensed spaces where there is no control on whether or not the individual has any training and, more importantly, no control on whether any payments are being made under the table for which there are no benefits paid to that particular individual by the parent and no receipts given, no tax paid if you will, by the person receiving that kind of money? Do we know if there are more people accessing that kind of a system? If we do not know, are we going to try and find out?

Mr. Gilleshammer: The ability of the department to acquire that information is limited. Even though we have spoken about the daycare cops before in Estimates who monitor the licensed system and the complaints that come in from time to time, we do not have the equivalent daycare cops who are monitoring the unlicensed system, who are looking at peoples' tax receipts and checking their banks accounts.

It is difficult. It would be very intrusive to do that sort of investigation to find out what people are paying for their child care and checking income tax forms to see what receipts, if any, are being used.

I say to the member that our ability to give full information on the type of care that people are accessing that is not licensed and is not part of the system is very difficult.

There is information brought forward in the surveys we do. We do get information that is very difficult to substantiate from centres. We do get letters from time to time indicating to us that somebody is exceeding their licensing capacity or that somebody is offering unlicensed daycare in a big way, and investigations take place. The ability to bring forward hard data on what could be described as an underground system is very difficult, and our capacity to do that is limited.

Mrs. Carstairs: Several weeks ago I asked the department for the subsidy program policies and procedures, and I thank the department for providing me with that documentation.

The reason that I made the inquiry, quite frankly, was that I had a couple of child care centres contact me about the length of time that it was requiring for them to get approval for a subsidy. I know that on page 13 of the guidelines I was provided, it says that within three days of receipt of application it is received and reviewed. Yet I am informed by some

child care centres that it is taking up to six weeks before the individual is informed whether they are in receipt of a subsidy or whether they are not. Meanwhile, parents have actually taken their child out of the centre because they could not afford to pay the cost of the care.

Can the minister give me any indication if that is the kind of delay that is normal within his department, and if it is, what they are doing about it to speed the situation up?

Mr. Gilleshammer: I am told it takes about three weeks to four weeks to process the application and that the department will back pay from the date of enrollment.

Now there was a time last year when we were behind, because with the new system there was an increased number of families accessing daycare and accessing subsidies. Even though we increased staffing, it was difficult to keep up with the increased number of applicants, and also because of the changes in the structure, we had to also review current clients to see what they were eligible for.

We did hire additional staff at that time and the backlog has been significantly reduced, and I think we are back to normal conditions. It was a period of time where it was a little bit difficult to keep up with that. Getting up to date happened probably in around mid-December where we were able to work through the backlog.

As well, I would point out that there is a subsidy advance which is intended to alleviate cash-flow difficulties while centres await the regular subsidy cheques. This was increased in November of 1991, and this additional revenue has helped ease some financial concerns facing the centres.

But, yes, I would think the major concern in letters that I received during the fall of 1991 was the difficulty in processing applications. We did increase staff there, and I am pleased to say we are back to the normal waiting period.

Mrs. Carstairs: The other complaint that I had with it—I am delighted that the backlog has been eliminated and there is a processing going on now that is more prompt—was that the centres thought they understood who was qualified to get a subsidy, would help the client fill in the forms and then would be somewhat surprised when the subsidy was not what they thought or anticipated the subsidy would be. I have had this complaint again from a number

of child care centres, and particularly rural centres, not urban centres.

I wonder what kind of briefing, what kind of education process went out with the child centres themselves so that they would have a more realistic understanding of the subsidy payable, so that they would be able to tell a client, to the best of their ability, that it looked to them as if this was a legitimate claim and that, yes, there would be a subsidy in this particular case, rather than giving, what they now think they are giving, false information and false hopes about a subsidy that is, in fact, not going to bear out.

Mr. Gilleshammer: With these changes, what the department did was hold orientation sessions throughout the province. I believe we had upwards of 17 orientation sessions throughout the province. In, I believe, most cases, centres and others took advantage of that and, in some cases, there may have been situations where they were not represented at the orientation sessions.

But we have field staff who work with the centres and with the daycare homes and are quite prepared to work with them on the subsidy forms. I tell you, it is a complicated exercise because there are so many variables to see whether that family qualifies for a subsidy and at what level. I can tell you, for someone who perhaps is just entering the system and had not had experience with that, it was and it is a difficult exercise.

* (1630)

I note there are fewer and fewer people doing their own income tax these days. Unfortunately, government forms are not always as simple as they might be. I know with the new funding formula that has gone out to the schools, that school division secretary treasurers and finance chairmen are busy working through all of the nuances of the new funding formula, and there is an adjustment period.

I think there was an adjustment period with centres and, as I say, we did have these orientation sessions. I think, again, we have worked through that, and people are more familiar with those forms now. Again, it is a complicated system and there may have been a few problems that I think we have, by and large, eliminated.

Mrs. Carstairs: Well, I have been talking to some of these child care centres just within the last couple of months, one of them as recently as two weeks ago. There still seem to be some problems. I would

just make a recommendation to your field workers that perhaps they make some additional calls to find out if some of them are still experiencing difficulties in this particular area, because some of them are.

I would like to move into the actual application form itself. Just a curiosity, quite frankly: why would the child care office want to know somebody's MHSC number?

Mr. Gilleshammer: First of all, I take your suggestion seriously, and we will check to see if there are centres or daycare providers that need further assistance with those forms.

I am told on that form that the main reason for asking for that number is for verification purposes and to verify the size of the family, to verify other facts about the family. It is one of the checks and balances that is used in relation to the subsidy system.

I just said to staff, it reminds me of the social allowances checks and balances that we do to verify information for people who are accessing sums of money from there, but the sole reason, or the reason I am given is it is for verification.

Mrs. Carstairs: I have to say that really concerns me if that is what it is being used for, because that is not what MHSC numbers are supposed to be used for.

Is the minister saying that the Department of Family Services has access to information which is supposed to be health record information. It is my understanding that nobody could access health care information, therefore, could not access number information. If they can now access number information from the Family Services department that causes me grave concern.

Mr. Gilleshammer: I would put the member's mind at rest. We have no access to health information through MHSC. We are able to verify family composition.

Mrs. Carstairs: Well, thank you, and I would ask the minister to, quite frankly, look into the necessity of this particular department having to have this kind of information, and maybe it is because I am particularly sensitive about numbers and information on myself. I mean, I refuse when I sign a Chargex card to put my telephone number on it. They do not need to know that information and I simply will not do it. I will not give people my Social Insurance Number unless it is required by law that I do so, as it is, for example, with the purchase of

Canada Savings Bonds, but beyond that I absolutely refuse to give out that kind of information because I think it is a clear invasion of privacy.

I can understand why because a person is applying for a subsidy they have to give information with regard to their income. They also have to indicate in terms of their taxation forms what kind of deductions they are taking in terms of those children, but I seriously question whether they need to give out their health care number and the erosion of their privacy that they may feel as a result of having to give out that number. The minister may want to answer that or not.

Mr. Gilleshammer: I am told that this has probably been part of this form since early on in the program in the 1970s and that we are not aware of any objections to that, but I hear what the member is saying about giving out information. I suppose anytime that people are accessing programs from government there is a certain amount of verification that takes place. I listen to some of my colleagues who are accessing farm programs, and I have constituents who were complaining to me that one of the things they had to do was go out and actually measure their bins and do a lot of verification of the amount of grain they had on hand as it related to the GRIP and NISA programs.

So I say that at any time citizens I suppose are accessing funding from government through programs in a variety of departments, there are certain checks and balances. Again, I would say to the member that we have no access to health records, and the only thing we are doing is verifying the numbers and the composition of the family.

In this day and age of some mobility, I think maybe the member is aware that some of the families who are accessing subsidies have been almost, well, extremely mobile. I reflect back on the child welfare system. When I read reports of children that have gone through three and four agencies in six months because the family is moving here, there and everywhere, there needs to be some ability to verify families and family composition from time to time.

I have heard other people make the same comment and are sensitive to giving out personal data. I recall one of my colleagues speaking recently about the Social Insurance Number and the fact that it is being used for far more than it was ever intended to and sort of reiterating the original use of it and the fact that things like bank loans and other institutions who are constantly asking for that kind

of information are from time to time denied it by certain individuals.

Mrs. Carstairs: I have to tell him, this is the first time I have ever seen a request for a Manitoba Health Services number, and it is not that it may not have been in this form for many, many years. It is the first time I have actually seen the application form and the first time I have ever seen a Health Services number requested. Then I might tell him that I also went through an amusing exercise with MHSC just about a month ago in which I had an individual who in fact does not exist removed from the MHSC list when I received a request from a family to say they were getting tired of having received this information from MHSC and cards for this individual for the last 21 years, and would like to have this person removed from the computer. So do not entirely trust the accuracy of the information you are getting.

If I can move into another area: this is with regard to the Women's Institute request for a variety of programs to meet the needs in rural Manitoba and particularly at two critical times, one being seeding and the other being harvesting; the need for appropriate child care facilities; and some horror stories that I am sure they shared with the minister. The idea of having of children in the combine in harvesting time does not exactly fill me with ease about the safety of those particular children.

* (1640)

Does the government have any statistical data on the accident rate or, in fact, the mortality rate of children, as a result of farm accident, particularly at those two critical times in the year?

Mr. Gilleshammer: It is not information that this department has access to. I suggest that the Chief Medical Examiner, who reports to the Minister of Justice (Mr. McCrae), would, in all likelihood, have that information, and possibly the Minister of Health (Mr. Orchard).

But it is a concern that comes up from time to time, and I note that I often read in the papers of those accidents where a child was drowned in a farm dugout or been, perhaps, killed within the yard itself where somebody has backed a car or a truck or some machinery over a child—again, right within the yard and family setting.

It happens not solely because there is not child care in the area. It is not unusual—and the Minister of Agriculture (Mr. Findlay) is here. I am sure that

children want to go with their dad on the tractor or the combine and, sadly, sometimes accidents do take place, I suppose, as they do on hunting and fishing trips from time to time.

Yes, we have met with four or five members of the Women's Institute, who have talked about child care and have brought forward some ideas to do with the Child Minder Program. We are well aware of the critical times of the year when farm families are busy, in the spring and the fall. It is something, again, we are looking at what is going in Alberta and looking at a document that they brought forward. Hopefully, we will be able to start addressing some of that in the near future.

Mrs. Carstairs: When the minister talks about the near future, does he anticipate that there might be some kind of a pilot project for, say for example, harvesting, in this year, in which they may address a number of communities and put into place a Child Minder program to learn firsthand how many people would access it, or how few people would access it, as the case may be?

I think that it is fair to say that, just as those of us living in urban centres do not have the benefit of extended families as we may have had 20 to 25 years ago, that also that is becoming a more and more critical problem in rural Manitoba and on the farm. If there is an extended family, the grandmother is working already at a full-time job. Therefore, the ability for the aunts, the uncles or the whatever to look after these children is simply not as apparent as it was in the past.

Mr. Gilleshammer: Yes, we would hope that something would be arranged for perhaps the fall of this year where we can try a pilot project. Even to assess the demand that is out there is not an easy task, because I can tell you that rural families, I think, are still much accustomed to relying on extended family and friends. That is not to say there is not a need in some areas. There was a centre that was doing some innovative things with extended hours. We are looking at that, and hopefully we will bring something forward that will give us a chance to do a pilot project later this year.

Mrs. Carstairs: Madam Chairperson, I would like to move now into the whole area of the salary enhancement grants. As I understand the new formula that is now available, the salary enhancement component has disappeared. What kind of data does the department have with regard to the reduction in the number of trained personnel

in our child care centres as a result of the loss of the specific salary enhancement grant?

Mr. Gilleshammer: The member is correct that the variety of grants that existed before the restructuring were rolled into one operating grant and, as a result, the salary enhancement grant disappeared as such.

The data that we have for salaries goes up to 1990, but we are aware that the funding available under the restructuring through the grants and through the subsidies enables centres to maintain the standards or the levels that are in the legislation which are the highest standards in North America.

There may be some difficulty at centres that exceeded those standards in terms of their staffing complement. Boards, by and large, have not shared any salary adjustments that have been made with us, but we do have data from the end of 1990 on those salaries and should soon have the data on 1991. Boards have—some of them have had to make adjustments, some of them have not. The adjustments to staffing are made, of course, as a board decision and in some cases it meant reduced staff if, in fact, enrollment was reduced.

I could give the member some figures that we do have if she was interested from average salaries that we have for directors and for Child Care Workers I, II and III and just indicate some of the changes that have taken place.

For instance, in 1990 the average director in the Winnipeg area was being paid \$30,500, and in the centres outside of Winnipeg in 1990 the average salary was \$25,600. In 1990 in Winnipeg that was a 9 percent increase over the previous year. In rural Manitoba that was an 8 percent increase in 1990 over the previous year.

A Child Care Worker III in Winnipeg average salary was \$20,500 in 1990, a 10.2 percent over the previous year; Child Care Worker II the average salary was \$19,000, a 9.9 percent increase over the previous year; and the Child Care Worker I the average salary was \$13,700, a 7 percent increase over the previous year. In the non-Winnipeg centres, the Child Care Worker III was being paid on an average \$19,300 which was a 15.5 percent increase over the previous year. A Child Care Worker II was being paid \$19,000, a 13.1 percent increase, and a Child Care Worker I was being paid \$13,200, a 14.8 percent increase over the previous year. Our statistics at this time are complete to the

end of 1990, and we do not have the 1991 figures yet.

* (1650)

Mrs. Carstairs: Can the minister tell us if he has any information about changes in staffing as a direct relationship to the changing in the grants? Certainly child care centres have told me that they have let go II's if they could replace them with I's within the current structure and still not violate the law. Because of the disappearance of the salary enhancement grant, they specifically made the decision to downsize quality of the staff because they did not have the funding.

What kind of analysis has this minister done to ensure that we have the best out there, not necessarily which is what makes the law? It seems to me to let well-trained, well-experienced people go is not in the best interests of our children.

Mr. Gilleshammer: What I can tell the member is that the funding that centres are able to access through the enrollment of children in their centre, through grants and through subsidies, enables them to maintain the standards that are set through legislation.

One of the variables is if the enrollment of the centre is not full, and if they have vacancies, then they have to make reductions somewhere because their income will be impacted. If they were staffed entirely with Child Care Worker III personnel, they may have had to make that adjustment.

We do provide funding to allow them to staff to the standards that have been set in legislation, which again I repeat are the highest standards in North America.

I recognize that there was a time where if there was more income generated, whether it was through the grants or through the subsidies or through other fund raising or through the money accessed from Community Places and Community Services Council, that perhaps they had increased an additional funding. In fact a number of the centres had a surplus, and some of them may have used that on staff enhancement and had workers qualified beyond the level that was required.

Some of those centres are in the process of making those adjustments if they feel that their salaries as part of the expenses were too high. The decisions that they make internally are sometimes communicated to us but not always.

The MCCA, as I indicated, meets with the senior staff on a quarterly basis and is sharing information with the department. We are monitoring the system and compiling that information now.

Mrs. Carstairs: Well, let me put the comparison in terms that he likes to use which is an educational comparison. I mean it is like firing the masters degree teachers in favour of the bachelors degree teachers because you pay them less. You only need the bachelors, you do not need the masters degree teachers, so you let them go.

That is not what is happening in the public school system because of a whole series of seniority rules and tenured rules and this type of thing, but it is happening in the child care sector, where people—for the squeeze that is going on.

Squeeze is going on in a number of areas. Squeeze is going on because their fundraising efforts, quite frankly, are bringing in less money because there is less money in the economy for people to provide them with additional funding. There is a squeeze going on because they have fewer children in their centres, and the minister has not given us the actual statistics because I do not think he has them at this particular point in time. We do not know whether child care centres are down by 10 percent or 20 percent or whether this varies from centre to centre, but there is a squeeze play going on there, and what concerns me is, does this affect the quality of the care which our children are going to get?

Mr. Gilleshammer: I guess my response to the honourable member is that boards do have difficult decisions to make as they look at their funding from government and their enrollment and their costs. I know, again in responding with a public school analogy, that school boards are saying we can no longer pay for extracurricular trips and we will make that adjustment in our budget, or we can no longer hire teacher aides in every school and make those adjustments in their budgets.

So boards of daycare centres are also going to have to look at their staffing components and make adjustments in the number of staff that they have, but there is not a salary scale, per se, in the daycare community that there is in the public school system, where there is a contract that is negotiated between the teachers' association and the school board. Just as schools need to be cognizant of their enrollment numbers and their projections, I think daycare centres have to be as well.

I might just maybe give the member some salary information from 1991 across Canada. In the province of Ontario the average daycare worker's salary is \$22,468, and that is the highest salary in the land for daycare workers. Manitoba is second, where the average salary is \$20,792 for a daycare worker. In Saskatchewan it is \$18,000. In Alberta it is \$16,000. Prince Edward Island is \$16,000, down to Newfoundland where it is \$12,000. I fully recognize that across the country and throughout the province everybody is concerned with salary. Manitoba, which is in the middle of the pack when we compare provinces in many ways, is paying the second highest salaries in the land.

I do not know whether we can get into a discussion of whether \$20,792 as an average is appropriate or not, I am saying relative to other jurisdictions. When people negotiate salaries, one of the tests they use besides the cost of living and other indicators is comparisons. Manitoba compares very well when you look at salaries for daycare workers across the province. I fully recognize that the association would say that we are undervalued and underpaid. Well, government is partially responsible for that salary and boards will have to make those decisions. All of us, of course, want the best care we can get for children in the daycare centres.

I think Manitoba has a pretty proud record of having the highest standards. I know when I meet with my colleagues across the land many of them are envious of the system in Manitoba and the funding that is available in Manitoba. The shift in the funding is one where we have had disagreements across the way with putting that money into subsidies as opposed to grants, which were a subsidy to everyone. I think that is generally where I have heard the Leader of the Liberals (Mrs. Carstairs) coming from.

Madam Chairperson: Order, please. The hour being 5 p.m., it is time for private members' hour.

Committee rise. Call in the Speaker.

IN SESSION

PRIVATE MEMBERS' BUSINESS

Mr. Speaker: The hour being 5 p.m., time for Private Members' Business.

Committee Report

Mrs. Louise Dacquay (Chairperson of Committees): Mr. Speaker, the Committee of Supply has adopted a certain resolution, directs me to report the same and asks leave to sit again.

I move, seconded by the honourable member for La Verendrye (Mr. Sveinson), that the report of the committee be received.

Motion agreed to.

Nonpolitical Statement

Mr. Gerry McAlpine (Sturgeon Creek): Mr. Speaker, I realize this is unusual at this time, but would the House grant me leave for a nonpolitical statement?

Mr. Speaker: Does the honourable member for Sturgeon Creek have leave to make a nonpolitical statement?

Some Honourable Members: Agreed.

Mr. Speaker: Does he have leave? Yes.

Mr. McAlpine: Mr. Speaker, I would like to thank the members of the House for this opportunity. It is indeed an appropriate time to do this.

It is my pleasure to rise today in the House to acknowledge the 75th anniversary of the capturing of Vimy Ridge by the Canadian troops during the First World War. Survivors of that battle are located within the constituency of Sturgeon Creek, the constituency that I have the pleasure to represent. In particular, veterans of that battle are at Deer Lodge Centre, a facility where many veterans reside.

I had the pleasure, Mr. Speaker, of attending the service that was held there in honour of these veterans today, and I am pleased to bring this message to the House and to share the information of the day. The legacy of the valour and courage of those who fought and died will live on forever.

Today's ceremonies took place atop Vimy Ridge in France, where a monument stands in tribute to their achievement. Walter Ritchie, a veteran of Vimy Ridge, represented Manitoba at Vimy Ridge ceremonies in France today.

Canadians succeeded where others had failed. Through innovative strategies and sheer determination, Canadian troops captured the ridge. While losses were heavy, the Canadian victory served as an inspiration to other fighting troops. That victory generated a renewed sense of

patriotism and pride in this country at a time when it was needed most. Each Canadian who served in the battle of Vimy Ridge has earned a well-deserved place in our history. Their efforts and their sacrifice on April 9, 1917, will never be forgotten.

I know that our young people cannot possibly imagine the horrors of that day. What is important for our youth to appreciate is that Canadians thought enough of the freedom and the security that they and their families enjoyed in Canada, that they crossed an ocean to fight a battle thousands of miles away, a battle that helped ensure that the very freedom and security remains intact this very day.

I am proud to acknowledge and to remember the sacrifices of those who gave their lives that day, but the ceremony that we have shared today at Deer Lodge Centre, they honoured veterans of Vimy Ridge, and I would just like to read these into the record, Mr. Speaker: Walter Ritchie whom I have already mentioned; Lawrence Gibbons, 94 years of age; Charles Reaper, 92; John Gibson, 94; Stewart Tanner, 94; William Sykes, 94; Sidney McCone, 94; John Purden, 96; Donald McKay, 96; Joseph Binnie, 94; Karl Radford, 95; Vic Walker, 95 years; Paul Hukish, 101 years; Frank Ogston died March 18, 1992; Herb Hives of Winnipeg; Tom Potts of Morris, Manitoba; Charles Oke, McCreary, Manitoba; and James Wyatt who has represented Manitoba in Vimy Ridge today. Thank you very much, Mr. Speaker.

DEBATE ON SECOND READINGS—PUBLIC BILLS

Bill 16—The Health Care Directives Act

Mr. Speaker: On the proposed motion of the honourable member for The Maples (Mr. Cheema), Bill 16, The Health Care Directives Act; Loi sur les directives en matière de soins de santé, standing in the name of the honourable Minister of Health (Mr. Orchard).

An Honourable Member: Stand.

Mr. Speaker: Stand? Is there leave that this matter remain standing? Leave? It is agreed.

Bill 18—The Franchises Act

Mr. Speaker: On the proposed motion of the honourable member for Elmwood (Mr. Maloway), Bill 18, The Franchises Act; Loi sur les concessions, standing in the name of the honourable member for Sturgeon Creek (Mr. McAlpine).

An Honourable Member: Stand.

Mr. Speaker: Stand? Is there leave that this matter remain standing? Leave? It is agreed.

Bill 25—The University of Manitoba Amendment Act

Mr. Speaker: On the proposed motion of the honourable member for Osborne (Mr. Alcock), Bill 25, The University of Manitoba Amendment Act; Loi modifiant la Loi sur l'Université du Manitoba, standing in the name of the honourable member for St. Vital (Mrs. Render).

An Honourable Member: Stand.

Mr. Speaker: Is there leave that this matter remain standing? Leave? It is agreed.

Mr. Kevin Lamoureux (Inkster): Mr. Speaker, I would like to take this opportunity to speak on Bill 25. Bill 25 has been introduced at first reading back on February 18. The government has been aware of it for quite a while now. I believe there could be some good will coming forward from the government in support of this particular bill, because I think it is long overdue.

What the bill will do will put in legislation an appointment, or entrench a student representation onto the University of Manitoba Board of Governors. Mr. Speaker, that is something that is long overdue. In the past, there has been student representation on the board, but in more recent years what has happened is that we have seen some questionable appointments that the government has made to that particular board. I am trying to be as diplomatic as possible when I say, questionable appointments.

That is the primary reason why it is that this legislation or this bill has to adopt, because it goes a long way—[interjection] the Leader of the New Democratic Party is having a tough time with this bill, and I hope that he will stand up. I am sure even he and I disagree on a large number of things when it comes to patronage, but this is one of those positions that I am even sure the Leader of the New Democratic Party would concur with, because I know that in fact one of his own colleagues the member for Wolseley (Ms. Friesen) no doubt has read this bill, and I look forward to her remarks on the bill. [interjection]

I am sure she supported the bill. I will be sure to read her speech. Unfortunately, I cannot recall her remarks on it, but I am going to take it for granted that she supported the bill, because it is a bill, Mr.

Speaker, that I am sure all three sides of this House will in fact support because, after all, the students at whatever university have to have representation on the boards, and there is a good reason for that, because we have to ensure that all sides are in fact being heard.

* (1710)

You know, Mr. Speaker, as I watch the Minister of Natural Resources (Mr. Enns) kind of wave his hand—it is now on the record—I would suggest to the minister that contrary to what the Clerk might have done, giving the thumbs down, which I do not believe the Clerk would have done something of that nature, I would suggest that the minister actually discuss this bill with his colleague the Minister of Education (Mrs. Vodrey), because I think the Minister of Education would be very sympathetic to this bill, because I understand that she has had some discussions regarding legislation of this nature.

Mr. Speaker, we would be very favourable to any form of a positive amendment that would possibly facilitate the minister's approval in seeing this bill passed. I know that there has been in the past concern in terms of private members' bills not necessarily seeing the light of day. Well, this is one of those bills that I believe can see the light of day, that the government will at some time in the future, at the very least, bring in something of this nature. We would like to think that if we offer our complete co-operation in accepting friendly amendments to the bill, if the Minister of Education does support it in principle but would like to see some minor modifications to it, we would be definitely interested in sitting down with the minister in coming up with a bill that would be acceptable to the government, because as I say, I believe that the government does support it in principle even though they might not necessarily support the exact wording that has been used.

Having said that, I will conclude my remarks by encouraging the government to speak on this particular bill, but failing that I look forward to hearing whatever member is speaking on any of the private members' bills today.

Mr. Speaker: As previously agreed, this matter will remain standing in the name of the honourable member for St. Vital (Mrs. Render).

Bill 27—The Business Practices Amendment Act

Mr. Speaker: On the proposed motion of the honourable member for The Maples (Mr. Cheema), Bill 27, The Business Practices Amendment Act; Loi modifiant la Loi sur les pratiques commerciales, standing in the name of the honourable member for Niakwa (Mr. Reimer). Stand? Is there leave that this matter remain standing?

An Honourable Member: No.

Mr. Speaker: No. Leave is denied.

Mr. Jack Reimer (Niakwa): Mr. Speaker, thank you very much, it is indeed a pleasure to stand here to talk on The Business Practices Amendment Act as introduced by the member for The Maples (Mr. Cheema). The consequences of any type of a change in effect to business is very important. The government looks very seriously on any type of action on that part. The fact that the member has introduced the change on Bill 27 is quite important in the fact that it is regarding employees acting in good faith.

One of the things that is of concern to people when they are purchasing any type of equipment or material, the person that is representing that product has to be in a position to be knowledgeable of what is being put forth. There is the old adage, I think, that has been put forth from time to time in purchasing of any type of commodity of caveat emptor which is buyer beware. At the same time, I think that there is a responsibility by government to look after the public in a sense that they are not being taken advantage of in a sense, so that there is always the room for improvement and there is always the fact that there is the requirement for people of unscrupulous nature that they may misrepresent the facts. They may misrepresent the product.

Also, what it does is the employee is put in the untenable position or the tenable position, if you want to call it, of not knowing how to represent the product in a sense. So that the person who is coming in to buy the product is either going to have to take complete faith in the individual or he or she may have to get some sort of indication of what is best for that individual. The employer at the same time though, on the other hand, is someone who has to be in a position that he cannot be around his employees all the time, to have the person available when the employer, or the boss, if you

want to call him, to be there holding his employees all the time into what they consider is ethical or unethical, as to the quality or the quantity of the product that the person is looking at or trying to buy, that the person then has the opportunity to make the changes and the clerk look at it.

As it is now, the act tries to balance the interests of all three parties, the consumer, the employer and the employee. What it does is by enabling the consumers to seek redress when they incur loss as a result of any unfair practice. What it does also, in effect, it is holding the employees and employers liable for unfair practices. Also what it does is it is enabling the courts when determining penalties to consider that an employee or employer did not intend to commit an unfair practice and he tried to avoid it.

It is quite an intent really to try to look after our people who are buying. It is also an intent to look after our people who are selling, because there is always the fact of the buyer and seller on any type of transaction, and there are certain types of proposals that we always have to consider.

Sometimes when we are considering the provisions and considering that the courts do not generally hold innocent employees to be liable for their actions, it is unlikely that any employee would be held liable under the act if the courts believe that the employee did not intend to commit the unfair practice. A lot of time that can come about because of the fact that the employee is not totally versed in selling of a product or a commodity or any type of service, and there are a lot of ramifications, or there could be other implications that can come about because of unfair knowledge of a product.

We just have to look at some of the products that are on the market right now and the complications and complexities of them and the fact that they fill a lot of bills and a lot of commitments. At the same time for a salesperson or employee to have total knowledge of all the products is very hard. There is always the unforeseen chance that the product which is purchased or the commodity or even the service may fall into a classification that there is an intended, or unintended, or unintentional harm committed or loss, or a situation where the person buying, the consumer, is put at a disadvantage. Those are the things that are of concern to anybody who is looking at the product or the service.

* (1720)

The proposed amendment is also an attempt to ensure that the innocent employees are not held under the act under good faith. The interpretation of good faith is something that I guess, not totally versed with the legalese of what is involved with good faith, then it means it all comes down to a matter of interpretation.

When interpretation goes before law, interpretation can sometimes become quite complicated and quite drawn out and long in the sense that the people are not totally always convinced that the best action is being taken.

It may be interpreted differently by different courts, because sometimes a court may interpret it one way and then there is always the availability or the possibility that a court of a different nature or court of a different jurisdiction may look upon the transaction in a different light. There again it creates problems in the sense that the consumer then is bandied back and forth, if you want to call it, in trying to get a clear direction as to what the intent was when the product or the service was purchased by the person.

Given the terms, a specific definition would create a risk that some innocent employees would be held liable because their conduct did not quite fall within the definition of it. Also the proposed amendment would also be harmful for consumers.

The loose wording of an amendment may make it difficult to satisfy a court when an employee acted in bad faith or outside the course of employment, and the consumer may therefore be unable to recover funds obtained by the employee through the deception.

We always hear of the salesman who takes advantage of people, and the fact that there have been certain instances that have come to the courts in the last while where there have been unscrupulous operators who have tried to take advantage of seniors, who have tried to take advantage of people with limited mobility or availability. I guess to a degree the seniors are vulnerable, because of the fast talking of some certain salesmen or salespeople in trying to sell commodities or products. That person then becomes a person who sometimes loses money or loses a lifetime of savings because of the misrepresentations by that individual.

There is always that concern and government should have a concern in trying to protect the

consumer, because of the fact that there are some people who in a sense do have to have that type of individual around to help a bit.

There could be a problem, in particular, in such situations where employees operate with a high degree of autonomy, as mentioned, home improvement contractors and things like that where they can cause problems with an individual or some person who is getting things done. There can be the pyramiding of expenses and the pyramiding of so-called improvements to the individual's home or to their business.

The wording of the proposed amendment infers that the Consumers' Bureau does, or would like to, frequently refuse to deal with complaints. I think that possibly there is the sense that the Consumers' Bureau is trying to move its responsibility or shirk its responsibility in a sense, but the Consumers' Bureau has been set up, in a sense, to help the consumer.

I know the Minister of Consumer and Corporate Affairs (Mrs. McIntosh) is quite aware of her department in the sense of trying to be fair and to be just to all aspects of what comes before her. In times of tight economic conditions, as we have in Canada, there is always the availability of unscrupulous people coming forth, and the fact that the minister has made a point of trying to be cognizant of what is happening with the market and what is happening in trying to make things better for the people of Manitoba and the consumers themselves.

The consumer has to have some sort of a watchdog, but at the same time bureaucracy can create too much of it so that the minister works very closely with the concerns and the phone calls or the letters that come across her desk. I would feel that something of this nature has become quite cognizant of how the Madam Minister must deal with these problems, and the fact that the amendment of this type be put forth by the member for The Maples (Mr. Cheema), The Business Practices Amendment Act, is something that would have to go very close scrutiny with her department and her people as to the fact that the public is aware of how unscrupulous sometimes these things can come about.

At the same time, the bureau tries to resolve all complaints that come before it unless it is clear that the complaint can be handled by some other form of the law, because the law is always there in a

sense to try to take some of the points that may not come about in a normal situation for the Consumers' Bureau. So, Mr. Speaker, I feel that the amendment here that is brought forth by the member for The Maples (Mr. Chœma) is something that is worthy of comment by all honourable members and the concern that they have on this, because, as mentioned, protecting consumers and the fact of any type of amendment is something that would come forth as to what should or should not be dealt with.

The act itself is very new, and the director's discretion to refuse or to mediate or to investigate should be left as it is until more experience with the act is gained, actually, because if it later appears that the discretion should be limited in some way, the act could be amended at that time. So with the act that is there, there is always the fact of interpretation and the living together, if you want to call it. So the act could then be looked at and it can be amended with the proper direction and the proper input through the Department of Consumer and Corporate Affairs, which the minister has mentioned. It monitors very closely, and I am sure she is aware of this amendment and the fact of study would be something that would be quite detailed.

The fact that there is the implication of limiting refusals to those who complain the directors to be invalid would create problems in a sense, because the problems must be addressed in all types of situations with the existing act.

Thank you very much, Mr. Speaker.

Mr. Ben Sveinson (La Verendrye): I move, seconded by the honourable member for Sturgeon Creek (Mr. McAlpine), that debate be adjourned.

Motion agreed to.

Bill 31—The Municipal Amendment Act

Mr. Speaker: On the proposed motion of the honourable member for St. Boniface (Mr. Gaudry), Bill 31, The Municipal Amendment Act; Loi modifiant la Loi sur les municipalités, standing in the name of the honourable member for Gimli (Mr. Helwer).

* (1730)

Mr. Edward Helwer (Gimli): It is indeed a pleasure for me to stand and speak on Bill 31, The Municipal Amendment Act that the member for St. Boniface has proposed, although, unfortunately, I cannot agree with him. I do not think the resolution is very

good. I am sorry to tell him, but I cannot quite agree with him.

I represent two of the communities that are mentioned in Bill 31 and therefore have kind of a vested interest in this resolution. Actually, The Municipal Act section 46 states that it requires that a candidate for council be for any municipality, whether it be a resort community or for any council, a Canadian citizen, 18 years of age or over, and an elector of the municipality, defined in the Local Authorities Election Act 5.1 as a person who has at least six months residency at the date of the election or as an assessed property owner, or as a tenant who is assessed as the owner of right, interests or estate—so a resident of the municipality for not less than six months and not subject to any disqualifications under the act.

(Mr. Bob Rose, Acting Speaker, in the Chair)

So these provisions apply to candidates for council to all municipalities, but subsection 45(2) of The Municipal Act specifically identifies the Town of Winnipeg Beach, the Village of Dunnottar, and the Rural Municipality of Victoria Beach. I represent the two municipalities, the Town of Winnipeg Beach and the Village of Dunnottar. The member for Lac du Bonnet (Mr. Praznik) represents the Rural Municipality of Victoria Beach.

Anyway, as a resort municipality in which the residency requirement of a candidate for council is reduced to only two months and described as two consecutive months in any year—and this is what the resolution is trying to do away with, just striking out the word "consecutive." Now, I cannot agree with that because we are being quite lenient by allowing a candidate to be elected to council by being a resident for only two months rather than the six months that is required in all other municipalities, all other towns, villages and municipalities throughout Manitoba.

The candidate for council still has to be an assessed owner. The position of the Department of Municipal Affairs or the Department of Rural Development has always been that the residency required of cottage owners should be two consecutive months even though the former legislation did not mention the word "consecutive." Last year when it was amended they did change it to—subsection 45 did say, "two consecutive," and that clarifies the legislation. So it is being referred that the act intended to recognize that most summer

residences are open and occupied at least for the months of July and August at a minimum. In actual fact most summer residents use their cottages—probably open for occupancy from the Victoria Day in May till Labour Day, which is a period of some three and a half months.

So the introduction of the word "consecutive" was intended to clarify the legislation and not to change it. This clarification was considered desirable as a result of queries from residents or ratepayers of all three resort municipalities during the 1989 summer elections in which questions were raised as to whether the two months residency requirement could be made up by a series of weekend or day-trip visits throughout the year. That is not possible. You cannot be a resident for the 60 days or two months by being there only one or two days a month throughout the year. That would not qualify you for having two months consecutive residency.

So continuous residency is not considered to mean that it is an uninterrupted physical presence. It has been judicially recognized that a person can have more than one residence at a time, for example, a permanent residence in Winnipeg and a summer residence in one of the resort municipalities. That person's six-month residency qualification in the city of Winnipeg would not be nullified by the person having spent some time at the summer residence. Similarly the first summer residence would not be invalidated by the person having spent some time in Winnipeg during the same period. However, the candidate must be prepared to establish that he or she had actually physically resided in the municipality in the year prior to the election year or the year of election, if possible, for two consecutive months.

That is the residency required, so it does not have to be an uninterrupted period, but it must be, I think it would be fair to say, in the summer of two months if he gets his mail at Winnipeg Beach or Dunnottar and drove into Winnipeg even to work. Probably if he stayed for two months at Winnipeg Beach or wherever his cottage may be, he would be considered a resident of that municipality for that particular time, and that would qualify him for a two-month residency.

The real question though of residency must be determined by the candidate himself, by the individual candidate. It is the position of the Department of Rural Development that nothing has changed as a result of the 1991 amendment. For

example, the candidate considered to qualify in terms of residency in 1989 would still qualify in 1992, all things being equal.

For most summer residents the two-month residency requirement would normally have to be fulfilled in the year prior to the election year, because it is unlikely that they would be able to establish the residency for two months prior to the second Wednesday in July, which is the nomination day.

However, it is entirely possible that some could establish residency in the year of the election and, as mentioned above, it is up to the individual candidate to be able to establish that the residency required has been met. That puts the onus on the candidate. He can establish himself what terms of residency really means.

(Mr. Speaker in the Chair)

I think in most cases it makes for a better council or makes the candidate much more qualified to do the job as to councillor if he is a continuous resident for two months. I think that is very lenient considering other municipalities, really.

I have met with the mayor and council of Winnipeg Beach, the council of the Town of Dunnottar, and I have attended a public meeting last year in Dunnottar; I attended the public meeting at Winnipeg Beach. I have met with the Chamber of Commerce. [interjection] What is that, John?

An Honourable Member: Did it help?

Mr. Helwer: Certainly it helped. I met with the Chamber of Commerce at Winnipeg Beach just recently as a matter of fact, and they were very pleased the residency was defined, that it be two consecutive months. It is very simple, and it makes it much better for the local residents of these communities. They know what that means and, if they in their own mind feel they qualify to be a candidate, they know that they must be a resident for two consecutive months. It is very simple.

The chamber and the committees that I met with out at Winnipeg Beach and at Dunnottar, the local people are certainly of the opinion that that is very lenient being a two-month resident to be able to run for council.

So I think that the amendment is not necessary and the legislation as it stands is excellent. It serves a purpose. I think it is clear and we are quite happy with the legislation as it is.

I know I spent many years on council, as a matter of fact some 16 years altogether as councillor and mayor of a small community. That particular town was the same as any other town or village or rural municipality in Manitoba, and you had to be a resident at least six months to qualify you for office.

At one time you had to be even a property owner, and that was changed, in order to run for council. Now, as long as you are a resident, you do not have to be a property owner. You can rent property and still be qualified to run for council.

I think that is fair, really. I think that serves the public good and the best interest of the communities in most cases. I just wanted to mention Winnipeg Beach, which is a community that was affected by the legislation which we passed last year, is having a council meeting today as a matter of fact. They are proposing to change their council from six members to four members.

I think this is a step in the right direction for a community of 500 to 600 permanent residents and some, probably, 4,000 to 5,000 temporary residents that use the community in the summer as cottagers and campers and one thing and another.

I think a four-member council is much easier to work with, and I think would be more effective. I think it would give the mayor and the council an easier way to deal with issues at Winnipeg Beach. I hope that today the council there sees fit to vote for a four-member council instead of a six member.

* (1740)

I think the council at Winnipeg Beach at the present time is made up of some full-time residents who live there all year round, and some people who are cottagers who live there only part time and have to drive back and forth to do their business at Winnipeg Beach and serve on council.

The Village of Dunnottar on the other hand has their municipal office in Winnipeg, but I still think it will be beneficial to them to have the councillors be residents of that community for at least two consecutive months, and I think they agree with this. The local council and the local citizens certainly agree with that.

An Honourable Member: Well, I am sure there are two sides to the story.

Mr. Helwer: Sure, there are two sides to every story, but I think it is easier for them to represent the people that are continuous residents there, that are permanent residents there, that live there all year

round. If you want to do that you have to, pretty well, at least live there for a minimum of two consecutive months.

I do not think that is too much to ask. You have to be a resident, you cannot be there only a couple weekends of the year and expect these—

An Honourable Member: Tourists.

Mr. Helwer: —tourists, yes, and expect to be able to serve on council. I think both of these communities have very good councils and very dedicated people, that serve on these two councils, that I have in my constituency that these would be affected. I certainly respect their views, and they have served their communities very well.

Mr. Speaker, I see my light is blinking, and my time is going, but I just wanted to put those comments on the record. I am sorry to the member for St. Boniface (Mr. Gaudry). I do not think that his amendment is necessary. I would in fact have to speak against it.

Thank you, Mr. Speaker.

Mr. Jack Penner (Emerson): Just to put a few words on record in regard to Bill 31, and the amendment that is being proposed to The Municipal Act in Bill 31, regarding the municipalities that are now currently being served by council members very often who are not resident in the municipality, and how the effects to the residents, in permanent residence in the municipalities, can be avoided.

It was, I believe, some two years ago, when members of the two communities, Winnipeg Beach and Dunnottar, came to see me when I was the Minister of Rural Development responsible for the Municipal Act, and made representation. These were the residents from those municipalities and area. They made representation asking that some permanency be put into residency and requirements, for residency and for running for municipal council in that area should be similar to what other municipalities are, in other words, having the requirement for six-months-residency status maintained.

I believe that there is some merit, Mr. Speaker, in fact, to have some uniformity in compliance for the designation, or for the qualification, as to whether a person should or should not be able to run. I live 60 miles south of here. Simply by the fact that most of us live outside of the city of Winnipeg, who are rural members, we have to, from time to time, move into

the city simply to do the job as a member of the Legislature.

Simply because we own a second residence in the city of Winnipeg does not automatically give us the right to run for council, or to be a member of council, even though we live here probably the required time. Our principal residency is in the municipalities that we normally live in. Most of us accept that and abide by that. We believe that because people reside in areas, and people develop interests in areas and have a much, much greater degree of knowledge respecting the area that they normally live in, such as the city of Winnipeg and other communities, those are the people who should represent and can, in fact, represent, to a much greater degree and with a much greater degree of interest, the interests of the residents of a given municipal area.

Therefore, I concurred with putting in place some criteria, into an amendment of the Municipal Act, that would, in fact, indicate that there should be some semblance of permanency. Even though we made some changes and exceptions to the fact that they need not be six months residence, but there should be a period of time that they should at least be residents in that municipality. Everybody, or virtually everybody, agreed to that, with the exception of a few, and I suppose you could never get 100 percent concurrence with a proposal that is being put before a minister or before a House.

But the arguments that the permanent residents, for those communities, made at the time was that there were periods of times when there was no councillor around, during winter months when snow removal needed to be done and school routes needed to be opened, and very often there was nobody around to look after the best interests of those permanent residents in those areas.

I respect that, living in a rural area. A snow storm passing through an area need not necessarily hit some 30 or 40 miles down the road, and you really have no knowledge then of what goes on over there, specifically if you do not live there during the winter months. Therefore, I concur that the council members should, if at all possible, be made up of permanent or as near-to-permanent residents as possible.

Road maintenance in a given municipality is another matter that you need somebody there virtually all the time when construction,

reconstruction, maintenance, and all those kinds of things take place if it is road repair. Rural municipalities are different than city municipalities or large urban centres in the respect that rural municipalities seldom ever can afford a maintenance manager or a construction manager, or those kinds of things that larger urban centres take for granted.

It is councillors, the elected people that act as those kinds of people, who look after the day to day, and we have councillors, or former councillors, former mayors, former Reeves sitting in this Chamber. The member for Gimli (Mr. Helwer) is a case in point, and he would tell anybody in this Chamber that the role of a rural councillor is much, much different than an urban councillor and the responsibility is much, much greater for a rural councillor than it is for an urban councillor, in respect to actually being the manager, the foreman, very often even the construction manager, in regard to roads and those kinds of things. Some members opposite that live and reside in rural communities certainly concur and know that.

When you have a storm, for instance, such as you had in Winnipeg Beach some three or four years ago—maybe it was five years ago, four or five years ago—a major summer storm passed through an area, and it was the Winnipeg Beach municipality that was affected by fallen trees and torn-off roofs and those kinds of things. Immediately, those people start calling their council. The council is then required to immediately come down and inspect and look after, virtually on an hourly basis, the removal of trees and branches, and see that services such as all the infrastructure—sewer, water, hydro, telephone—that all those services are brought back into working order again.

They can very often, as the member for Dauphin (Mr. Plohman) just said, be even seen as disaster committees.

* (1750)

They work very often in those kinds of situations for many hours without break, up to 24, sometimes even more, to ensure that the services in those communities will in fact be maintained.

Therefore, Mr. Speaker, I think it is of utmost importance that the amendment that is being proposed here by striking out "consecutive," should be rethought. The member who proposed this bill should give some serious consideration about

withdrawing the bill. Therefore, I think one could reflect on matters even much greater than services that we have already talked about.

My recommendation to the member who proposed the amendment is that maybe through discussion, maybe we should sit down as a committee and talk about all the other ramifications of putting forward this amendment and what it does to the permanent residents in those areas and how it affects them. Maybe after that kind of consideration he would be willing to, in fact, withdraw the proposed amendment to this act.

There are a number of other areas that I have not touched on and services that we normally take for granted very often in a larger urban centre that municipalities, municipal councillors, mayors or Reeves very often become very involved in and look after. Those are things such as health service care, be they the ambulance services, be they fire services, and especially when fire strikes in individuals' homes sometimes.

Municipal councillors become very involved in ensuring that the services, be they fire services or ambulance services, those kinds of things, are provided virtually instantly.

Very often these people, these local councillors are members of fire brigades. It becomes very difficult when these people live 30 or 40 miles away in another centre that is supposed to look after the administration of a municipality such as Winnipeg Beach or Dunnottar.

The key and most important issue, I believe, is the day-to-day contact that local councillors have with their constituents and the day-to-day dialogue of needs is maintained. That can of course be done if you are a resident, an ongoing resident in an area. That dialogue can of course be maintained.

Therefore, those councillors would have a much, much greater degree of knowledge as to the needs of those constituents in those municipalities, as the member for Gimli (Mr. Helwer) so adequately said before, in many of the other issues that he raised in the debate and referring to his own experience especially in that area where he has a much greater degree of knowledge than I, of course, do.

Because it is such a unique area and serves in large part the cottagers, and most of those cottages

are of course second residences, as my second residence is in the city of Winnipeg. To have those people become the councillors unless they are permanent residents is questionable at best as to whether they would in fact be able to serve the ongoing, long-term needs of the constituents of that municipality.

Being that the area is more often than not an area that geographically probably has water on the one side, land on the other, and tourism and all the natural resources around them, there are many other aspects that need to be looked at and taken care of. Wildlife, maybe, enters a community overnight and has to be removed, and if you are not a resident, who is going to look after it? Is someone going to drive out 40 miles and chase a moose out of the back yard of some resident? Are they going to look after mending fences? Are they going to look after patching the holes in the roadway? Are they going to drive out 40 miles to look after those kinds of things? I think not.

That is why the amendment that we passed less than two years ago is of such utmost importance, that we ensure that the maintenance of the legislation, as it stands today, be in fact maintained. We believe, on this side of the House, Mr. Speaker, that it adequately serves the best interests of the residents of those municipalities that this amendment to this bill would affect.

Therefore, Mr. Speaker, I would ask your concurrence and the House's concurrence to maybe suggest to the member who proposed the bill, that he, in fact, consider withdrawing the bill from further debate in this House.

I thank you, Mr. Speaker.

Mr. Bob Rose (Turtle Mountain): I move, seconded by the honourable member for Emerson (Mr. Penner), that debate be adjourned.

Motion agreed to.

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

Some Honourable Members: Six o'clock.

Mr. Speaker: The hour being 6 p.m., this House is now adjourned and stands adjourned until 10 a.m. (Friday).

Legislative Assembly of Manitoba

Thursday, April 9, 1992

CONTENTS

ROUTINE PROCEEDINGS

Presenting Petitions

Criminal Code Amendment, Family Violence Wasylycia-Leis	2012
Fight Back Against Child Abuse Campaign Barrett	2012
Fight Back Against Child Abuse Campaign Santos	2012

Reading and Receiving Petitions

Criminal Code Amendment, Family Violence Martindale	2012
Criminal Code Amendment, Family Violence Reid	2012
Criminal Code Amendment, Family Violence Cerilli	2012

Oral Questions

Economic Growth Doer; Downey	2013
Child and Family Services Barrett; Gillehammer; Carstairs	2014
Child Advocate Carstairs; Gillehammer	2016
Lakes and Rivers Cerilli; Cummings	2016
Health Care Facilities Wasylycia-Leis; Orchard	2017
Economic Growth Alcock; Stefanson	2018

Winnipeg International Airport Martindale; Driedger	2019
55 Plus Program Gaudry; Ducharme	2020
Port of Churchill Plohman; Driedger	2020
Public Schools Chomiak; Vodrey	2021

ORDERS OF THE DAY

Committee of Supply

Health	2022
Family Services	2046

Private Members' Business

Nonpolitical Statement

Vimy Ridge Commemoration McAlpine	2065
--------------------------------------	------

Debate on Second Readings - Public Bills

Bill 25, University of Manitoba Amendment Act Lamoureux	2066
Bill 27, Business Practices Amendment Act Reimer	2067
Bill 31, Municipal Amendment Act Helwer Penner	2069 2071