

LEGISLATIVE ASSEMBLY OF MANITOBA
Friday, 2 May, 1980

Time — 10:00 a.m.

OPENING PRAYER by Mr. Speaker.

MR. SPEAKER, Hon. Harry E. Graham (Birtle-Russell): Presenting Petitions . . .

READING AND RECEIVING PETITIONS

MR. CLERK, Jack Reeves: Petition of Charleswood Curling Club Ltd., praying for the passing of An Act to grant additional powers to Charleswood Curling Club Ltd.

Petition of the Regent Trust Company praying for the passing of An Act to amend An Act Incorporating The Regent Trust Company.

**PRESENTING REPORTS BY STANDING
AND SPECIAL COMMITTEES**

MR. SPEAKER: The Honourable Member for Radisson.

MR. ABE KOVNATS: Mr. Speaker, the Committee of Supply has adopted certain resolutions, directs me to report same and asks leave to sit again. I move, seconded by the Honourable Member for Virren, report of committee be received.

MOTION presented and carried.

MR. SPEAKER: Ministerial Statements and Tabling of Reports . . . Notices of Motion . . .

INTRODUCTION OF BILLS

MR. DAVID BLAKE (Minnedosa) presented Bill No. 55, An Act to Incorporate Brandon University Foundation; and Bill No. 57, An Act for the Relief of Ingibjorg Elizabeth Alda Hawes and George Wilfred Hawes.

INTRODUCTION OF GUESTS

MR. SPEAKER: Before we proceed with Oral Questions, I notice we have a very full gallery this morning and I would like to introduce to all members 60 students of Grade XI standing from the Teulon Collegiate, under the direction of Mr. Grose and Mr. Reinsch. This school is located in the constituency of the Honourable Minister of Education.

We have 50 students of Grade 2 to 4 standing from West St. Paul Elementary School, under the direction of Mrs. Kolson and Mrs. Klyn. This school is in the constituency of the Honourable Member for Selkirk, the Leader of the Opposition.

We have 75 students of Grade 9 standing from Precious Blood School who are hosting Richibouctou from New Brunswick. This is under the direction of Mr. Vincent Dureault and Reginal Boudreau, and the school is in the constituency of the Honourable Member for St. Boniface.

On behalf of all honourable members, we welcome you here this morning.

ORAL QUESTIONS

MR. SPEAKER: The Honourable Member for Transcona.

MR. WILSON PARASIUK: Thank you, Mr. Speaker, my question is directed to the Minister of Health. Can the Minister confirm that the owner of the Golden Door Geriatric Centre has broken off talks with the union and, in the process, has withdrawn points which he previously agreed to because of pressure from his fellow private nursing home owners?

MR. SPEAKER: The Honourable Minister of Health.

HON. L.R. (Bud) SHERMAN (Fort Garry): Mr. Speaker, I can confirm that certain parties to the negotiations contend what the Honourable Member for Transcona is contending. I have no confirmation that reflects the actual situation or the actual course of events. It is true, however, that negotiations have been suspended at the Golden Door and the conciliation officer is attempting to arrange to have the two parties meet again as early as possible.

MR. PARASIUK: If the Minister can confirm it, I would hope that he would quickly call in the conciliator to get a report from him on this matter because the situation is quite urgent. In view of the fact that to date the Golden Door Geriatric Centre has been staffed by volunteers and the situation is getting critical over the weekend, can the Minister ensure that the health and safety of the remaining patients within the Golden Door Geriatric Centre will be maintained by the government and can he assure us that contingency plans have been made to enable patients requiring care to be moved to other facilities that aren't locked up presently?

MR. SHERMAN: Yes, Mr. Speaker, care, safety and attention of the residents of the Golden Door is being maintained and has been maintained at its pre-dispute levels, at its normal levels. There have been considerable assistance gestures by volunteers and part-time workers, but there are also six RNs who are on duty there, and care has not diminished or suffered in any way. This is not only my opinion, Mr. Speaker, it is also the opinion of the residents of the home. However, we are in a situation where we can't, of course, be certain that can be maintained should the walkout be prolonged. As a consequence, evacuation plans, contingency plans for transferring the patients to Steinbach and Morris hospitals and, possibly to Deer Lodge, are in place and can be invoked at any time.

MR. SPEAKER: The Honourable Member for Transcona with a second supplementary.

MR. PARASIUK: I am surprised the Minister would try and indicate the level of care in the Golden Door Geriatric Centre is the same now as it was before the

walkout in that at least 12 patients have had to be moved out to other facilities because of the decrease in the quality of care.

I'd like to ask the Minister if he will investigate the actions of the owner to determine if there is collusion on the part of the private nursing home owners to keep down the quality of services in nursing homes in order to squeeze out some extra profit out of the Medicare-financed Public Nursing Home Program in Manitoba.

MR. SHERMAN: No, Mr. Speaker. I reject that suggestion and that imputation categorically and I repeat that the care at the home has been maintained at its usual, normal high level, at its pre-dispute level. There have been some nine patients who have either transferred to their homes or, in the case of three of them, transferred to the Municipal Hospitals. They did so at their own volition. They did so because of their own personal concerns, anxieties or attitudes or preferences. It had nothing to do with the level of care at the home and, Mr. Speaker, the conciliation officer is in touch with the Health Services Commission, and therefore my office, regularly on this matter. My information this morning is such that I certainly cannot confirm that the break-off to the negotiations came in the form that the Member for Transcona suggests; I can only confirm that the negotiations have temporarily broken off.

MR. SPEAKER: The Honourable Member for Transcona with a third supplementary.

MR. PARASIUK: Thank you, Mr. Speaker. I note that the Minister is waffling in terms of normally high levels of care, usual levels of care; I wish he'd come up with one consistent answer with respect to . . .

MR. SPEAKER: Order, order please. May I suggest if the honourable member has a question that he place it on the floor of the House.

The Honourable Member for Transcona.

MR. PARASIUK: Yes, Mr. Speaker, I'd like to rephrase the statement in view of the fact that I'm getting very different answers from the Minister.

MR. SPEAKER: Order, order please. Orders of the Day. The Honourable Member for Crescentwood. Order, order please.

The Honourable Member for Transcona on a point of order.

MR. PARASIUK: Mr. Speaker, you recognized me. I tried to rephrase my question. You still recognized me and now you are using the powers of the Chair to recognize someone else, after you had recognized me and I was in the process of asking a question. I would like to be able, according to the Rules of the House . . .

MR. SPEAKER: Order, order please. Order please. The Honourable Member for Crescentwood.

Order please. The honourable member has no point of order.

The Honourable Member for Crescentwood.

MR. STEEN: Mr. Speaker, I would like to ask a question of the Minister of Economic Development

and Tourism. Could the Minister advise the House and the members of the House whether the pins and stickers — of which one I have in my hand — that were used in his recent travel campaign were printed and manufactured here in the province of Manitoba?

MR. SPEAKER: The Honourable Minister of Economic Development.

HON. J. FRANK JOHNSTON (Sturgeon Creek):

Mr. Speaker, the Member for Burrows questioned that the other day and I would like to inform the Honourable Member for Crescentwood that the stickers are a patented product by a company in the United States. They come in blank to a distributor in Manitoba and they are supplied to a printer who does the printing in Winnipeg. And the badges are also shipped in the same way, blank, and they are printed by a printer in the city of Winnipeg.

MR. STEEN: Mr. Speaker, I have a supplementary question to the same Minister. Has the Minister or his department checked it out to see whether the Winnipeg printer could obtain the product here in Canada?

MR. JOHNSTON: Mr. Speaker, the highest authority of printing in the province of Manitoba is the Queen's Printer and he has informed us that the buttons that are printed, as the honourable member has, are not made in Canada and I guess that's the reason, Mr. Speaker, when I show this badge which was ordered by the Member for Burrows, when he was the Minister of Tourism, ordered these badges and they say, Printed on USA on the back. — (Interjection)— And it doesn't have a union label on it either, Mr. Speaker.

We also checked very thoroughly about the fact of this badge that says, I'm working for Wally during the last election and the printer in Winnipeg who printed them said, we brought the badges from the United States.

MR. SPEAKER: The Honourable Member for Fort Rouge. Order please. The Honourable Member for Kildonan on a point of order.

MR. PETER FOX: Yes, Mr. Speaker. In view of the fact that the Minister had a pocketful of badges, do you not think this was all orchestrated and you should keep your eye off that member in the future?

MR. SPEAKER: The Honourable Member for Fort Rouge. Order please. Order please. The Honourable Minister of Economic Development on a point of order.

MR. JOHNSTON: I just happened to have some badges. If you want to look at the Blue Bomber badges, if you want to look at anybody's badges, they say Printed in United States. And to the honourable members opposite, we have a whole box full of badges that say: Good to see you and they're welcome to have them.

MR. SPEAKER: The Honourable Member for Fort Rouge.

MRS. JUNE WESTBURY: Thank you, Mr. Speaker. My question is addressed to the Honourable Minister of Urban Affairs. I wonder what intervention or action, if any, the government proposes in view of the expressed concerns by the Mayor of the City of Winnipeg concerning possible pollution of the city's water supply if cottage development is permitted near Shoal Lake.

MR. SPEAKER: The Honourable Minister of Urban Affairs.

HON. GERALD W. J. MERCIER (Osborne): Mr. Speaker, when I was in Ottawa last week with the Mayor and Councillor Ross, we had arranged a meeting with the Honourable John Munro, the Minister of Indian Affairs with respect to this matter. Mr. Munro was unavailable and we met with a special assistant to Mr. Munro. The concern is a report that is to be done by the Environmental Branch of the federal government . . .

MR. SPEAKER: Order. Order please. It would be appreciated if all members would allow courtesy to those that are speaking. I find it rather difficult to hear the words of the Attorney-General.

The Honourable Attorney-General.

MR. MERCIER: Thank you, Mr. Speaker. As I was indicating, Mr. Speaker, we met with a special assistant to Mr. Munro, who was unavailable because of a Cabinet meeting that had been called, and Mayor Norrie brought to his attention and that department's attention the concern that the city has for any environmental effects on the quality of the water supply to the city of Winnipeg. We were advised at that time that an environmental report is being done at this particular time.

MRS. WESTBURY: Mr. Speaker, I wonder if the Minister would allow the House to be aware of the contents of that environmental report when it becomes available.

MR. MERCIER: I can't specifically give that undertaking, Mr. Speaker, because it is a federal report. I would certainly do everything I could to provide it if possible. I'm sure the Member for Fort Rouge has some involvement with the federal government whereby she might be able to obtain it.

MR. SPEAKER: The Honourable Member for Transcona.,

MR. PARASIUK: My questions are directed to the Minister of Health regarding the urgent situation at the Golden Door Geriatric Centre. Could the Minister indicate what level of care is being provided at the Golden Door Geriatric Centre in view of the fact that in many of his previous answers, his answers regarding the quality of care have changed from normally high to usual care and I think there is some medical definition of the quality of care that is being provided in the Golden Door Geriatric Centre. I think the Minister should give us a consistent set of answers here.

MR. SPEAKER: Order, order please. One of the difficulties we have in the question period is the

apparent desire on the part of all members to debate, rather than seek information. The question period is designed to seek information. If the honourable member has any information he wishes to seek I wish he would make it known now.

The Honourable Member for Transcona.

MR. PARASIUK: I'd like to get a clear, concise answer from the Minister as to the quality of care being provided in the Golden Door Geriatric Centre for patients now, as compared to the quality of care being provided to the patients in the nursing home prior to the industrial dispute arising there.

MR. SHERMAN: It is precisely the same, Mr. Speaker, because the quality of care provided in our personal care homes, prop-operated and non-prop-operated has to meet standards imposed and monitored by the Health Services Commission. That is done in the case of all homes, and the Golden Door has certainly met those standards.

MR. PARASIUK: Yes, can the Minister indicate if he has been monitoring the situation over the last week and, if so, can he indicate why at least 12 people had to be moved out of the Golden Door Geriatric Centre if the quality of care hadn't changed at all? Why does he have contingency plans in place if there is no concern because the level of care is exactly the same now as it was then?

MR. SHERMAN: Mr. Speaker, I should think it's perfectly obvious that the contingency plans are in place in case it is not possible, during a walkout of employees, staff members, at the Door to find sufficient RNs, sufficient VONs, sufficient Medox personnel, sufficient relatives and sufficient volunteers to maintain the staffing patterns. It is a contingency plan to take care of a possible eventuality; it's what is known as anticipatory action for the benefit of the Member for Transcona. I repeat, Mr. Speaker, that the care has been maintained at the levels demanded by the Health Services Commission and always in place at the Golden Door. I answered the question as to the nine residents who are located elsewhere.

MR. SPEAKER: The Honourable Member for Transcona with a final supplementary.

MR. PARASIUK: Yes. In monitoring the negotiations that have been taking place as he says he has, can the Minister confirm that three nights ago the private owners of nursing homes in Winnipeg got together for a meeting at the Golden Door Geriatric Centre, following which the attitude of the owner of the Golden Door Geriatric Centre changed entirely in the course of the negotiations and hardened very considerably?

MR. SHERMAN: Mr. Speaker, I suggest that it's hardly a question for the Minister of Health. I cannot confirm that. I will not confirm the innuendo, the implication, the suggestion, the rumour and the hearsay that the Member for Transcona consistently drags into this issue. What I can confirm for the tenth time is, yes, we are monitoring the situation

hourly and daily and the care and the staffing levels are being maintained at MHSC imposed standards.

MR. SPEAKER: The Honourable Minister of Community Services.

HON. GEORGE MINAKER (St. James): Mr. Speaker, the Honourable Member for Rossmere asked a question the other day with regard to the number of escapes from Bannock Point Camp in 1979. I would like to advise the House there were 11 escapes from the camp in 1979. Also, I believe he asked if there was any damages that had occurred at Betula Lake. I would like to advise the honourable member that, to our knowledge, there wasn't any damages at Betula Lake but there were some damages at Nutimik Lake campgrounds. We have contacted those people that were involved, requesting that they advise of the losses. We've had three replies. The total losses, or damages, were approximately 600 and the people involved will be compensated.

MR. SPEAKER: The Honourable Member for Rossmere.

MR. VIC SCHROEDER: Thank you, Mr. Speaker. A question to the Minister. Could he advise as to whether those 11 prison escapes were separate incidents or whether that was just 11 people who had escaped? If it was just 11 people who had escaped, how many separate incidents were there?

MR. SPEAKER: The Honourable Minister of Community Services.

MR. MINAKER: Mr. Speaker, they were separate incidents. I don't have the particulars of the numbers in each escape, but if the honourable member is patient I believe that my estimates will be coming forward within the next week, I understand, and I will have that information for him at that time. If it's more important that he has it sooner than that, then I will get it for the honourable member.

MR. SCHROEDER: Thank you, Mr. Speaker. A supplementary to the Minister with respect to Betula Lake. He indicated that he didn't have any knowledge as to whether there was any damage at Betula Lake. I would ask him, had any questions been asked of the RCMP to determine that or on what basis does he have no information?

MR. MINAKER: Mr. Speaker, the honourable member is asking about Betula Lake. There were two escapes in 1980 from the camp and they involved, in that instance, a break-in into one of the cabins at Betula Lake. As yet we have not been advised of whether or not there was any damages other than the breaking and entering. The two individuals involved were apprehended the same evening and are now being held in Headingly institute.

MR. SPEAKER: The Honourable Member for Rossmere with a final supplementary.

MR. SCHROEDER: Thank you, Mr. Speaker. Yes, I had asked for the number within the last 12 months, not in 1979. Could the Minister not confirm then as

well, if we're talking specifics, that there were several car thefts at Betula Lake in the fall of 1979 as a result of some of these breakouts; and further, what is the department doing to ensure that these breakouts will stop?

MR. MINAKER: Mr. Speaker, I will have to take the question as notice with regard to the theft of cars because I am not aware of that incident but I can assure the honourable member that we maintain staff at the camp on duty and I guess you're always going to have escapes from that type of camp. If you believe in that type of system of keeping prisoners under confinement, that you're bound to have escapes occur from time to time. As a matter of fact, the year prior there were 11 escapes as well and I think that's something that has to be expected. We will try and keep that to a minimum; we always will, but I think the only other way that you could eliminate that completely I guess would be go back to the old ball and chain, but I don't think the honourable member endorses that approach to that problem.

MR. SPEAKER: The Honourable Member for Rossmere with a further supplementary.

MR. SCHROEDER: Thank you, Mr. Speaker, a further question to the Minister. In view of the fact that he expects that there will be continued escapes, could he then indicate what he is proposing to do to protect the cottagers from this continuing damage and what he is doing to ensure that these people who have suffered damages are receiving proper compensation in a satisfactory and quick fashion?

MR. MINAKER: Mr. Speaker, I think I advised the honourable member already that where the inmate is under the supervision, during the working day or during a period of work that is being carried out, that we will compensate the damages that occurred under those conditions. When a prisoner escapes from jail they are no longer under our custody; they have broken out from the institute so that we would not be compensating for damages that occur once an escapee has escaped from the institute.

MR. SPEAKER: The Honourable Leader of the Opposition.

MR. HOWARD PAWLEY: Mr. Speaker, my question to the Minister of Finance, Deputy Premier, in his absence yesterday the Premier accepted as notice a question as to whether or not the Memorandums of Intention pertaining to the potash mine at St. Lazare, Granges Mine Development at Flin Flon, agreements involving the provincial government, whether those agreements would be tabled by the Minister.

MR. SPEAKER: The Honourable Minister of Finance.

HON. DONALD W. CRAIK (Riel): Mr. Speaker, first of all the agreement regarding the potash further exploration, the Orders-in-Council certainly will be available and tabled as a matter of course. The final agreement that would emerge from that will probably not be executed for some time yet, not till after the

exploration period is finished. With regard to the second agreement, the Trout Lake Development, I would think that perhaps the appropriate place to address that would be when Manitoba Mineral Resources is before the Legislative committee, at which time the officers of the corporation will be available for discussion. I should indicate at this time what has been entered into is the Agreement in Principle with regard to the Trout Lake Development. Any final agreement will have to be also provided by the Manitoba Mineral Corporation and I think the place to address that would be at the committee stage.

MR. PAWLEY: Mr. Speaker, the First Minister indicated probably, the Manitoba Mineral Resources is owned by the province of Manitoba, that memorandum of agreement must have been approved by the government. Is the Minister indicating that there is any hesitation on his part in tabling the agreement involving the potash mine at St. Lazare and the Granges mine at Flin Flon after all? The Minister held a press conference pertaining to both items.

MR. CRAIK: Well perhaps, Mr. Speaker, if I can repeat again for the Leader of the Opposition that the arrangement with regard to the potash mine, the items that come out, that are pertinent in it, will be contained in the Order-in-Council which assigns the rights to IMC to do the exploration work and the salient parts that are required will be contained in that Order-in-Council.

With regard to the second, the agreement that will emerge, in the ultimate agreement that will emerge with regard to the Trout Lake Development, will be between the Manitoba Mineral Corporation and the other two parties and I think the details of that should be pursued in the committee. I am not even sure at this point in time that the agreement would even be available for examination.

MR. PAWLEY: Mr. Speaker, if all the salient items are included in the Order-in-Council, in regard to the potash mine, then what possible reason would the Minister offer for not tabling the actual agreement if all the items are included in the Order-in-Council?

MR. CRAIK: Mr. Speaker, the important elements of the agreement have not yet been arrived at. The important elements to the agreement will probably not emerge until the end of the exploration period which will perhaps be some months from now.

MR. PAWLEY: Mr. Speaker, further to the Minister. Is the Minister indicating that the agreement is not completed, that there are important aspects not yet determined as to the negotiations involving the province of Manitoba and the companies involved, important elements that prevent him at this stage from indicating to the people of Manitoba what the two agreements in total represent at this stage?

MR. CRAIK: Mr. Speaker, perhaps if I can dramatize the procedures. There are parties who hold mineral rights in that area that still have an interest in the general area. All of those will have to be resolved before the final agreement comes about

in the eventuality of the mine proceeding. There is nothing to be concealed; it's strictly the normal course of business to have all of that resolved, plus the final feasibility study which will emerge from the further exploration work; so it's a little bit premature at this point to be talking about the details of the negotiations that are going to proceed.

Mr. Speaker, the members across the way seem to have forgotten very rapidly that the role of government is to execute executive responsibility and that's exactly what's proceeding. In due course when all of that is resolved and the regular business items are dealt with, then the information will be provided in detail for the public. At the present time, the important part that has been done, and are public documents, as a matter of course, are the Orders in Council that spell out the conditions for the obtaining of the leases for the potash rights in that area.

MR. PAWLEY: Mr. Speaker, I'm hesitant of accusing the Minister at this stage of stonewalling but it's becoming very very close to stonewalling if not. Can the Minister then confirm that indeed the tabling of the press conference that he held the other day may have very well been premature since it was based upon speculative developments that are yet to occur in the completion of the agreement? Why did the Minister hold the press conference at this stage if there are many speculative elements yet to be concluded?

MR. CRAIK: Well, again, Mr. Speaker, I think the Leader of the Opposition is perhaps trying to overdramatize a matter that is strictly a matter of procedure. So, Mr. Speaker, just to again indicate, all the important elements of this will be public documents; those matters that are matters of negotiation that are left, of course, are so easily recognized that it would not be in the public interest to be negotiating with multi-parties in the middle of a negotiation. It suffices to say that the moves are being made for the development. It's going to require, in the potash instance, some further final exploration work, a fair amount of negotiation with parties, other than the two principal ones involved, the Government of Manitoba and the International Minerals Corporation. Those will proceed simultaneously with the development work, I'm sure.

MR. SPEAKER: Order, order please. I wonder if we could have a little more quiet in the Chamber. I find it somewhat difficult to hear the words of those that are asking the question and those that are answering.

The Honourable Leader of the Opposition.

MR. PAWLEY: Mr. Speaker, what started out as a casual question on my part becomes one of considerable more concern. Is the Minister indicating that there is nothing that he can table at this stage by way of memorandum of intentions, draft agreements, since that appears to be the saidst letter of intention.

Since that is the case, I will pose a further question to the Minister on another matter. Mr. Ray Howard of the Union of Manitoba Municipalities has indicated that due to the sharply increased weight of

educations cost this year faced by local ratepayers that municipalities in the province of Manitoba are seriously contemplating not collecting those education taxes on behalf of school divisions in the province. My question to the Minister — and I'm not going to ask the Minister the legality of same — can the Minister advisewhether or not his government has received notice from municipalities in regard to any intention on their part to not collect taxes on behalf of local school divisions this year because of the sharp increase in education costs throughout the province?

MR. CRAIK: Mr. Speaker, I can recall when the Member for Seven Oaks was the member of the jurisdiction in his local community and there were threats going back and forth across between school boards and councils as to who was going to collect whose taxes. I can recall, about the same time also, being a member of a school board and being told by the municipality in which I lived that the municipality was very reticent and may refuse to collect the taxes. Twenty years later, Mr. Speaker, the same thing is being said. I suppose it's an option that may or may not be there, but I am cognizant of the fact that it has been said and I just say that it has been said before.

MR. SPEAKER: The Honourable Member for The Pas.

MR. RONALD McBRYDE: Mr. Speaker, I'd like to address a question to the Minister of Finance in his role as the Minister who reports to the House for Manitoba Forestry Resources Limited. Because of the general slump in the Manitoba economy and the interest rates affecting construction, there is presently a one-month layoff at the ManFor Industries' sawmill and I wonder if the Minister could indicate whether sales have improved in the lumber division at ManFor or whether the workers there can expect further layoffs after this one-month layoff is over.

MR. SPEAKER: The Honourable Minister of Finance.

MR. CRAIK: Mr. Speaker, I can't answer the last question. It will be a matter for the ManFor Board to come up with a recommendation or a decision on that. At the present time, of course, the staff has been advised — I believe a number have been advised — of a four-week period in which the layoff would occur. The lumber sales have not moving well, mainly as a result of the slowdown in the U.S. market where the largest market area is for the company to do its marketing of its dimension lumber, and the same is occurring right across Canada, of course. The pulp end of it is holding up well and things are moving along, and it's providing a fair degree of stability for the operation. I will attempt to provide the member with information if there is any change. As far as I know, the four-week layoff is the one that counts. At this present time, I've had no further information.

MR. McBRYDE: Mr. Speaker, I would also ask the Minister if he could find out whether any of the

tradespeople or workers are leaving The Pas because after the one-month layoff, three weeks later the normal three-week break comes into effect and there is still a possibility of further layoffs; whether he could inform us whether any of the tradespeople and sawmill workers are leaving the community.

MR. CRAIK: Mr. Speaker, I could perhaps find out, in general, if there is any general information in that regard. It would be difficult to find out specific information of individual cases. I will enquire as to whether there is any general trend occurring in that regard.

MR. SPEAKER: The Honourable Member for The Pas with a final supplementary.

MR. McBRYDE: Mr. Speaker, I wonder if the Minister could also find out whether there was any management staff, any non-union staff, that were laid off at this time or whether all the management staff is still on full salary.

MR. CRAIK: Mr. Speaker, we can enquire in that regard. I would find it highly doubtful, in the case of a four-week period, that there would be.

MR. SPEAKER: The Honourable Member for Brandon East.

MR. LEONARD S. EVANS: Mr. Speaker, I'd like to address a question to the Minister responsible for the McKenzie Seeds' operation and ask the Honourable Minister whether he can advise the House whether he suggested to Mr. Robert Clement, QC, long-time Chairman of the Board of McKenzie Seeds, whether he suggested that this is the time for that gentleman to resign as chairman of the board.

MR. SPEAKER: The Honourable Minister of Fitness and Amateur Sport.

HON. ROBERT (Bob) BANMAN (La Verendrye): Mr. Speaker, let me just say that I resent that question. The honourable member who asked that question is the person that worked together with Mr. Clement, and Mr. Clement has been chairman of that particular board for the last five, six or seven years, I believe, and I think is a man of integrity and I think that his letter that he sent to me and the statements he's made to the press are self-explanatory. He is retiring; he is spending more time in the winter away from Brandon and felt that, under the circumstances, he did no longer have the time nor the energies to devote to the particular company. He has spoken to me several times about that, the first time almost a month ago, indicating that and I believe that he is doing it out of personal reasons and that's the only the reason.

MR. EVANS: Mr. Speaker, my question has no reflection on the abilities of that particular gentleman. Having had something to do with his appointment in the first place, I would say that he has served very well and with great distinction as the chairman of that board. I presume then, Mr. Speaker, that the Minister is suggesting that he is totally satisfied, and this is something that I would

like to get clear, that he and the government are totally satisfied with the services and dedication of Mr. Robert Clement, QC, as Chairman of the Board of McKenzie Seeds.

MR. BANMAN: Mr. Speaker, it's interesting to note that, first of all, the Member for Brandon East tries to bait the hook and tries to cast certain aspersions on the gentleman's character, Mr. Speaker, and then comes back and tries to redeem himself from that question.

MR. SPEAKER: Order please, order please, order please.

The Honourable Member for Brandon East.

MR. EVANS: On a point of privilege, either the honourable member didn't hear me or he doesn't want to hear me. My point of privilege is that he stated that I was casting aspersions on the Mr. Clement, the Chairman of the Board. In no way have I done that and if he checks Hansard he will see that is absolutely the case, in fact, it is the reverse, Mr. Speaker, I am concerned about the government reflecting on the ability and dedication of Mr. Clement.

MR. SPEAKER: Order, order please. One of the problems we have is the words that members think they say and the words they actually say may, in fact, create a difference of opinion. A difference of opinion is not a point of privilege and the Honourable Member for Brandon East had no point of privilege.

The Honourable Member for Elmwood. The Honourable Member for Brandon East with a final supplementary.

MR. EVANS: Mr. Speaker, my supplementary is, is it the government's intention to move now to replace Mr. Clement as Chairman and also does the government have plans to change other members of the board of McKenzie Seeds at this time?

MR. SPEAKER: The Honourable Member for Fitness and Amateur Sport.

MR. BANMAN: Mr. Speaker, I have undertaken to try and find a Brandonite, if I can use that expression, a person from Brandon who can take over the responsibilities of Mr. Clement. With regard to the rest of the board, the appointments are all up May 1st, I believe, or until the government re-appoints new members. With regard to the rest of the board I can't give the member an answer but I can assure him we are looking for a new chairman, hopefully somebody from Brandon who has the best interest of Brandon and the company at heart and we hope to find that type of person very shortly so that the board can provide the type of leadership and stability that the company requires.

MR. SPEAKER: The Honourable Member for Elmwood.

MR. DOERN: Mr. Speaker, I would like to direct a question to the Minister of Education concerning this threatened tax revolt by the Union of Manitoba Municipalities and the basis of which is the lack of

provincial support for education. I would like to ask the Minister whether he has considered, or is considering, a new basis of funding for the Foundation Levy such as the general revenues or greater use of income tax or sales tax, as has been suggested by the municipal men.

MR. SPEAKER: The Honourable Minister of Education.

HON. KEITH A. COSENS (Gimli): Mr. Speaker, as usual the Member for Elmwood is master of overstatement. There has been concern for some time by the members of the Municipal Association in regard to property taxes supporting education, they have made those concerns known to me on several occasions. I can assure the Member for Elmwood and I can assure the members of the municipalities, as I have in the past, that we have that matter under intensive study.

MR. DOERN: Mr. Speaker, is the Minister of Education saying that the municipal men of this province are overstating their case; because I'm quoting them, they are saying there's a lack of provincial funding and that the program is wrongly funded. Is he also attacking them?

MR. COSENS: Mr. Speaker, I am not attacking them at all. I cast no aspersions on those honourable gentlemen at all. I said the Member for Elmwood was a master of overstatement in this case.

MR. SPEAKER: The Honourable Member for Elmwood with a final supplementary.

MR. DOERN: Mr. Speaker, I would also ask the Minister whether it's true that the municipal tax burden for education has reached levels of up to 1,000 per quarter section?

MR. COSENS: I can't confirm that at all, Mr. Speaker, as to what particular level it may have reached, depending on the assessment and other factors. Of course this varies from one municipality to another.

MR. SPEAKER: The Honourable Member for Roblin.

MR. J. WALLY MCKENZIE: Mr. Speaker, I have a question for the Honourable Minister of Highways. I wonder if the Minister could advise the House when he might be lifting the road restrictions, or reviewing them, the weight restrictions that are on the highways today.

MR. SPEAKER: The Honourable Member of Highways.

HON. DON ORCHARD (Pembina): Mr. Speaker, there is every possibility that we may be able to lift the road restrictions somewhat earlier this year than in other years because of the very warm nature of the spring and the very excellent dry weather that we've had; excellent from the term strictly of the Highways Department, not so excellent, Mr. Speaker, from the standpoint of our many farmers in the province.

MR. SPEAKER: Order please. The time for question period having expired, proceed with Orders of the Day.

ORDERS OF THE DAY

SECOND READING GOVERNMENT BILLS

MR. SPEAKER: The Honourable Government House Leader.

MR. MERCIER: Mr. Speaker, would you call the second reading of Bill No. 8.

BILL NO. 8 — AN ACT TO AMEND THE FIRE DEPARTMENTS ARBITRATION ACT

MR. SPEAKER: Bill No. 8, the Honourable Minister of Labour.

HON. KEN MacMASTER (Thompson) presented Bill No. 8, An Act to amend The Fire Departments Arbitration Act for second reading.

MOTION presented.

MR. SPEAKER: The Honourable Minister of Labour.

MR. MacMASTER: Mr. Speaker, the amendments contained in Bill No. 8 are essentially housekeeping or administrative. The Fire Departments Arbitration Act was enacted in 1954 to complement The Labour Relations Act. One objective of The Fire Departments Arbitration Act was to provide binding arbitration as a final means of resolving any collective bargaining disputes between the firemen and their employers, the municipalities.

Over the past ten years or so, Mr. Speaker, The Labour Relations Act has been amended numerous times and both its substance and its section numbers have been changed several times. However, no changes were made to The Fire Departments Arbitration Act over the same period of time. The result has been that cross-references between the two Acts have become inconsistent and confusing. The Law Reform Commission examined this situation earlier this year and recommended changes to correct the situation. The amendments in Bill No. 8 attempt to do just that.

Mr. Speaker, I repeat that Bill No. 8 is housekeeping in nature, it does not reflect any major or substantive changes to The Fire Departments Act. I would like to give notice, Mr. Speaker, that I will be proposing an amendment in committee. The amendment to permit those parties negotiating a first contract use of the arbitration procedure; they don't have that presently.

MR. SPEAKER: The Honourable Member for Logan.

MR. WILLIAM JENKINS: Mr. Speaker, I beg to move, seconded by the Honourable Member for Kildonan, that debate be adjourned.

MOTION presented and carried.

MR. SPEAKER: The Honourable Government House Leader.

MR. MERCIER: Mr. Speaker, I move, seconded by the Minister of Government Services, that Mr. Speaker do now leave the Chair and the House resolve itself into a committee to consider of the Supply to be granted to Her Majesty.

MOTION presented and carried, and the House resolved itself into a Committee of Supply with the Honourable Member for Radisson in the Chair for the Department of Health, and the Honourable Member for Virden in the Chair for the Department of Consumer and Corporate Affairs and Environment.

CONCURRENT COMMITTEES OF SUPPLY SUPPLY — CONSUMER AND CORPORATE AFFAIRS AND ENVIRONMENT

MR. CHAIRMAN, Morris McGregor (Virden): Committee come to order. We're on Resolution 38 (c)(1) — the Member for The Pas.

MR. McBRYDE: Yes, Mr. Chairperson. One question I'd like the Minister to deal with is, is there environmental regulation in terms of construction camps or is there just health department regulations? One thing, I've been to a number of areas up north where there has been construction camps, particularly highway construction camps, even if the site is very old, a number of years old and there's very little evidence left of the camp, one of the things you find there is the spot where they've drained oil from their machines and I don't know if that ever goes away. The garbage tends to rot and other signs of bands and habitation go away but there's always a low spot there where they've drained the oil from the machinery and it seems to always stay there and affect the environment. So I wonder if the Minister's department has any responsibility in terms of construction camps.

MR. CHAIRMAN: The Honourable Minister.

HON. WARNER H. JORGENSEN (Morris): Yes, Mr. Chairman, there are regulations under The Department of Health Act with respect to construction camps. Perhaps my honourable friend would like to have a copy of those regulations. I'd be happy to see that he gets a copy if he wishes.

MR. McBRYDE: Thank you, Mr. Chairperson. Those regulations are not administered by this Minister or his department thereof?

MR. JORGENSEN: We administer a number of the Department of Health's regulations; this happens to be one of them that we do.

MR. CHAIRMAN: 5.(c)(1) — the Member for The Pas.

MR. McBRYDE: Yes, Mr. Chairman. I'd like to make a few comments in terms of a problem that we've had for a considerable amount of time that's affected people in northern Manitoba and that's the

problem that we have with mercury. Mercury is a hazardous element and I think the Minister and committee members are well aware of the Minamata disease, as it was first called, and then the effect in Manitoba and Ontario with mercury pollution in waterways, which in effect works its way up the food chain so that certain types of small marine life ingests the mercury and then the next size fish ingests that fish and gets more mercury and the mercury gets concentrated as it moves along up the food chain.

The mercury contamination that you find in industry is somewhat different than the effect on people of the mercury that is ingested through food intake. It affects the central nervous system, the eyes and the brain and can cause death. What they say is the best way to show that there's mercury poisoning is to wait till a person dies and then examine their brain because then you can tell, because that's where mercury tends to concentrate, in the brain, and affects the nervous system and the brain functioning.

The report that the Manitoba Water Commission did on mercury in April of last year mentions that the provincial bodies responsible are normally the Workplace, Health and Safety people in the environment. And in fact the report says, on page 13, that Manitoba has no legislation specifically dealing with mercury. However, Manitoba has legislation that could deal with mercury problems in the environment in the workplace or relating to health in general.

The following Acts could be used under these circumstances: The Clean Environment Act — The Clean Environment Act does not specifically deal with mercury in the environment, however, under Sections 3, 4, and 5, it does allow contamination of air, soil and water in excessive prescribed limits. Under the present regulations there are no prescribed limits relating to mercury but under Section 14(3) the Commission could prescribe limits for a specific proposal before the Commission.

The Clean Environment Commission has the power to order any person contaminating the environment to abate, control or cease contaminating the environment and may do so without a hearing. The Commission may also order a person to clean the area and then hold that person causing the cleanup responsible for the cost.

The generality of these sections would allow their application resulting from mercury contamination.

Now, Mr. Chairperson, the federal government through Indian Affairs and National Health and Welfare, in the health field, has taken some leadership in terms of testing and monitoring the situation in regard to native people who are the most seriously affected because of the dependency on fish for food. Of course, I think all members are aware that the fishery was closed at Cedar Lake and at Lake Winnipeg, Saskatchewan River, and there have been some other discoveries later that are not so clearly connectible to industrial sources of pollution further north, and mercury can develop in the natural state as opposed to just from industrial waste. In the cases though of Easterville and the communities on Lake Winnipeg, their lakes were affected because of industrial waste and the province was unable to recover, as I understand it, any compensation even

though we paid the fishermen, and what we did was, basically, get them into work projects to replace the fisheries during the closing of the fisheries to avoid having them become dependent on welfare during that period of time.

So there is an ongoing committee and I think the federal government was taking some leadership in that ongoing committee. There is now indications of mercury in water levels in South Indian Lake and the Rat River system and I think there are some other small lakes in northern Manitoba that are not connected to a primary system that, in fact, show the affects of the mercury. The recommendations of the report done by the Water Commission are:

No. 1. A committee similar to the tripartite committee on environmental contaminants and/or the appointment of a contact person in each agency concerned with mercury, would serve to keep agencies aware of new developments or to provide a form to discuss current problems relating to mercury.

No. 2. The methods of analyzing mercury should be periodically compared with other agencies to ensure methods are accurate and continue to be comparable.

No. 3. Regions where large amounts of fish are consumed by residents should be monitored for mercury levels in fish and should be followed up by advising residents or posting lakes where there is a high potential risk.

So I wonder if the Minister could (1), indicate to his knowledge what progress has been made in terms of those recommendations; (2), if in fact he's used his existing legislative authority or adopted regulations related to his present legislative authority in terms of the mercury situation.

MR. JORGENSEN: Mr. Chairman, we are aware of course, and concerned about the mercury situation that my honourable friend has referred to in northern Manitoba. As he probably knows, there is a committee composed of members of the federal Health Services of Environment, our own Environment Management Division, Environment Canada, Indian Affairs and Northern Development, Manitoba Health Services and the federal Medical Services that are monitoring the situation up there.

As my friend has pointed out, the situation in Southern Indian Lake and some of the other lakes in that area, is not related to industrial emissions. It's a phenomena that is a natural one, mercury in the rock in the area, and as he has also pointed out, there is very little evidence of mercury in the water itself. It is, as he has indicated, the process of the food chain where the contamination gets higher, and we're concerned naturally about that particular situation. But regulations that could be imposed on industrial emissions are not applicable in this particular case.

We can warn the people of that area of the presence of mercury. We have no way of stopping people from eating the fish. As was indicated in the Wabagoon River system recently, the native people there are just simply not paying any attention to the warnings that they're being given now.

As he also knows, the Freshwater Fish Marketing Board have fish tested on the regular basis to determine mercury content and if mercury levels reach certain levels, then the fish are not put on the market. With the federal people we have an ongoing

examination of methods for mercury that is continuing at this time and will continue on analysis of this particular situation.

MR. McBRYDE: Mr. Chairperson, is there a way to test for mercury within the water system or is there a way to test the fish and send them over to the Freshwater Institute?

MR. JORGENSEN: Both, Mr. Chairman. The water can be tested but the water reveals no evidence or very little. It's immeasurable in the water. The tests that reveal the presence of mercury is contained in the fish itself.

MR. McBRYDE: One of the sources initially of mercury contamination was pulp and paper mills but the particular mill at The Pas didn't use that kind of a process and I understand that other mills have switched the process they use so that they no longer cause mercury contamination. I guess that leads me to a related matter and I am wondering if there is an ongoing testing process, an ongoing monitoring process of the Saskatchewan River near where the ManFor outlet comes into the Saskatchewan River. What is the sort of the schedule and the monitoring and the testing process that is done there and I wonder if the Minister could inform me as to if there is a regular testing program.

MR. JORGENSEN: Yes, there is a regular testing program of the waters that are feeding into . . . It's a federal program because you're talking largely about trans-boundary waters.

MR. McBRYDE: I wonder if the Minister could just give me an outline of the nature of that program. Are there samples taken monthly, or weekly, and is it a thorough analysis, that is, is it for all elements including wood fibres, etc., and in how many locations along the river would it be taken — just at the one?

MR. JORGENSEN: In the area on the Winnipeg River, we have our own testing program eight times a year, and that takes place . . . that's a water test that is being taken.

There are also, as I said, the federal government has the responsibility for a liquid effluent discharge relating to the industries that are located along the rivers; but we have provincial monitoring stations on the Saskatchewan River as well.

MR. McBRYDE: Yes, Mr. Chairman. How often would tests be taken in the Saskatchewan and does the Minister have a listing of locations where that testing takes place?

MR. JORGENSEN: About the same, about eight times a year.

MR. McBRYDE: Did I hear somebody say two stations?

MR. JORGENSEN: Yes, on the Saskatchewan River.

MR. McBRYDE: One above the pulpmill I guess, and one below the pulpmill, or both below?

MR. JORGENSEN: Yes, you're right. One at The Pas and one downstream from The Pas.

MR. McBRYDE: Okay. I have no further questions right now, Mr. Chairperson.

MR. CHAIRMAN: The Member for Churchill.

MR. JAY COWAN: Yes, continuing on the same subject, Mr. Chairperson. The Minister said that when they do discover that there are elevated levels of mercury in the fish, that the residents that would be most prone to eating those fish are warned or advised of the problem. I'd ask the Minister if that is a federal responsibility or if it is a provincial responsibility and in what instances would the province involve itself in that warning mechanism.

MR. JORGENSEN: I'm sorry, I didn't . . .

MR. COWAN: The question is very basically, Mr. Chairperson, is the warning process that is given to people who may be exposed to high levels of mercury in their fish diet, is that process a federal process or a provincial process, and realizing that there is probably a split jurisdiction, I would clarify the question by asking the Minister, when does the province involve itself in that process?

MR. JORGENSEN: Well, my information is that there is no formal warning system. What occurs, of course, is that commercial fish are tested regularly by the Freshwater Fish Institute and if levels are beyond the acceptable levels, then the fish simply are rejected; and when they're rejected, of course, the fishermen then are aware that the levels are in excess of the required limits.

MR. COWAN: Yes, thank you, Mr. Chairperson. Well, when the fish are rejected by the FFMC, of course the fishermen are aware that they have been rejected and they are aware of the reason for which they have been rejected, and that of course is high or elevated mercury levels in the fish. But they are not always aware of the significance of that rejection outside of the financial impact that it has on their own livelihood. It's a very complicated and complex problem. The Minister referred to it in one of his comments when he said that there's no way of stopping people from eating fish.

He talked briefly about the problem that they're experiencing in our neighbour to the east, in the Ontario province, where there is some difficulty now among the people who would normally eat that fish that is mercury contaminated, in the fact that they do not appear to be heeding the warnings. There's some very specific reasons for that. So when the Minister says that because FFMC has rejected the fish and thereby made the fishermen in the community aware of a problem, he is not in fact — or I hope he is not implying — that the fishermen then know the significance of the problem on their own health because that is not the case as so aptly demonstrated just very recently, not too far from here, in regard to mercury pollution in another area.

So I would ask the Minister then, in light of that and in light of the fact that the federal task force that did set about to determine some of the

problems and some of the solutions in regard to mercury poisoning, said very specifically that people in a community, who are exposed or who may eat or may have cause to eat fish containing elevated levels of mercury, be made very aware of the problems that they may experience, and they had a detailed list as to medical surveillance programs, as to public education programs, and they were also very adamant that the community itself was involved in the whole public health system, so that they would understand more fully the circumstances surrounding the contamination problem in their own area, and therefore, would opt into the program of not eating the fish. If I can just clarify that very briefly, because I don't want to go through a speech that I made in the House under another estimates in regard to the South Indian Lake community. But I do feel it is important to encourage the Minister at every juncture, and to encourage the government at every opportunity to provide the best possible warning systems that are available in regard to environmental and health hazards.

I would like to point out that in this specific instance the people in that community, and let us take the community of South Indian Lake, rely very heavily on fish as a part of their own diet as well as a part of the economic structure of their community. It is difficult and expensive to bring in outside foods. Fish are very readily available at certain times of the year and therefore they eat more fish than would most people. You cannot just say to them, stop eating fish, because it will not work; because there is no substitute, that is one that is readily available to them, and in many cases that would fit within their own financial constraints. And they have grown up — it's a culture — they have grown up eating the fish and it's hard to break cultural habits. Therefore, with that knowledge, I'd ask the Minister if there is any comprehensive program that the province is doing in respect to a community like South Indian Lake, No. 1, to warn persons that there may be a problem with the fish they're eating; and No. 2, to make them a part of the controlled process; and No. 3, to make certain that they understand very well why it is they are being asked to stop the fish; and No. 4, to provide mechanisms and passive entry into their community for substitute food forms.

MR. JORGENSEN: Well, Mr. Chairman, as my honourable friend has indicated, we have no formal way of notifying anybody on the lakes. I understand that the Ontario government have attempted to carry on a program of posting the lakes, which is first of all very costly, and secondly, I believe their conclusion would be that it's relatively ineffective. So I don't think that we would want to duplicate a system that has been ineffective.

We are attempting to, and we are in discussions with a view to determining what may be the best method of dealing with this particular problem. If my honourable friend has any suggestions along those lines, we'd be happy to hear them, but up to this point our analysis has indicated that, compared to other areas in Manitoba, there isn't a serious problem, as yet. That doesn't mean the problem cannot get more serious, but according to blood and hair analysis right now, it would seem to indicate that our problem is minimal at the present time.

MR. COWAN: I would ask the Minister two questions in regards to his last statement that we do not have a very serious problem in Manitoba. Of course, the Minister clarified it to the extent that we do not have a serious problem in comparison to other jurisdictions, but the fact is, according to the information that is available to myself, that No. 1, we are finding elevated levels in hair and blood, although at this point in time we are not finding them in great numbers, the fact is that there is significant mercury contamination of fish in certain areas to allow for significant samples, and samples which are considered to be over the, and I use this in quotes, safety level of 100 parts per million or billion and I'm not exactly certain of which it would be in this instance. It's either one or the other. That is one fact the Minister has to deal with.

The other fact, that according to a report that was provided to myself by the Minister for Natural Resources, what we are finding is over the last number of years a continuing elevation in the counts of mercury in fish so that the problem is in fact becoming more serious than it was a number of years ago. So while we may not have a problem that is as serious as a problem that is in Ontario say, we still do have a problem that is becoming more and more serious within our own province, and if we are to deal with it effectively we must now begin to put in place the mechanisms with which to deal with the ramifications of that problem, so we do need a formal system.

The Minister indicated that Ontario had attempted to carry out a program which was found to be costly and relatively ineffective, in his words, and I have only been able to advise myself of that situation through the press reports and I do share some of the concerns of the Minister that it appears as if that program to encourage persons to stop eating contaminated fish is not working as well as we would expect it to or hope that it would.

The fact that Ontario has had a program that seems to be, and perhaps failing is too strong a word, but seems to be less effective than we would hope it to be does not mean that we can not draw upon their experiences, both negative and positive, and put in place a program in Manitoba which will be less costly and more effective.

The Minister asked me if I had any suggestions on that and I would like to just briefly emphasize some of the suggestions that I just put on the record. One is that we take every available opportunity to formally warn individuals who may be exposed to fish in their diet that have an elevated mercury level. We have a moral responsibility to do that, as well as I would believe a legal responsibility as a government to do that. So that we must do, let there be no doubt about that. My suggestion, in order to ensure that it is done in the most comprehensive way, is that we formalize the procedures, that we say that when an area shows that it is becoming contaminated, or the fish in that area are becoming contaminated by mercury, that we have a process that clicks in, in a systematic and regular method at a certain warning point. In other words we determine what levels we consider to be worthy enough of warning the residents who are being exposed or perhaps being exposed as well as within their diet.

We then formally send a letter out to them advising them, or we send a person into their community, calling a community meeting, to advise them of the problem they may face. I would suggest that both avenues are probably the best. You send a letter out informing them of a public meeting and that you hold the public meeting, and then you have a discussion within the community. It is very important to have the discussion. At the discussion you not only provide them with information as to what the problem and the significant health hazards adhering to that problem may be for them, but you also advise them of the fact that they have to in their own community devise a strategy to deal with this problem, that they know best how to minimize the impact on their own community. They know how many fish they are usually incorporating into their own diets; they know, when they know of the problems that may come as a result of eating that many fish, they then would be the best ones to provide the Minister with a strategy as to how to reduce the consumption. If they are not part of the process at that point, we will find that the process will fail, as it did in Ontario, or as it appears to have done in Ontario. I may not be so specific in my terms, because I am not certain it is a complete failure, I'm just certain there are some problems that have been reported by the media. So we must involve them right from the start in developing a strategy for each individual community.

At the same time, government as a co-ordinating body can provide some valuable functions: No. 1, the first warning; No. 2, setting up a mechanism within the community whereby they can implement their strategy that they have come upon by their own deliberations. What I mean by that is we can provide them with support services in their community; it may be in the form of already existing personnel that live in that community or travel into that community — that may be one way to do it. We may, on the other hand, have to import personnel into that community if there are no trained personnel available. Or we may have to, in the final instance, train persons within that community to deal with that problem.

Those are some of my suggestions. Of course, there has to be an evaluation mechanism in place to make certain that this process is being carried through properly and to also be able to deal with some of the specific problems that will result when you go into developing and implementing a comprehensive system such as this. So those are my suggestions to the Minister; they are fairly simplistic. At any time I would be glad to discuss them in more detail but I don't want to take up the time of the committee in this regard, but I do hope that the government acts immediately to put in place a formal mechanism and a mechanism that will be accepted by the community, and the best way to ensure that it is accepted by the community is to make a community a part of developing it and providing them with the support services to implement it.

MR. JORGENSON: Mr. Chairman, I thank my honourable friend for those suggestions and perhaps they are timely in that this matter is currently being discussed with the Fisheries Department and the Health Department. Werecognize the problem that

exists and are anxious to find ways of overcoming it, but in the final analysis there are two points that I think are important.

The first is that we have to continue to depend upon the medical advice provided by the medical services we have in the province and up to this point they have not identified the problem as reaching the stage where it is a problem. This is not to say that we are unaware of the increasing levels that are being found, and to that end we are trying to identify the source. If there are continuing levels of mercury being found in fish, that mercury must be coming from somewhere, and up to this point we have been unable to determine precisely where its source is. Until we've done that, it's somewhat difficult to deal with the problem that is continuing, so we're hopeful that our continued research and studies into this matter will at least give us some idea of where the source is, and having once determined that, then we are in a better position to be able to take steps.

MR. COWAN: Mr. Chairperson, I'm glad the Minister corrected his statement that he made earlier in response to a question from the Member for The Pas, when he said that the increasing contamination was not related to industrial emissions, and that the phenomena is a natural one. Even at that point, if I heard him correctly, he indicated that was coming from the rocks. I was going to question him on that, as it is my understanding, as the Minister has indicated just now, that we do not know specifically what the source is yet, that there is some opinion that it may be a natural source, that it may be leeching out of the soil; that it may be as a result of the Hydro activity in the area, including the blasting of channels and the erosion of soil banks.

There is also a theory that it may be related to acid rainfall, which brings us back to that subject very briefly, and that when you do increase the acidity of the lakes you then tend to free up elements and substances that are in the water and that mercury contamination has been linked theoretically with acid rainfall. So that's another area that we should be very concerned with, and it's another detrimental impact of acid rainfall that we should direct our attention to. So it may not be linked directly to an industrial source such as a plant, such as a pulp and paper mill, but it may in fact also be indirectly linked through the airborne contaminations in specific acid rainfall. The fact is that we don't know exactly where it is coming from or why it is starting to appear now, or in fact if it had not appeared a long time ago and our awareness of the problem is increasing now.

So we have not identified the source, and I'm glad that is on the record. I would ask the Minister then to indicate what actions are being taken by his department right now to identify the source. Are there studies that are ongoing outside of the study that was tabled just the other day in the House? Is there a continuation of that? Are there teams in the field right now? Are there people within his department trying to either negate or support the theoretical considerations that it may be associated with acid rainfall, that it may be from leeching from the soil, etc.? I would ask the Minister if he could indicate exactly what activity is ongoing in regard to identifying the source.

MR. JORGENSEN: There will be continuing studies being undertaken all summer long. In addition to that, my Assistant Deputy, Mr. Bowman, is on the Ontario-Canada Study Board, on the Wabagoon system, so perhaps a great deal of the information that is available as a result of that study can be applicable in this area. So there is a continuing program attempting to determine the source, and once that has been done — and there are several theories as to what the source is, none of which have been proved out — we'll have to await further studies and further analysis to come to a firm conclusion, and perhaps even then there will not be a firm conclusion, perhaps it may be a combination of sources, and my honourable friend has mentioned a few of them.

We have placed additional provision in our budget for further laboratory analysis of this particular situation, and we are carrying on continuing co-operation and co-ordination with the federal government on this matter.

MR. COWAN: Mr. Chairperson, of course when dealing with a problem of this complexity and also this extent, we must continue to carry on our studies and we must attempt to determine the source. The fact is in the meanwhile, that the problem is appearing, and people in my own constituency have been advised to either restrict their diet of fish very severely or to restrict their diet of fish somewhat because they are starting to experience, according to tests performed on them, elevated levels of mercury in their own blood and hair.

We also know that certain areas are now off-limits to commercial fishing because of the mercury contamination. We know that fish are being turned back because of mercury contamination.

So I can only once again reiterate and re-emphasize, I hope that the Minister must in the meanwhile, implement formal warning mechanisms, so that these people who are in some sort of jeopardy as per instructions given to them, where we can anticipate that if they were to continue eating the fish, would be placing their health in some jeopardy, know full well it is why they are given a letter that says they must restrict their dietary intake of fish from their area. The fact that they're getting that letter implies that there is a serious problem, and I would only hope that in recognition of that fact, there would be a more formal mechanism put in place immediately to deal with the problem in the specific areas — and there aren't that many to my knowledge — where there is mercury contamination problem in the fish, but that in those communities specifically we start developing the program now.

Because if we are to believe the results that we have seen in the last number of years, and if we are to extrapolate them off into the future, we can only anticipate that the levels would get higher, in which case those programs will become necessary; it is better to put them in place now, allow them to be accepted by the community, and when the problem does become of a serious nature, serious enough to cause more concern than is presently shown, that we will be able then to have in place a mechanism that will deal with it effectively and will have already been accepted by the community and we don't have to go

through that process during the time when the levels are much more elevated than they are today.

I realize that is a hypothetical situation that may or may not come to pass, but we have to act on the basis of the best available evidence. And the best available evidence, I would hope the Minister would agree, would tend to indicate that the levels are increasing and that we are going to have to deal with that problem.

MR. JORGENSEN: As I have indicated to my honourable friend, there are discussions being held and will continue to be held between the health people and the Fisheries Branch, and his suggestions will certainly be taken into consideration.

MR. CHAIRMAN: The Member for St. George.

MR. BILLIE URUSKI: Thank you, Mr. Chairman. I'd like to ask the Minister, or at least bring to his attention some concerns that have been raised with me with respect to a chemical that has reportedly hazardous properties, that is, a chemical that is being used to defoliate shrubs in cattle pastures and the like and is being used within the province here particularly, that I've been made aware of. They could just have been sprayed along Hydro right-of-ways, along railway lines, and I believe some pasture clearing in the Interlake. The technical name, I believe, of the herbicide is 2,4,5-T and has sort of a trade name known as Agent Orange. I would like to raise with the Minister the concerns that have been expressed to me is that the properties of this chemical are such as to at least have brought the allegations that the herbicide, the residual effects of this chemical, are such that may have some cancer-causing properties in it, and how it is passed through to human beings is in the form where animals, primarily cattle, eat the grass and shrubs over the area that has been sprayed. The substance is transferred through the body through the bloodstream and into the milk and the meat, and thus carries on into human consumption. I'd like to ask the Minister specifically whether the department has recommended the continued use, whether this chemical is being used by the province in areas that are being sprayed either by hydro, or by the railways, or the departments dealing with pasture improvement and shrub control in the province, and if it has been used, to what extent has approval been given to the use of this and whether the department has been aware of this, and their views on this matter.

MR. JORGENSEN: Mr. Chairman, it is my honourable friend's phraseology that is one that perhaps I should try to correct. It isn't a question of the province authorizing or recommending its use; I've done neither. Canadian law provides that it is possible to use it, however, certain provinces have banned it. I might say, in that connection, that I am in the process of communicating with my colleagues in the various departments that do use the chemical — the Department of Agriculture; the Department of Energy, particularly Hydro; and other departments — advising them that it is our intention to ban the product and not to purchase any more of the stuff, so we won't be, hopefully, left with a material on our

hands that will be difficult to dispose of. It is our intention to effect a ban on 2,4,5-T.

MR. URUSKI: Mr. Chairman, I thank the Minister for that. Since it is the intention of the province to ban the use of this chemical, could the Minister tell me whether any departments are intending to use it in this year, whether they have purchased quantities? What are we going to do? Are we intending to allow them to use what is remaining and not purchase any more, or are we indicating we are banning it and that the departments and any Crown agencies that may use it cease and desist forthwith? What is the policy of the government in this respect?

MR. JORGENSEN: Our communication with the various departments is an effort to determine just what stocks of the material that they have on hand at the present time. At the moment, I don't know. I might also say in this connection that there is some controversy over the use of the chemical, but we are taking the position that it should be banned, and I hope that in my communications with the various departments that are concerned that we can have some idea as to what extent we have the product on our hands at the present time.

MR. URUSKI: Could the Minister indicate that his department and his government is indicating that the chemical should be banned? To what extent have he and his officials been guided on the basis of deliberations or findings of other provinces? They must have based their reasoning to ban because, as he has indicated, there has been some controversy in this respect. Could he indicate to us what was the basis and the arguments that persuaded he and his department to go along with the bans that have taken place?

MR. JORGENSEN: If there's any question at all about the advisability of using the chemical, and there appears to be, in view of the controversy that exists, and if there are alternatives available that are not alleged to be harmful, then we naturally would want to play it on the safe side and recommend or authorize the use of chemicals that do not have the difficulties that we appear to be facing with 2,4,5-T. My understanding is that there are chemicals that are available that do equally as good a job without the dangers that appear to be inherent in 2,4,5-T. That, to me, is a simple method of arriving at a conclusion.

MR. URUSKI: Mr. Chairman, I'd like to ask the Minister then, has this announcement gone out publicly in the province of Manitoba — I'm not aware that it has — to notify purchasers and farmers who may be wanting to do, or thinking of doing pasture defoliation. The time is coming — in the months of July, August and September, and now, is when the leaves are coming out and spraying will be done. If we are intending to ban it, is the Minister prepared to make an announcement and indicate that this chemical should be taken off the shelves, and farmers should not be purchasing this chemical due to the controversy that has arisen, so the dangers that may inherent in this chemical should not be spread, and giving the farmers advice, I believe,

through the Department of Agriculture on the alternative chemicals that are available which are — what one can say — more safe in terms of their use.

MR. JORGENSEN: Mr. Chairman, that essentially is the purpose of my letters to the various departments, in particular the Department of Agriculture; we will be asking for their co-operation in getting the message through to the farmers that we are going to be recommending the banning of 2,4,5-T.

MR. URUSKI: As well, Mr. Chairman, can the Minister assure us that the departments that may have some supplies on hand will not use the remainder of that chemical this year, and will return the chemical, in view of the problems that may be associated with it, if there are any. I know the Minister has indicated he's not sure. He is going to write them and tell them that it is their intention to ban it but, Mr. Chairman, in the event — and I'm not sure what the supplies are within governmental agencies, whether or not we should be saying, look, do not use the chemical, we are banning the chemical forthwith and we recommend — not only recommend, the government policy indicates that this chemical not be used. You either do not use it, return it to the manufacturer and that's it, or else we find a way of disposing of the chemical in a safe way and not use it.

MR. JORGENSEN: My honourable friend has put his finger on a rather touchy problem that the Environmental Minister in Ontario was faced with a short while ago. I don't want to get myself into that kind of a mess.

The quantities that are used in Manitoba are minimal and we're hopeful that by warning various departments now, that they will not purchase additional quantities. We assume that there isn't a great deal of it on hand right now. But I hope that when the time comes that we have to dispose of it one way or another, that my honourable friend is not going to be one of those who then is going to object to the method of disposal because the difficulty that the Ontario Minister found himself in was one for which he found no solution. There is, to my knowledge at the moment, no method in this country yet for disposal of hazardous wastes. That's something that we're hoping to accomplish. So the problem becomes more difficult when you realize that no matter how you try to dispose of it, there are going to be problems.

MR. URUSKI: Well, Mr. Chairman, that brings me to another question. I think the Minister said there may be quite large quantities of the chemical in the province . . .

MR. JORGENSEN: No, I said quite the contrary.

MR. URUSKI: Quite the contrary, very minimal.

MR. JORGENSEN: Yes, that is my expectation. Now, that will not be confirmed until I have responses from the various departments.

MR. URUSKI: Okay. I would hope, Mr. Chairman, that in view of this that the chemical is withheld, that the agencies do not if the Minister indicates the likelihood of a problem with it. But it brings me to a more — and maybe it's something that, maybe I'm naive in suggesting it, but in terms of representations made to national testing agencies or the approving agencies for allowing chemicals such as these on the market, whether or not in the research and development of these chemicals, whether at that point in time before the chemicals are, or during the process of development, whether or not equally to be undertaken by the chemical companies, a method of disposal or dilution in some way, to make the chemicals harmless, is included as part of the research and development program. It's fine to mix chemicals together to know what the effects will be of what you will get out of the manufacturer. But, as the Minister says, we don't know what to do with it once we've got it, whether or not it should be incumbent on the manufacturers and the developers of the chemical that a process of being able to develop a process whereby chemicals can be rendered harmless or less harmless in a way that they would not pose the threats that sort of are posed today in terms of disposal.

If there's a problem with the chemical, this one here, and it appears there is because we're going to ban it, do we ban it by saying, well, we'll use up what we've got now and then we won't buy any more, whereby we may be adding even more to the problem than by just saying, all right, let's hang on to it until a safe method of disposal is found. What is the more likely way of handling this and whether some pressure can be put on by the provinces to do as I've suggested; or maybe that's already being done in this area?

MR. JORGENSEN: That is being done. But my honourable friend probably is aware that our own plant products division have not condemned the chemical, that is our federal plant products division. They still declare that the chemical is relatively safe. It is the American authorities that have declared or banned its use. If it's used properly there are relatively minor hazards associated with its use. As in the use of most chemicals, it is not so much the use of a chemical as it is the abuse of a chemical, whether that be right on the household level, or a farm level, or the commercial level. That has a tendency to create problems.

I wouldn't be personally, unless I received advice to the contrary, I wouldn't be too unduly concerned about using up the stocks that we have in here as long as I had the assurance that it was being used properly and that its use was not abused. Even though I am thinking in terms of having the product banned, it is more because of the possible abuse of the use of the chemical rather than the use of the chemical, that I have that concern. So how we will dispose of the remaining stocks that have to be on hand — and I'm hopeful that they're not that great — is something yet to be determined. But I don't want to place myself in the position of having the material on hand and no way of disposing of it. Perhaps at the present time the best way of disposing of it, is to use it and use it very carefully and in areas where it cannot be harmful.

MR. URUSKI: Yes, Mr. Chairman. In the Minister's announcement, what impact will it have on the commercial stocks that may be available to farmers and the like in the province? What will happen? How should farmers be guided by any announcement that the Minister makes of stocks where he has direct control, or at least he as part of the government has direct control from within? What about the commercial use of it primarily by farmers, I would think, in the province of Manitoba? The other agencies of course would be the railways and the other would be either telephone or hydro, primarily hydro in commercial uses, and the Department of Agriculture, which are directly or indirectly under the specific jurisdiction of the executive council, or the Minister or his colleagues.

MR. JORGENSEN: Well, Mr. Chairman, my honourable friend continues to refer to farmers as being major users of this chemical.

MR. URUSKI: No, no.

MR. JORGENSEN: That is not the case. It is used primarily on a commercial basis. I don't think too many farmers use this material. So there wouldn't be that great concern about the farmers having stocks of it on hand. If there are stocks it probably would be in commercial hands, or perhaps the Highways Department. The hydro may have some on hand. But I hesitate to hazard a guess as to what stocks may be on hand. It's total use in the province is relatively small.

MR. CHAIRMAN: 5.(c) — the Member for Churchill.

MR. COWAN: Yes, thank you, Mr. Chairperson. Well, the Minister says that its use is relatively small and there's probably not too much disagreement with that. And the Minister has indicated that it is the intention of the province to ban the use of the substance because of the controversial studies that have revolved around the use of the substance, yet the Minister does not impose a ban immediately. The Minister gives us as a reason for not following that course of action, the fact that that might leave us with caches of this substance in the province either, in government hands or in industry hands primarily, perhaps there might be some in farmers' hands, although that would be of a minimal amount if it was. But the fact is, that if it is a substance that is hazardous, or suspected of being hazardous to the extent that the Minister intends to impose a ban on it — and we do commend that action — then it is also a substance that should be banned immediately; and that we should then either have to store it in suitable places, which we have done with other hazardous chemicals and substances, or I think the Member for St. George provided us with an alternative method and that is to ship it back to the manufacturer. If the manufacturer has the facilities to manufacture it, then the manufacturer should also have the facilities to dispose of it, and that would be another course of action.

So it is our hope, I believe I speak for the Member for St. George and myself, that that ban be put into effect immediately; and that there be found some way to either store or remove the substance from the

province. But it is not enough — as a matter of fact it's somewhat contradictory to say that you are going to ban it in the future but you're going to allow stocks of it to be used. You're putting it into the environment and you're putting a very highly suspected hazardous product into the environment and yet at the same time you say we're not going to allow it to be put into the environment after such and such a date and we don't have that date yet. So it is a contradictory approach to the whole problem.

I would ask the Minister if he could comment on that and if we can convince him to look into the possibility of returning that substance to the manufacturer, or having it returned to the manufacturer, where the manufacturer would then have facilities to deal with it because they are in the process of bringing it onstream and into industrial use in the first place.

MR. JORGENSEN: Mr. Chairman, first of all, I think I should repeat what I told my honourable friend from St. George, and I'm not sure whether the member was here when I said that, there isn't that great a health hazard if the chemical is used properly, that is, used according to the directions that come with the material. In the province of Manitoba, we have been unable to find a health problem over the years that it has been used in this province, so that would confirm my original statement.

My suggestion that I intend to ban it is my suggestion, and in order to arrive at a conclusion I am attempting to determine to what extent it is being used. My preliminary figures, which I don't think can be considered as firm figures, is that it is rather minimal.

We do want to make sure that there is sufficient warning, and that's one reason why I would like that information to get out now that there is a possibility that the product, we may discontinue its use in this province, so that further stocks will not be ordered. I wouldn't have any great difficulty in using up the present stocks as a means of disposing of it, in spite of the fact that that may cause some controversy, as it did in Ontario, first of all because, as I said, used properly it does not pose the hazard that some people claim it does and since our Plant Products Division in Manitoba have not recommended its discontinuance, we feel that perhaps the one way we can handle the problem is first of all indicating that we intend to ban it, and discourage any further purchases of the material. It doesn't matter which way you approach this subject. If you ban it immediately and have the product on your hands, then you're going to have the problem of disposing of it and there may be some worse hazards attached to that method, because then it may be disposed of in ways that may not be as satisfactory, may not be as carefully regulated, may not be as safe. So it's one of those situations that occur from time to time, it doesn't matter what you do, you're going to be wrong.

MR. COWAN: Thank you, Mr. Chairperson. Well, I disagree with the Minister that it doesn't matter what you do, you're going to be wrong and I've commended him and I'm certain the Member for St. George did also, on his announcement that it was

going to be banned. I now question whether that was an announcement or not because we seem to have the Minister clarifying his earlier remarks and saying that he now wants the knowledge out that there is, and this is his quote a possibility that we may discontinue the use of this substance in the future and that's a far cry from the original statement the Minister made and that, if I heard him correctly, was that we intend to ban the use of this substance.

It seems to me that when the Minister says no matter which way you handle it you're going to be wrong, he is not taking into consideration the knowledge and the experiences of our sister provinces and our sister nation to the south in regard to the substance.

He is partially right in that statement — if you handle this problem or situation incorrectly you're going to be wrong — but there is a correct way I believe to handle this situation and that is to place in effect the ban immediately. That's the first step. If you are going to ban it and you say you are intending, you're giving an announcement that you intend to ban it so that no more supplies come into the province, so that people know that announcement and then begin to discontinue the use on their own, you are only approaching the situation or the problem in a haphazard manner. You are still allowing them the opportunity to import it, you are still allowing them the opportunity to buy further supplies, you are still allowing them the opportunity to dispose of what they have in any way they see fit. So what you have done is you have told them, you intend to ban it, there's a possibility the use might be discontinued, but allowed them the opportunity to continue using it. Either you want it out of the province or you don't want it out of the province and you have to take some strong, firm action, and I know the Minister is capable of strong, firm action when he believes it to be necessary. I believe that in spite of the fact that we have, as the Minister said, been unable to find a health problem in the province of Manitoba in reference to the use of this substance, the fact is that health problems have been associated with this substance in other provinces and in other jurisdictions and they have taken very strong action and very immediate action in order to deal with those problems. The fact that we have been unable to find them in Manitoba does not mean that they do not exist, it does not mean that further use of it in any quantities will exasperate those health hazards if they are present, and it does not mean that health hazards are not inherent in the use of this substance. It just means we have not found them, that could be we have not been looking in the right place, that could be we have been looking but we have overlooked them, that could be that we have not been looking hard enough or that could be that the effects are so subtle that they will not make themselves apparent for a number of years, in which case we would not expect to find them now, even though there is a health hazard now.

So I would hope that the Minister, and I can only encourage the Minister to follow up on his original intention as I had perceived it, that is impose a ban, impose it immediately, call in the substances, review mechanisms to dispose or store those substances, and I would highly recommend to the Minister the mechanism of returning the substance to the

manufacturer, who must have proper facilities to store it if they are manufacturing it in the first place. I am not certain of the manufacturer of this, but I would believe that if they are a good corporate citizen that they would be only too willing to take that substance back in light of the Minister's reservations about its use. I would hope that he would approach them. I believe it is incumbent upon him to ban the substance now, to restrict its use, restrict its importation, and to follow up on the suggestion of the Member for St. George and try to return such substance, and we are not talking about large quantities, if the Minister's predictions are correct, to return that substance to the manufacturer.

MR. JORGENSEN: Mr. Chairman, the decision as to how the matter will be handled is yet to be made. I have outlined to my honourable friend some of the courses of action that could be taken and some of the consequences. I am pleased to have his suggestions and we will be taking them into consideration when a final decision is made on the subject.

MR. URUSKI: Mr. Chairman, I would just like to get clear in my own mind what the Minister's position actually is, because as the Member for Churchill questioned the Minister and the Minister has made two statements. He said that it our intention to ban the use of the chemical and then he kind of drew away from that. I would like the Minister to clarify for me, so that I'd understand him very clearly, what his intentions are with respect to the questions I have raised. Are you intending to ban it at the present time, and notify the departments, or what is the position that you are taking in this?

MR. DEPUTY CHAIRMAN: I think I should make it clear to my honourable friend that I stated my position and pending information that comes from the other departments, a final decision will have to be made. It is my intention to recommend its banning, but the method whereby that ban will take place is another matter and that is still up in the air. I am awaiting information from other departments before recommending to Cabinet just precisely the course of action we will take.

MR. URUSKI: Mr. Chairman, that leaves me a bit puzzled. I would like to know what difference it will have in terms of the Minister determining whether the chemical should be banned or not, based on the advice that he is to receive from the other departments, information from the other departments on what? On what stocks are being held? Okay, the Minister indicated and he told us that he is in a bit of dilemma whether to continue to allow the spraying in a way of disposing of the chemical, which we have indicated that that may be the, not may be, that because of the controversy the spraying should be discontinued, and if he indicates that there is very minimal use and stocks within the province, then there should be very little difficulty of him just coming right out and saying that since the chemical is not widely used that the financial implications - and I am sure, I asked the Minister whether that is the consideration that he has in mind, if it is the

financial implications and if there are such low stocks as he believes there are to be, then they would not be that great in terms of how much money would have to be spent or misspent if one could use that accusation by withdrawing the chemical from its use within the province.

I clearly or distinctly got the impression from the Minister that he was in favour of banning it, but now he is saying, well look, when I know how much of it there is, then I will decide whether to ban it or not. Is that the guiding factor that the Minister will use as to how much we have got, whether a substance is to be banned or not? Because if that is the case, then, Mr. Chairman, I believe we really don't know what we are doing, if that is going to be the guiding light. If there is a controversy and it has been banned by our neighbours in the south, where the chemical, I believe, was developed, and they have over the years been able to determine that there have been health hazards. I believe it has been determined in the spraying, at least the commentary that comes from reports in the Vietnam war, the hundreds of thousands of acres of forest that were sprayed in that country and the hazards that resulted from it. There were other areas that this chemical was used to spray, and I believe those were some of the determining factors that caused the US Government to ban the chemical.

The Minister agrees that there is a controversy. He agrees that he would rather go on the side of banning for the sake - even though he himself hasn't got conclusive evidence that it is dangerous, but he believes that there is enough evidence to warrant at least a serious holdback of the use of the chemical. If that is the case, then what is his reluctance to say, look, hold it, I am the Minister responsible for the Environment, it is my jurisdiction. Until I am satisfied that this chemical can either be used I will impose the ban on it, irrespective of the stocks that are available to government and then recommend to the users, to the non-governmental users, that they withhold purchasing any future amounts of chemical and in fact notify the distributors of it that they no longer should be putting in on the market at all, even with the stocks that they maintain within the warehouses today.

MR. JORGENSEN: As my honourable friend has said, there is no impeccable data that will tell us whether or not the chemical is dangerous; that still remains an area of doubt. And in the absence of firm confirmation that the chemical is hazardous or dangerous, I simply want to act on the side of caution. If there are alternatives available, which I believe there are, then a warning to the users at the present time that they should seek alternatives. I think perhaps it is timely and at the moment I have no hesitation in making the statement that there is a possibility that the product may be banned, and I make that statement now in the hope that there will be no further product brought into the country, or that the users will not be purchasing additional stocks of it.

I have no great fears about using it properly, because there is no evidence in the province in the past that it has been harmful in any way. So rather than create a situation where I create the impression

that there is great dangers in its use, which I don't want to do because I have no data to back that up. I simply am attempting to act on the side of the caution in warning users that it would be preferable if they would purchase stocks of other material rather than 2,4,5-T.

MR. DEPUTY CHAIRMAN: The Member for Churchill.

MR. COWAN: Thank you, Mr. Chairperson. The Minister says that there is no impeccable evidence that this is a hazardous chemical or that it is a chemical that is dangerous when used properly. I would ask the Minister if there was any impeccable evidence that this is not a dangerous chemical or that there is not the potentiality of either misuse or if there is not the potentiality of hazards being part of the process even when this chemical is properly used.

MR. JORGENSEN: To the best of my knowledge, there is no firm evidence or impeccable evidence either way.

MR. COWAN: There certainly is a controversy then, and I believe those were the Minister's words that he had used earlier.

I would ask the Minister then, when a situation such as this arises, whereby there is no impeccable evidence that a substance is not dangerous and there is a strong suggestion that a substance is dangerous, and, as the Minister indicates, in our own province we do not believe it to be a substance that is widely used, therefore the recall mechanisms would not have to be extensive, they would only have to be complete.

Does the Minister not believe, and in acting on the side of caution, that it would be better to ban the substance, a substance he has already indicated he does not want to see imported into the province, that he does not wish to see used extensively in the province, and a substance that we know there is considerable controversy surrounding its use and its effect on human beings as well as animals, would it not be better if the Minister is going to err in this instance — and he was the one who suggested earlier that, no matter what he did, he was going to be wrong in this instance, and I believe what he was saying is, no matter what he did, there were going to be different groups that perceived him as being wrong — so if he is going to be perceived as being in error in this instance, and also in light of the considerations that he has to take into account in regards to protecting the environment, protecting the safety of people, protecting the health of people, and also the great responsibility that he has as Minister of the Environment, would it not be better for him to err on the side of safety?

Would it not be better for him, if he is going to take steps, to take positive steps, to discontinue the use immediately, to stop the importation immediately of this substance, and to make certain that this substance is not used in the province in any way, whether it be properly or improperly — and the Minister has no assurances that the users of this substance are using it properly in all instances, although we can probably make the assumption that

they are generally using it properly. We can't ensure that they are going to use it properly in all instances, although we can probably make the assumption that they are generally using it properly. We can't ensure that they are going to use it properly in all instances.

With all those considerations, and if he has to take action, would it not be better to take positive strong firm action, and if there is an error, it is an error that will in fact benefit Manitobans. It is an error that will in fact be of benefit to the environment, and it is an error for which the Minister will be far more likely to be forgiven than an error in judgement on the other side, and that is, if there were significant health problems that might not show up for some time and the Minister had the opportunity and the inclination to ban it and did not go as far as perhaps he could have or should have.

MR. JORGENSEN: Mr. Chairman, it's very difficult to refute the argument that has been placed forward by my honourable friend, and I can assure him that when a recommendation is made, I'll certainly take that into consideration.

MR. COWAN: I would ask the Minister then, and perhaps he answered the question before when I was out of the room very briefly, but I'd ask him if this substance is being sprayed now, if it's being used now. If not, when would he expect it to be used next in the province?

MR. JORGENSEN: I can't answer that question, because I don't know. That's one of the reasons I have communicated with my colleagues in the various departments. My suspicion is that it is not being used, and more particularly in the light of the rather dry weather conditions we have, that it would be some time before stocks would be accumulated and its use would be common for that chemical or substitute, whichever, so there is still time I believe to effect a program that can be, I hope, acceptable to my honourable friend.

MR. COWAN: I would ask the Minister then when we could expect a firm decision. He says that he has to consult with the other departments and seek advice. That of course is the proper action to take, and it can be in some instances a speedy action, and in some instances not be a speedy action. As it is of considerable importance that we stop further importation, it would be my hope that would be a very speedy action, and that if a ban were to follow that it would come in the next couple of weeks, so as to ensure that people were not stocking such a substance for use later on in the season.

MR. JORGENSEN: I'm hopeful that I'll have responses from my colleagues in a very short time in order to be able to determine just to what extent the product is on hand and other information that is being sought.

MR. COWAN: One final question on this from myself — and I'm not certain whether the Member for St. George has others — can the Minister inform us as to how he has publicized this, and I can only refer it to a half-ban, on the use of this substance in the province? Is this the first indication that the

public have of such a ban, or have letters gone out to suspected users? Have letters gone out to the departments? Has there been a general announcement or advertisement in the paper suggesting that such an importation would be banned in the future, that the use will be banned in the future? Because if it has not, then I'm even more skeptical of the impact of the Minister's efforts — and I know he's trying very hard to deal with this problem — and could only suggest that if he is going to make this knowledge public, that he go all the way to making it public and make certain that every suspected or potential or possible user is made fully aware of the Minister's concerns, of the concerns of other jurisdictions, and that this information is provided to them in no uncertain terms, that there may well be a ban in the very near future. That's by way of clarification, Mr. Chairperson, that's a second option which I suggest. The first option of course is a full-scale ban.

MR. JORGENSON: Mr. Chairman, I suspect that after today there will be fairly wide knowledge of the recommendation that I have made.

MR. CHAIRMAN: I believe the clock up here is about two-and-a-half minutes slow, so I may declare it 12:30 in the event there is Private Members' Hour. I'm leaving the Chair to Private Members' Hour, because our clocks here are right on 12:30 even though that clock isn't quite there.

Committee rise.

SUPPLY — HEALTH

MR. CHAIRMAN, Abe Kovnats (Radisson): This committee will come to order. I would direct the honourable members' attention to Page 61 of the Main Estimates, Department of Health, Resolution No. 79, Clause 5. Manitoba Health Services Commission, Item (c) Hospital Program—pass — the Honourable Member for St. Johns.

MR. SAUL CHERNIACK: Mr. Chairman, the Item (c) is not printed, is it?

MR. CHAIRMAN: It's the third . . .

MR. CHERNIACK: The third, yes, thank you. Mr. Chairman, I'd like to make some comments about hospitals, the use of hospitals, and the role of the professional involved. That means, Mr. Chairman, I want to talk about the role of the medical services as it can or should be provided through the hospital. Mr. Chairman, part of the reason and I want to speak about this is the way the Minister spoke yesterday in reacting to what was said from this side and reacting to this side's reaction to what he had said, where he was I believe carried away — I'd like to think he was carried away — when he interpreted what was said in relation to the profit motive and the operation of personal care homes attempting to put words in the mouth of my Leader and suggesting that we would like to have doctors work at minimum wage. I think he was carried away but that's part of the danger of the way this Minister makes his speeches, that he makes these broad statements

and gets the use of his wording and phrasing as such as to distort what he is interpreting others said. I will yet deal, under his Salary, with his statements about what I had said on the Dental Care Program when he spoke during my absence a week ago Thursday night.

The reason I mention this, Mr. Chairman, is that I believe, firstly, that members of the medical profession are people who are dedicated to care about the health concerns of Manitoba, who are dedicated to serve the public in that sense, and who are not motivated by the desire for profit. I say that because the Minister last night just waxed eloquent, suggesting that everybody is in business for profit and mentioned that doctors were as well. That's absolute nonsense, Mr. Chairman. I think it's a distortion, a complete distortion, of the role — (Interjection)— pardon. Yes, Mr. Chairman, he says it's what he did not say. That's not correct either, Mr. Chairman. Yesterday, — he was talking about — Mr. Chairman, the Minister loves to speak and I occasionally like to hear him speak, but I do not care to hear him speak from his seat.

So, Mr. Chairman, he is now complaining about what I'm reporting about him when I am standing up complaining about what he said about us. Will he deny that he suggested that we wanted doctors to work at minimum wage? Will he deny that from his seat? —(Interjection)— You see, Mr. Chairman, he said that what my Leader said, equate it to that and that is complete and absolute nonsense, and the Minister must keep quiet on occasion. I don't mind his interruption on occasion; I've had that before and I've interrupted before but I have to invite him to settle down and listen and if he has something to say, by all means, all he has to do is wave a finger at me and I will listen to what he says, even from his seat, if it's not irrational and if it's not intemperate.

Mr. Chairman, he equated, and I started by what I was saying that his method of distortion is most dangerous, that he is a dangerous person in that respect. He listened to what the Leader of the Opposition said and he then drew an equation — I suppose an algebraic formula which is in his mind — and decided that what was said by the Leader of the Opposition equated to, that's his word, equated to expecting doctors to work for the minimum wage.

What I am saying, Mr. Chairman, when it was read out to him that the definition of profit is the benefits that people expect to derive from taking risks, and that we do not think that the profit motive belongs in the delivery of health services and, that when government — his government — guarantees all the expenses of the operation of a personal care home, privately owned, that there is no risk involved, he was almost crying yesterday on behalf of the people who have to borrow money at rates higher than the non-proprietary homes are able to borrow through the CMHC, practically crying on their behalf. The fact is this Minister has assured them that they will get a payment out of the tax moneys of this province that would enable them to have no risk at all on the operations. He then talked about the need to equate the two, that is, the role of the . . .

MR. CHAIRMAN: Order please. If I could just interrupt for one moment. To the honourable member, I realize that the Health Department is a

very broad department to be discussing, but the item under discussion is the Hospital Program, and I know that there are doctors and nursing homes that are associated with hospitals, but I would hope that maybe we could be more specific in the Hospital Program that is a very specific item, and if there is any more discussion on personal care homes, as the honourable member did suggest, that it could be discussed under Minister's Salary.

The Honourable Member for St. Johns.

MR. CHERNIACK: Mr. Chairman, I commenced my discussion by saying, I want to deal with hospitals and the role of the professions as they relate to the delivery of service through the hospitals. And Mr. Chairman, I don't know a better analogy I can bring forward, including what must be burning in your mind from last night, the discussion of the relative differences between proprietary and non-proprietary personal care homes. I am going to talk about hospitals, and the way they deliver a health service, and whether they ought to be privately owned or publicly owned, and that's why I introduced it, Mr. Chairman.

MR. CHAIRMAN: . . . that he was out of order, I just made the suggestion that we could probably be more specific, and I do follow the line of questioning.

MR. CHERNIACK: Thank you. I appreciate your point, Mr. Chairman, and I will develop that, because I feel that it is necessary to recognize the role of the profit-oriented industry in health and the non-profit oriented industry, and the reason I say that is that I believe, and I premised it by saying, and I did say, that I believe that the medical profession is not out for profit, there is no risk involved in their enterprise, they are there to serve the public. And he brought up his son yesterday, he said, my son is in medical school, and he, of course, expects to be paid and well paid for his services. Mr. Chairman, there is no doubt in the world that anybody who offers his services should be paid and well paid for his services. And there is no doubt in the world that when a teacher, knowing full well that that teacher is going to be part of the educational system wants to be paid as well as possible for the services the teacher provides, but there is no profit in that, no profit motive, and there certainly isn't, I would guess in the Minister's son, who is preparing to take his role in the medical profession.

And it is a distortion and a deliberate one to attempt to again, deal with confrontation between doctors, between practitioners in the health profession, and the New Democratic Party. There may well be frequent confrontations between governments of all stripes and the associations of professionals, and that's quite a different thing. We've seen that happen in Conservative Alberta, we've seen that happen in Conservative Ontario, we've seen that happen in almost — I think every province in Canada, and I think we've seen it happen between the Conservative Manitoba government and certain professions. But that does not mean that the members of those professions, in their work, in their daily endeavour, are motivated by profit desires, or motivated to take more out of the public purse than is a proper return for their services.

And I make that presentation, Mr. Chairman, because I think that we do not resent doctors, nurses, and all the people who work within the hospital environment, from obtaining proper and adequate compensation for the effort they put in, for the dedication they put in, and for the time they put in, because it is clear to anybody who knows people working in the health field that their dedication and their time is normally greater than other people in the work force.

Having said that, Mr. Chairman, and having tried, to some extent to clarify to the Minister that it is a distortion and a false distortion and probably a deliberate one, when he tries to suggest that anyone on this side wants to undermine the remuneration payable in a proper way to anybody in the health field, especially when he suggests that we want doctors to work for minimum wage. That was a childish statement to make and one which does not add to the level of the debate we are conducting.

It seems to me, Mr. Chairman, that we have to recognize that in Manitoba, our hospitals are supported out of tax funds, supported by the people. It is fortunate that we do not have hospitals operated for profit in Manitoba. I have had occasion to hear a report of the son of a cousin of ours, who went to the United States to continue his advanced studies there, his post-graduate studies, but because of the time frame, became employed temporarily in a hospital, and he was put in charge of an emergency ward in a hospital. The emergency ward was operated by a profit-making, privately-owned corporation which rented the facility from the hospital. So the operation was separate. The hospital was privately owned, profit oriented, and this young doctor was made the chief of the emergency ward. And after a few months he was called on to the carpet by the landlord, the owner of the hospital, the company which owned the hospital complained that statistically their experience was that some 20 percent of patients that came to emergency ended up in the hospital, and that in the case of this doctor's practice, something substantially fewer than 10 percent of the patients coming to the emergency ended up in hospital, and they complained that they were not getting their proper share of hospital intake that should come through that emergency ward.

And when he said he was not going to change his standard of practice in that regard and would not send people in larger numbers into the hospital, he was already in trouble. Because the next complaint he received was from his own employer, who said that their experience was that out of a certain number of attendances of people coming into the emergency ward, there was a certain proportion of lab tests required, X-rays required, and other facilities required, and that the failure of this young doctor to send these people for these additional tests impinged on their ability to pay him the high salary they were paying him, and they suggested to him, rather clearly, that he had to be ordering more tests and more facilities in order to increase their revenue, out of which they had to pay his expenses.

And the result of this confrontation was that this young man was transferred to another hospital 40 miles away from his home, and at a reduced salary, and finally ended up working for a teaching hospital, publicly owned, where his standard of practice was

such that he could continue to work with pride. And I should refer, in passing, to, was it four doctors, recently, who came back to Manitoba from the southern States, saying that the money was good and the recreation was great, but the standard of practice was abominable.

I mention that, Mr. Chairman, because I think it is important that we, firstly, give proper credit to those who administer to the health services of the province and secondly, to recognize the dangers involved in the profit motive as it applies to the health field, and the fortunate position we have that we do not have that in the hospitals in Manitoba, and that hospitals here operate on the basis of the need to provide care and operate under the constrictions imposed by government on the moneys available to the hospitals to operate. That of course would take us to the area of adequacy of support by the provincial government and the restraint program about which I do not want to deal at this stage, Mr. Chairman.

What I want to talk about is the role of the doctor, the nurse and the other professionals and paraprofessionals that use the hospitals, and I underline that the hospitals are provided by the citizens, the taxpayers of Manitoba; paid for by the taxpayers of Manitoba, as is the education to a very large extent of the professionals before they come in to provide service to Manitobans. I feel that it has to be recognized that the hospitals are built for patients. The hospitals are built in order to provide health services. I question whether the medical profession and the other professions that serve in the hospitals are sufficiently involved in the administration of the hospitals and in the practices that take place within the hospitals.

I have had limited experience with hospital operation. I was a member of the board of what was then the Winnipeg General Hospital for a short period of time long ago. I felt then that the hospital was being run administrators and by the board and that the doctor input was not very much in the sense of budgeting and the sense of responsibility for checking on the practice within the hospital beyond that limited to the actual delivery of service by the doctor.

The reason I mention this, Mr. Chairman, is that a great deal of publicity takes place every time the doctors negotiate for an increase in the fee schedule, and actually what is not recognized is that the costs of health delivery are rising so rapidly and are so great that they really are a threat to the delivery itself. And the people who can best control the cost, I believe, are the members of the medical profession, and I think they have to be involved in the defining of the cost and the means by which they have to be able to reduce the costs of health delivery. The greatest cost, I believe, is in the hospitals. The greatest cost is in the beds that are not being used as productively as they should be within the hospitals, and I think the medical profession should be involved in a much greater degree than they are now in reviewing the costs involved and in attempting to reduce the costs. I don't believe that there should be as great a quarrel as to what the doctor takes home after a day's work. There's no question that he should receive a good return for his dedication and service, his years of training. But he

must himself become very much involved in keeping down and rationalizing the costs within the hospital.

I think that this Minister who has attempted to give the impression that his liaison with the profession has been such as to improve the climate, the atmosphere as between government and doctors must go further and see to it that the doctors are involved in a day-to-day consultation, not just on the standard of service but also on the question of savings that can be effected within the hospitals where the biggest costs are.

I remind you, Mr. Chairman, that throughout this continent there was a great deal of debate and discussion on whether doctors should be enabled to prescribe specific drugs by trade name or whether they would be required to prescribe the drug with the requirement that the pharmacist should substitute for a cheaper drug of the same formula, and there was a great resentment of the thought they could be instructed that they had to use the cheaper drug, the one that costs less on the market, but that's been accepted. By the same token I think the doctors have to recognize that in the use of the hospitals they must make sure to have the patient in for the shortest period of time, that they do not order tests, lab services and others which are abnormally costly unless it was part of the necessity for the particular patient, so that they too have a responsibility for the cost of delivery of the service at the hospital level. This is not a statement that I have found popular amongst doctors. I found many doctors saying my job is to practise the highest level of medicine, your job is to find the money to finance that.

I tell you, Mr. Chairman, I do not believe that administrators or boards of volunteer directors have the expertise and have the ability to be able to do what doctors are best able to do and I think that should be an important part of their role. I don't think they should exclude themselves or be excluded from that kind of investigative services, that kind of budgetary provision and that kind of self-discipline because there is no doubt that the tissue committees in hospitals are making a very great contribution to providing a better use of the hospitals than would have been provided when they were not so much use. The overview by doctors themselves of the standards of practice within the hospitals has, I believe, made a great contribution to the services within the hospitals.

I would like to see more of it and if this Minister has established a great rapport, by all means he should encourage more and more of the involvement of the medical profession in the delivery of the service at the hospital level because that is where I believe greater savings can be achieved than can be by block grants to hospitals, where one could look at care taking services being reduced; where one can look for savings in the food side; one could look for savings in the laundry side; one has to look for saving in that field in which the doctors operate and that field only the doctors can deal with much better than can the administrators.

In conclusion, or in summary, I believe that the medical profession and the nursing profession and the other professionals and paraprofessionals should be much more involved in the budgeting process, in the evaluation process of the cost of delivery within

the hospital, and in order to be able to see to it that the tax dollars used in the health services field are better directed firstly and primarily for the care of the public of Manitoba and in its interest, and secondly to bring in a better balance to give to these professionals, all of them, a return for their services that is commensurate with the effort and dedication they give to the community.

MR. CHAIRMAN: If I could just interrupt for one moment, I would like to point out we have some visitors in the gallery and I would direct the honourable members' attention to the gallery on my left where we have 20 visitors of Grade 4 to 9 standing from the Churchill School at Pikwitonei. This school is in the constituency of the Honourable Minister of Labour and is under the direction of Mr. B. Constable. Bien venue a la Legislature de Manitoba. On behalf of all of the members here, we welcome you this morning.

Item (c)—pass; Item (d) Medical Program—pass — the Honourable Member for St. Boniface.

MR. LAURENT L. DESJARDINS: Mr. Chairman, we're still on Hospitals. There was a statement made, and we were wondering if the Minister of Health was interested in speaking at this time. Mr. Chairman, there is something, and I guess I could speak on a point of order or of privilege. We just finished Personal Care yesterday. We have asked certain questions that weren't answered and, again, there is quite an article in today's paper of things that were said outside of the House. This is just while we are discussing this question that we have asked, and it is the style of the Minister then to go outside of the House, give some information and make all kinds of accusations when no one can answer.

I wonder if we are going to have the same setup, the same situation here. There were certain questions that were asked yesterday, for instance, the percentage increase for personal care beds, or personal care homes, the current percentage increase in their budget. That was one of the things that wasn't given, Mr. Chairman.

MR. CHAIRMAN: The Honourable Minister.

MR. SHERMAN: Mr. Chairman, on a point of privilege, the Honourable Member for St. Boniface catches me somewhat by surprise, because I haven't seen the article, and I will certainly check it. Certainly, when we finished last night around 11:30 or whatever time it was, there were some representatives of the media who asked me some questions. One or two were related to the situation at the Golden Door, and the other questions were related to the debate and the examination that we had on the reasonability, or lack of reasonability, of admitting propriety operators into the personal care home field. I don't believe that any answers I gave to the media, or any discussions that I had with the media, went beyond discussions that we have had in this committee and in this Chamber on that subject, but I will check the newspaper article. I attempted to answer all the questions that were asked of me by the Opposition on the item of personal care homes, and I did, as I recall — I'll check Hansard — but I am quite sure that I said that the

personal care home budget — and I welcome this opportunity, as a matter of fact, because I have to make a correction — I said the personal care home budgets were increased by 9 percent, I believe, and that is incorrect, Mr. Chairman, I'm sorry, the figure is 8 percent. The guideline that has been sent out to all the health facilities is 8 percent. There will, of course, be some who will get more than that and some who will get less, but the general median guideline is 8 percent. I did, though, respond to that, I think, during the course of my answers to the other questions put to me.

MR. DESJARDINS: Mr. Chairman, I'll accept the Minister's assurance that he did mention that it is possible, when there are so many things that are said, that I missed it. But one of the things that I'm complaining about is in the story in today's Free Press, was . . . a waiting list of almost 2,000 for personal care beds and a complete halt on building by private operators may force the province to raise its daily capital debt repayment aid from 2.20 per bed to between 8.00 and 10.00. I certainly don't remember these figures being mentioned at all when that was brought up.

Then I see here that, Sherman claimed financial mismanagement by the former NDP administration has placed the Manitoba health care system under threat. I repeatedly asked the Minister to mention these things and repeatedly he says, Well, not in this department. Now we get a general statement such as that.

The Minister did say yesterday that we weren't moving into the propriety nursing homes. If this is what he meant, I'll accept that, that's true. But, I mean, a general statement of mismanagement, I think it should be proven here, at least it should be discussed here while we are also here to refute some of these statements. This question of the propriety group getting from 8.00 to 10.00, certainly we would have questioned him on that if we had heard that. These are the things that, while we are in the middle of a debate and we've had it all day, then the next day when it's closed and when that is finished, of course we can and we will discuss this under the Minister's Salary, we get a report like this.

MR. CHAIRMAN: I'm sure that the record will show that the correction has been made under the point of privilege. The Honourable Minister.

MR. SHERMAN: Mr. Chairman, I am certain of one thing, I said nothing in discussions with the media outside the door of this Chamber on mismanagement and maladministration by the previous administration which put the health care system in threat. Absolutely nothing; that I am certain of. I said that in the House and I said that in committee. — (Interjection)— No, no, in general, not personal care homes, and I didn't say it outside the Chamber to the media.

What I had said in the course of our debate last night when we were arguing about what respective governments had done for elderly persons in Manitoba, I said that we inherited a situation which had put, in our view, the whole health care system in threat because of the fiscal and financial condition of the province, because of the debt the province was

in. I said that in committee; I did not say that to the media outside the Chamber.

One further note on that point, Mr. Chairman. The Member for St. Boniface and I have debated this before and I think I have said to him that I found a department that was well administered and well run and staffed with loyal, hard-working, conscientious personnel. I have said that to him. I still say, and my leader and my colleague the Minister of Finance, have made the case many times — I'm not going to reopen the case here — that we found a fiscal situation and a debt situation that we felt had the province on the verge of bankruptcy. I have never attributed that to the Department of Health; I have never attributed that to the previous Minister of Health. I have attributed it, in general terms, to the administration of provincial affairs, and many debates have been held on the Hydro question and many debates have been held on Northern Affairs and various programs undertaken in that area, but I have not ever directed that at the Department of Health or the previous Minister.

On the other point about the per diem, it is true that that question in those precise terms didn't come up in committee. I think that the Honourable Member for St. Boniface, as a previous Minister of Health, knows full well that the per capita debt repayment per diem paid to nursing home operators is 2.20 per day. That's not news to him, because he was in office for three years and he was Chairman of the Health Services Commission for a year, so that's hardly news to him.

The other point about the formula that has been looked at by the government and has not been accepted and has not been offered to the proprietary operators, was based on the spread in interest rates relative to financing and relative to construction costs today, calculated on a 30-year amortization of a project that would cost approximately 35,000 per bed to build. Those calculations to provide a per diem that would make that kind of operation viable at 16 and 17 percent interest rates, would require that kind of differential in the per diem. That has been something that I have explored. I think that members opposite know we have been exploring that kind of a formula. I was never asked specifically what that would amount to in terms of dollars, that's true. I was asked by the media what that would amount to in terms of dollars and I gave them a general figure in reply. I said it might be something between 8.00 and 10.00 a day. I also said to them that if there isn't cheap money available from CMHC, and as the Member for St. Boniface knows, there are limitations on that CMHC funding, if there isn't cheap money available from CMHC, the non-props will require that kind of a per diem too. It won't simply be prop operators, it will be the non-props too.

MR. CHAIRMAN: I would ask the Honourable Member for St. Boniface if that satisfies his . . .

MR. DESJARDINS: Well, first of all . . .

MR. CHAIRMAN: I would suggest you continue. The Honourable Member for St. Boniface.

MR. DESJARDINS: Mr. Chairman, first of all, in all fairness, I must withdraw my objection to the

statement of financial mismanagement if it is clear, and there is no doubt that he mentioned that, I mean, we agreed with him but not necessarily — I think it was challenged in the Department of Health and he said the same thing that he said this morning, that it is not necessarily — that he was looking at the overall thing. All right, so I'll accept that.

The other thing, Mr. Chairman, it then shows the misleading that was done when the statement was made in August of 1979 that all construction would be done at their cost. This certainly was misleading, when you have things like that, and I still think that this should have been mentioned here. We certainly talked enough about that and the Minister should have told us what it would cost and what he was going to do, because we were complaining that these 390 beds or so, or 400 and something, had not been built although they had been approved, and that was holding everything back, because a big announcement of this government, it is that the freeze is off, but it's mostly the proprietary beds that will go ahead, and none of them have been built because they can't find the money. I think that that was an important thing. If the Minister believes in that, believes in this group, he could have told us, yes, this will move because we will give them 8.00 to 10.00. Now, the Minister said that's not approved, but he is sufficiently sure to mention it to the press.

I'm not going to insist on that. I understand that the Minister was asked questions and it might be that he let this slip or gave the information, but I think that it is unfortunate. I withdraw my complaint to the Minister personally, but I still say it is unfortunate that we weren't given that information while we were looking at the overall business of the proprietary nursing homes, of profit-motivated groups, as against the non-profit organizations. So, with this, we could have a further discussion under the Minister's Salary.

MR. CHAIRMAN: Is the Honourable Minister speaking on the point of privilege? The Honourable Minister.

MR. SHERMAN: No, I'm not speaking on the point of privilege. I may be in violation of the rules, and you may call me to order, Mr. Chairman, but I just want to respond to the Member for St. Boniface to ensure that he knows all that I know and all that the media knows, because there was no intention to reveal information that he was not aware of. I thought he knew that we were considering a formula.

The debate last night, Sir, never was on that issue. —(Interjection)— The debate was on the philosophy; the debate was on the ideology of whether proprietary operators should be permitted in the field or not. It never got down to the point of what it would cost today to build and operate a personal care home. What it would cost today, Sir, is 15 percent daily, in terms of your amortized capital construction costs and debt repayment, more than it costs a non-prop operator who can get 2 percent money, because you are probably in the market at 17 percent, and that works out — to meet that on a formula, could work out to a differential in the per diem of 8.00 to 10.00 per day. If you want to multiply that times 365, and then times 314, which is the total number of beds in the proprietary field that we have approved, you are

looking at a million dollars in the annual operating budget of the Manitoba Health Services Commission. But we never got down to that. We never got off the ideology.

MR. DESJARDINS: Mr. Chairman, I think the point that I tried to make is, it is dangerous now — the Minister prefaced his remarks saying that he might be out of order, and if I answer him, I will, and there is another opportunity to discuss that, under the Minister's Salary, so I will desist at this time.

MR. CHAIRMAN: I would have to ask the honourable members . . . I had passed Item (c), which was Hospital Program, but if there . . .

MR. SHERMAN: No, Mr. Chairman, I think it caught members opposite by surprise. They were expecting me to respond and I don't intend to respond until they have had an opportunity to speak.

MR. CHAIRMAN: I was just trying to establish which item we were on. I'm not prepared to move on to an item if we are not finished with the one previous. So we are on Item (c), which is Hospital Program.

The Honourable Member for Transcona.

MR. PARASIUK: It is difficult to try and separate these various components of personal care, and hospitals, and Medicare, because for medical services, these three major items, which we did want to link together anyway and have them dealt with together. And so a bit of what I'll say may be a touch into other areas, but I think that they are part of a very tightly integrated system.

The key issue with respect to the hospital programs right now is the acute bed shortage, acute care bed shortage, and that is of a crisis proportion right now in Manitoba. We have, as the Minister indicated yesterday, 690 acute care beds which are plugged, it's the blocked bed problem he talked about. 690 acute care beds, blocked with elderly patients or chronic care patients who should be in personal care homes. We've taken 690 acute care beds out of circulation as a result of that. And, of course, one of my complaints about the way in which the government's acted on this is that the Minister has approved the construction of 494 private nursing home beds, which would relieve that blockage, but none have been built to date. —(Interjection)— 314 in net, 494 gross. Some of the gross have already been taken out of circulation, that's the point, so if you had had those 494 come on stream, think of how it would relieve the 690 blocked beds. He's had, as an alternative, always before him, at his disposal, the non-profit route of going to the non-profits which are there, which have access to cheap money, and are prepared to do it, and we would have had the 494 units, at least in the process of being built. We shouldn't have had the freeze in the first place because this has contributed to the blockage in the hospitals, so it's important to note that the freeze on nursing home construction has added to the blockage in the hospitals and has taken acute care beds out of circulation.

We have another problem with respect to acute care beds. We have a nursing shortage in Manitoba,

and the nursing shortage has led to a closure of beds in the Health Sciences Centre, something in the order of 76 or 79 beds have been closed, we've had closures of two beds at least in the emergency section, or the intensive care section of Victoria Hospital, we have a shortage that to a degree has been documented by the Manitoba Association of Registered Nurses, which conducted a survey of hospitals and personal care homes and other institutions using nurses, and this survey was, I think, they got responses from 151 institutions out of 240 surveyed, and they indicated that there were something in the order of 250 vacancies as of January 1980. And the situation has worsened between then and now, because it was only recently that we had the closures at the Health Sciences Centre.

So this is a situation that is serious, not only for the Health Sciences Centre, it's serious for Victoria, it's serious for Thompson, it's serious for other places. Hospitals are saying they don't have intermediate and senior level nurses to provide supervision, and that creates a tremendous problem, tremendous pressure on the hospitals, and is adding to the acute care bed shortage in Manitoba.

Now again, why do we have a nursing shortage? In part, it's cyclical, and no one would want to deny that, but the key thing is, and we predicted it three years ago, if you have cutbacks in hospitals, if you have a program of acute protracted restraint laid on by the Conservative government in the vital area of health care, you are sowing very dangerous seeds, and those seeds have come to bear horrible fruit three years down the line.

We had surpluses of nurses because they were let go; we had orderlies let go; we put tremendous pressure on nurses working in the hospitals who were complaining that they could not keep up because of the shortages, morale plummeted, young people graduating from high schools decided that they've seen the Conservative conception of society and they didn't like it and enrolment in nursing training programs declined disastrously. Existing nurses working in the field decided that there were better places to work outside of Manitoba where you had a more compassionate government providing adequate funding for health care. And they left. Many have left, and that has contributed to a nursing shortage which is more acute, more protracted than it should be because of any type of cycle, and has led to a very dangerous situation which was indeed predicted by people looking at the impact on health care of Conservative government cutbacks over the last two-and-a-half years. So this is not an accidental occurrence that somehow spontaneously happens.

Furthermore, the Minister has tried to say, well, they've got nursing shortages in Saskatchewan, they've got nursing shortages in Alberta, that's true. They have an economy that is booming, they have populations that are increasing rapidly, very rapid rates of growth in Saskatoon, Regina, Edmonton, Calgary, Red Deer, Fort McMurray, Prince Albert, very difficult for them to accommodate that quick growth. So I can appreciate their nursing shortage.

What's been the situation in Manitoba over the last two-and-a-half years? We've had a net outmigration of 25,000 people. We've had a reduction in the population, we've actually had an absolute decrease

in Manitoba's population of 5,000 people last year, an absolute decrease. So we've had a drop in population pressure on our hospitals, yet we have the nursing shortage, too. Because I believe that of that 25,000 in net terms who left, and basically is something more in the order of about 69,000 who have left Manitoba, a number of those people were nurses, and if you don't provide a climate that recognizes that in the provision of health care, nurses are as important as doctors, orderlies are as important as nurses, that they are working as a part of a team where, if you don't have an orderly turning over a patient who has a broken hip, that will be a more direct aggravation and problem for the patient in the hospital than any doctor discontent. And if you don't have nurse practitioners spending a bit of time, with some human interaction with patients, that that is as bad for the patient as other people not being around.

And the number of orderlies on wards was reduced right down the line, the government went past the stage of squeezing out any little bits of pockets of excess, they've cut into the muscle, they've cut into the bone, they're cutting into the bone in terms of delivery of health care in hospitals and personal care homes, because that's where nurses are operating. If you go into a place like the Tache Nursing Home, the number of orderlies has decreased very significantly on each ward, and it has had very dire consequences, especially on nurses and they have left, and we are stuck with the problem now, which is being aggravated.

The Minister can say, well, you had a problem in 1974. When they had a problem in 1974, the Minister at the time acted decisively and solved the problem. We are monitoring the situation, just like the situation at Benito is being monitored; the situation with Birch River nursing station, it's being monitored. The situation in Notre Dame des Loures, being monitored. We need decisive action with respect to our nursing shortage, and the situation is being aggravated and is being intensified.

Just a few days ago the Health Sciences Centre reported that their special attempt at recruiting nurses hasn't been successful at all. And the Minister has to say, well, is that peculiar to the Health Sciences Centre, is something wrong with the management there, because the Director of Nursing did, indeed, leave some time in the past few months. Do they have a morale problem there, is there a problem with management? Do people not want to work at the Health Sciences Centre, are the working conditions there so bad? But that is a critical, acute problem.

And what is the impact of the plugged beds and the bed closures because of nursing shortages, without anything on the horizon to try and ameliorate these particular problems. You can't deal with the blocked beds very quickly and easily, you can't catch up with press releases that are recycled year after year. 690 beds without any way in which we can unplug them. Nursing shortages without any way in which you can deal with that. It takes two, three years, four years to train nurses. So we are reaping the seeds of acute protracted restraint.

And we have a situation in Concordia Hospital recently where a patient with a brain tumour is awaiting surgery to relieve the tremendous pressure

on his brain. It will prolong this person's life, and the person can't get in to the hospital to be put up for surgery by the surgeon. A bed isn't available. We had a late night last night in reviewing estimates, got home about 12:30 in the morning, my wife had received a frantic phone call, a person has just been diagnosed as having a very serious heart condition requiring a by-pass operation. Tenterhooks until that by-pass operation is completed. A very critical stage. What I would consider to be an emergency situation. He has been told that he is on a waiting list for a bed, and it could be up to six weeks, they can't be definite. If you're sitting there with that bad heart condition, you are waiting for corrective surgery, this is an emergency, it's not elective, it's critical. And to be told that your life is in danger because you can't get ready access to an acute care bed, that is tragic. But it was predicted. A person in Concordia, waiting to relieve the pressure of the brain tumour, can't get a bed. Again, that was predicted.

The Minister can express words of sympathy, he can express his concern, I appreciate that he's concerned, but where was he over the last three years when we raised all of these points? When did he translate his concern into corrective action? He didn't. Whether he didn't have the muscle in cabinet; whether he didn't feel sufficiently committed, it's no excuse for him to then get up and say, well, you know, we were in a very difficult financial situation. Things are difficult, we can't do things all at once. You surely don't create a situation which results in acute nursing shortages, which results in blocked beds. He has directly contributed to that situation, and the excuse of lack of funds — you know, we just had big debates on whether indeed we should be allocating 5 million to the Carman diking program. Flood problem. You can do it quite easily there. A 5 million dike that can't be justified with any type of cost-benefit analysis, but the squeaky wheel can get the grease. And the point is, how can the people in Concordia, how can this person waiting the by-pass operation, how can they get squeaky enough to get some grease from this government, because their needs are critical? They're needs of today. They have to be dealt with, and there are very few doctors right now who are in a position to give any definite dates regarding surgery. They're all on indefinite standby.

My wife is on indefinite standby with respect to a bed for some minor surgery that she requires. She's been told by her doctor, well I thought it might be May, but all bets are off, I can't commit a date at all; maybe this fall, I don't know. I don't mind her waiting in that particular respect, if indeed it's going to free up the bed for the person requiring the by-pass operation, for the person requiring the brain tumor operation, but I don't know if that's happening. I don't know if that's happening at all right now. I think at this stage of crisis, because it is a crisis, I think it's important for the Manitoba Health Services Commission to establish a co-ordinating task force with the administrators of all the hospitals, to sit them down and say, okay, how many beds do we have? Who is in these beds? Who is in acute care beds, who is extended care, or personal care? And he has to bring the personal care home people into this as well. He has to bring in Deer Lodge. He has to try and get every bit of hospital space operational right now to deal with this particular crisis. He has to

act as a co-ordinator. When we have a situation when doctors tell patients, go home from your hospital, go home, call up an ambulance and tell the ambulance driver not to go to your nearest hospital, but to go to this other hospital because maybe they can squeeze you in if you come in the hyper situation of an ambulance pulling you in, maybe that way you can get into the hospital.

The Minister admitted that's happened, and for him to sit and accept that as a normal course of events or an acceptable course of events, if not normal, is wrong. He has to take the lead, because there is no authority right now over the hospitals. He has to take the lead as the person responsible for overall health care in Manitoba. He has to pull these groups together and he has to start insuring that operations like the one required for the brain tumor or the by-pass are not put on a six week hold list; that those beds are freed up immediately. And it can be done. It can be done over the course of the next one month, two months, three months, to try and somehow provide some traffic control in a sense. Because I don't know if the Minister can assure us for example, that certain doctors are still able to get their elective surgery through, while other doctors, perhaps without as much seniority, perhaps without as much pull, can't. How does one assess what's more acute, what is more of an emergency nature, what is the less elective? How does one assess that within one hospital, and then how does one assess that between hospitals?

It is a critical problem. It's the major problem facing us right now. It's of short-term. It has tremendous long-term implications, because it can't be solved easily, but the Minister has to act immediately with respect to that problem. And I think if that means he has to start recruiting nurses from different parts of Canada; if that means he has to go to Commonwealth countries, I urge him to do so. We cannot tolerate a situation where emergency surgery is made into elective surgery because we do not have the facilities or the nurses in place. This issue has festered and festered over the course of the last three or four months. It was predicted. It's become more acute.

We have Concordia saying they have problems. We have the Health Sciences Centre saying they have problems. We have Misericordia saying they have problems. We have Victoria Hospital saying they have problems, and I have a lot of material here on Victoria Hospital. We had this material come forward, what was it, about three or four months ago, claiming that there was a death at Victoria Hospital because of inadequate facilities? The Minister, I think, in introducing his estimates and in the Throne Speech mentioned that something will be done for Victoria Hospital. It turns out to be a very minor thing, and the executive director of Victoria Hospital says that won't be sufficient, what we need is a major expansion of our emergency care services and facilities. These aren't peripheral people within hospital administrations that are saying they have critical problems. Sig Enns is saying they have a terrible problem at Concordia. Dr. Henry Krahn, where have I heard that name before, saying they have a terrible problem at Concordia Hospital. — (Interjection)— Yes, can't tell who he was — terrible — that he was so embarrassed by the actions of this

government he resigned the presidency of the Manitoba Medical Association; a terrible problem at Concordia.

We have the Minister getting up saying, we are doing all these things at the Health Sciences Centre, I think 76 million planned, but yet this will not deal with the bed shortage that exists right now. None of it will deal with the bed shortage. I think there isn't a sufficient perception on the part of the government of the crisis we have with respect to our shortage of acute care beds. Not that we don't have the beds, but because they can't be used. That's the tragedy. That's the stupidity of the decisions of the government, the incompetence over the last three years, having 690 beds that can't be used for acute care. Efficiency, that's terrible mismanagement, and the co-ordination isn't taking place between hospitals.

We have established a dialysis unit at the Health Sciences Centre. I think there is one also at St. Boniface, but for some reason the one at the Health Sciences Centre is being under-utilized right now, because St. Boniface won't send people over to the Health Sciences Centre and theirs is over-crowded. Do they want an expansion of their facilities? Or shouldn't there be some sharing between the hospitals? I know, with respect to something like cat scanners, there is one at the Health Sciences Centre, it's a very expensive piece of equipment, it's a good piece of equipment. Does St. Boniface Hospital now want a cat scanner? Does Brandon Hospital now want a cat scanner, does Thompson want a cat scanner, or is it possible to provide for co-ordination between hospitals with respect to very expensive capital equipment which is good and which is necessary. But we still must remember we only have a population of a million. Isn't it possible to have people go from one facility to another. Now, to a degree they do, but from what various officials have been telling me in terms of the consultative process that the health critic goes through with various officials of various institutions, I get the impression that each institution wants its own piece of sophisticated capital equipment, and that creates some dangers in terms of over-spending on the hardware and insufficient spending on the software, or the people who provide the care. I know there's a tremendous pressure on politicians, there's a tendency on the part of politicians to like spending money on hardware, bridges, roads — (Interjection)— paving shoulders, is right.

If the Member for Springfield is saying that he would prefer a paved shoulder to a situation where we have 690 blocked beds, let me tell you he's got his priorities wrong. I'd prefer — was it the Member for Gladstone — maybe I've — okay, I correct that. The Member for Gladstone prefers paved shoulders to a situation where we could free up 690 blocked beds. I apologize to the Member for Springfield.

But surely there's been the wrong priorities established with respect to hospital care. For us to say that the vanguard or the flagship of our hospital program is a 76 million program, which won't add one bed to the Health Sciences Centre, is wrong. We have this — you know, if we are going to be building these facilities that people can't make use of because they're all plugged up with lower care requirements, is the height of inefficiency and the

height of mismanagement. That is the key problem. I will stop on that. I'd like to get some response from the Minister. I intend to raise some specifics and particulars regarding the situation at Victoria Hospital, which I don't feel has been investigated by the government, and I think we have a serious situation at the Health Sciences Centre which hasn't been investigated. We've got the special situations in places like Benito, where the hospital has closed, I believe, which has been known for a year and a half, and the Minister says, well I've given the MMA 40,000, they'll solve the problem.

If he couldn't solve it over a year and a half, how can the MMA solve it with 40,000.00? It reminds me of King Canute. King Canute gave the waves 40,000 would the tides still come in. We need some more direct effective action in that respect, and maybe, just maybe we have to start looking at ways and means of inducing or arranging for some quid pro quo with respect to doctors and nurses and other people in terms of receiving training in exchange for possibly a year's internship program in a community hospital like Benito. Otherwise how will they get hospital care that they require? Or Notre Dame de Lourdes? What I see is a sort of laissez faire approach, or a desire to be more laissez faire in the health care delivery system on the part of the Minister, while at the same time these problems increase and get worse. They won't be solved by the invisible hand, because we don't have an invisible hand operating really in the health care system.

We have a system that is funded by the public, and we have a lot of intervention on the demand side, on the payment side, and I think it is important for us to ensure that the supply of medical care, health care, is sufficiently spread out throughout the province so that people have equal accessibility to it. I look forward to the Minister's comments on this, especially with respect to the acute crisis we have with acute care beds, which is terrible, which is putting tremendous pressures on patients and would-be patients, increasing their anxiety levels, leading to a situation where doctors can make no definite commitments with respect to elective surgery, and in a sense is making a great portion of our hospital system inoperable.

MR. CHAIRMAN: The Honourable Minister.

MR. SHERMAN: Mr. Chairman, I appreciate the comments and suggestions of those who have participated in the examination of this item up to this point in time. I'd like to respond to some of those concerns, because I think it is important that a non-justified concerns be not left on the record or not left in the public arena, and that the minds of Manitobans be maintained at ease insofar as that is possible with respect to their health care system.

The comments that the Honourable Member for Transcona has made are certainly welcome in terms of participation in the debate, but I must say, Mr. Chairman, that in large part they do not reflect reality. They will make excellent reading no doubt, but they are not based on the realities that a Health Minister faces or must live with, or the realities of the existing health spectrum in Manitoba today. There are problems; there are challenges; there always have been and there always will be.

Some of the areas in which he thinks there are miracle solutions, I want to advise him, are areas in which there are no miracle solutions. The blocked bed question, for one, I want to deal with that in a moment. Primarily I do not want Manitobans either frightened about the quality and capacity of their health care system, or anxious with respect to the excellent health care program that we have in place in Manitoba and that two governments, in my experience in this Legislature, have done their utmost to maintain at an enviable level. You know, there is a tendency for all of us in our own environments to have astigmatism to a certain degree with respect to what is available, and we fail to see and appreciate the services and the systems that we have in place because we take them for granted, we become used to them, and we become rather apathetic about the general situation. It doesn't take very much in the way of visitation or consultation to and with persons in other jurisdictions, in other areas of North America, to be reminded of the fact that a great many North Americans look upon our system with virtual disbelief. They are mightily impressed and indeed envious of the excellent system that we have in place and I really think it is important that Manitobans be reminded of that and I give my predecessor in this office credit for his contributions to that end and I, with some immodesty, would suggest that I am trying to maintain that same level of excellence and quality to the best of my ability and to the best of our ability as Manitobans to handle it responsibly and pay for it responsibly.

The Honourable Member for Transcona is concerned about what he calls the acute bed crisis in Manitoba and the blocked bed situation. Well, Mr. Chairman, I can tell him, and I think there are probably previous Health Ministers in this House who, in moments of candor, would tell him too, that if we do free up those 690 blocked beds, and move those persons somewhere else, that unless those beds are closed, and that's a very difficult thing to do in the health care spectrum, they will fill up again in a very short period of time and we will be looking again at a blocked bed problem.

I am not suggesting that's a reason for not taking action. We are attempting to take action, but the reality of the health care system and the reality of all of us as individuals is that where we have beds, they will be filled; and where there is service, it generates its own demand. All that a province can do, all that an administration can do, is attempt to serve those needs as best and as responsibly as it can and ensure that a maximum quality of care is available to a maximum number of people and that difficulties and problems are contained.

Many problems and challenges that face all of us on either side of the House in the health care field are problems that have only very long-range solutions, at best, and there are some that I quite honestly suggest to you, Mr. Chairman, have no solutions. They can be contained, they can be controlled, but there are no panaceas for some of these problems. I mentioned last night that Quebec solved its blocked bed problem by simply passing legislation that said from this day forward, 20 percent of all hospital beds will be considered extended care beds. Fine, now we have no more

blocked bed problem. Well, obviously, Mr. Chairman, I'm being facetious in my reference to it; that is what they did. Obviously all they did was solve the problem on paper; they didn't solve the problem of the people who were trying to get into hospitals. They simply moved some paper around and said, okay, now we have no blocked beds. This government is certainly not intending to move in that direction at all, but I cite that as an example of the fact that many of us, most of us, in North America have this problem today because of the demand, and in most cases the legitimate demand, for health services, and because of the changing demographics of the population, the growing component of elderly.

The Honourable Member for Transcona says there's an acute bed crisis in Manitoba. I dispute that, Mr. Chairman. There certainly are times of the year, and we are in one right now that I hope should, by virtue of the weather, be alleviated pretty quickly, when acute beds throughout our hospital spectrum reflect a very high occupancy rate, as high as probably very close to 100 percent. There are also times of the year when that occupancy rate is substantially lower than that. Normally we do have a high occupancy rate in the wintertime in this climate, for obvious reasons that I don't need to belabor, and we have a lower occupancy rate in the summertime. As a consequence of that, for years, under a succession of governments, hospitals, particularly in Winnipeg, have closed a few beds in the summertime. They do so to accommodate summer holiday schedules; they do so to accommodate renovation and redecorating objectives; and they do so, quite frankly, to accommodate their budgets. They have to live within budgets, as all of us do, and if they don't need the beds in the summertime, and often they don't, if they have got 20 or 24 beds that they don't need because patient volume and demand is down, they close them. It is something that has been taken for granted and has never caused much of a stir in the experience of this government or the previous government.

The problem at the moment is somewhat unique in that for this time of year, there still seems to be a very high occupancy rate and yet we are into a weather period when that occupancy rate should be dropping. Number two, there are difficulties at the Health Sciences Centre and a sudden wave of resignations, or notices of resignation, which I still have not satisfactorily had explained to me — the members opposite may say I haven't explained it to them, but I have not had it explained to me — has produced a reaction on the part of the Health Sciences Centre administration that, I want to tell you, Mr. Chairman, I did not agree with and I think I have said that before, but it was set in motion, it was under way, and when the momentum of that sort for a bed closure in an institution of that size gets under way, it is very difficult to stop that momentum because it involves the medical staffs, the clinical chiefs, it involves all the different components of the hospital, the nursing pattern and the staffing ratios. The whole operation of the plant has to be orchestrated and organized to accommodate that bed closure. Once that momentum gets under way, it is very difficult for this Minister of Health, or any Minister of Health, to step onto the railroad track

and hold up your hand and say, Stop the locomotive, it can't continue to run.

I think, if we had had adequate forewarning of it, that we might have been able to minimize the impact of those resignations but I repeat, as I told the House earlier, I did not have adequate forewarning of it. In fact, Sir, let alone adequate forewarning of it, I did not have forewarning of it until it was too late. That is a situation that is not acceptable to a Minister of Health or a government or an opposition; I agree with that and I have taken steps to ensure that that does not happen again. I'm not sure why it happened, but it did happen and there are now 79 beds closed at the Health Sciences Centre, so there is some difficulty with admissions into the Health Sciences Centre.

To suggest that there is an acute bed crisis in Manitoba is not accurate. There certainly is an acute bed shortage, and if the honourable member wants to use the term crisis, then I won't dispute the term crisis in the context of the Health Sciences Centre, in the context of the spring of 1980, this current moment that we are in right now. But it is not true of the province in general at all. We have 5,700 active treatment beds in Manitoba. Some 690 of them — or 580 actually, but 690 including the extended care patients — some 690 are inappropriately filled at the present time. Even if you subtracted that 690 from the 5,700, we are still left, Sir, with 5,000 active treatment beds for a population of one million, and that is well above the accepted conventional guidelines on this continent and considerably above the targets of three jurisdictions that I know of, the province of Alberta, the province of Ontario, and the state of Minnesota, all of whom are trying to get their active bed-to-person ratio down to 1,000 persons, down to 3.5 per 1,000. We are at 5.7 and even if you subtract those so-called blocked beds, we would still be at 5.

Admittedly a good many of those are in rural hospitals and many of those rural hospitals have low occupancy rates. We have some problems here in Winnipeg that we are trying to address and hoping to address and making some progress on. There are a number of considerations on which solution is contingent, not the least of which is an arrangement for the takeover of the Deer Lodge Hospital, but that cannot be done without the concurrence of all three parties, including the Royal Canadian Legion, and we have unfortunately had some interruptions in negotiations due to two federal elections and two changes in the federal government in this country in the last 18 months or less, and each time negotiations grind to a halt and then they have to be started up again with a new Minister. It hasn't always been a new Minister of Health and Welfare in Ottawa, but it has been either a new Minister of Health and Welfare or a new Minister of Veteran's Affairs, and we have to start up the negotiations all over again, and we are back into negotiations on Deer Lodge.

The honourable member says that this problem that he suggests is acute and of a crisis nature and that I dispute in those terms, is reflected in part by the nursing shortage, or that an example of it is to be found in the nursing shortage and the nursing shortage is something that the Minister knew was happening and something we should have been

doing something about. Mr. Chairman, I want to reassure the honourable member again, and I think I have earlier, that we, on our own initiative, in my office and the Health Services Commission, some months ago, as early as last November, alerted ourselves to the fact that a nursing shortage was developing in North America. It is due to a number of reasons, a number of social factors that have not occurred before and perhaps no one anticipated, not the least of which is the changing spectrum of career opportunities for females, which is something to be widely welcomed by all of us, but which has an effect in a professional field like nursing. There are far more professional career opportunities and far more attractive, I might say, with respect to working conditions, hours and salary, over a whole range of fields of occupation now for female members of our population, than was the case a few years ago. The social revolution that we have gone through in the last decade has produced that condition, and we identified the developing difficulty many months ago and have had in place continual consultation mechanisms to attempt to deal with it. We did, however, get caught short — and I don't mind admitting it, I think I admitted earlier — by that sudden and what was described to me as an inexplicable wave of resignations at the Health Sciences Centre, that despite the fact that we were holding monthly reviews with all the hospitals in Winnipeg of their nursing staffing situations.

However, Sir, I am still pursuing the reasons for and the source of that difficulty over there and I don't have the answers to that question yet; we have to deal with the reality. As a result of that, we have established a mechanism now for much tighter, much more frequent, much closer polling of hospitals to determine what their nursing staffing patterns and situations are like. We have, in concert with the nurses themselves and with the Department of Education and with Red River Community College and with the hospitals, got under way, Sir, a program of RN Refresher Courses which is serving retired nurse applicants in the community who want to take the eight-week refresher course and get back into nursing. That will, at the current count, by the month of September produce 91 nurses who have gone through retraining and are back into the field, that is RNs, 91 RNs, that is to date, with more applying daily.

We have a refresher course under way at Red River Community College with two more scheduled. There is a refresher course for the first time being held in Thompson, it is starting this very coming week as a matter of fact, with nine nurses registered for it, and further courses ready to be put in place, depending on the availability of nursing teaching resources. We have another 12 going into a refresher course here in Winnipeg in June and another 20 who have applied for a refresher course that will graduate them by September.

In the month of April 50 RNs came out of retirement to enrol in refresher course, including the course at Red River Community College. So, Sir, the total at the moment is the 50 in April, the nine who were going in in Thompson, the 12 in June, and the 20 in September, for a total of 91 with new and additional applications coming in daily. We may be able to exceed that figure of 91 substantially, and

indications are that we will. We also have the graduating classes coming out the hospital Schools of Nursing and the community college Schools of Nursing this June, which will produce, if memory serves me, approximately 402 graduates. We are not sure where they are all headed. I am not suggesting that all 402 are going to stay in Manitoba, but we are certainly doing our best to ply them with intreaties to remain in Manitoba.

We have had indications from the new Seven Oaks Hospital that they are having no difficulty in attracting nursing staff. Whether there are nurses at other hospitals who are temporarily retiring for the summer, take the summer off as many nurses do, it happens every year, there is always a series of retirements, there is always a considerable nursing turnover in the spring and summer, and then planning to go to work in the new plant, which would be an attraction for anybody, in October at Seven Oaks — I can't answer, but I suspect there are a number who are planning to do that.

I have met, Mr. Chairman, with the nurses on this subject, with the hospitals on this subject, and with university officials, with the President of the University and the Deans of the relevant faculties at the University of Manitoba, nursing, pharmacology, dentistry, and the School of Nursing. All of them say to me that this is a cyclical problem in that particular profession that has always been with us, and they do not know what the answer, what the solution to that kind of cyclical supply is, but they are attempting to form a brains trust to produce some possible resolution of it for us in the future.

The nurses themselves assure me that the budget of the hospitals with which they have been associated and the fiscal program of the government has nothing to do with the current situation. — (Interjection)— I know the Honourable Member for Transcona does not accept that and that is fine, that is prerogative. I am telling him what the executive of the MARN, Manitoba Association of Registered Nurses, has told us. They have also stated that publicly, that what happened when we had a surplus in 1977 — and there was a surplus, I knew many nurses who were taking other jobs at the time, because there just were too many nurses in the market — What happened was the high school counsellors and others, who offer some suggestions to young people as to what careers they should go into, started advising young high school girls not to go into nursing because of the surplus.

A MEMBER: Why?

MR. SHERMAN: Because of the surplus, because there were too many nurses, there weren't enough jobs. At that time we had recruiters up here from Texas and Arizona who were reaping the rewards of that surplus, that harvest that was available in this province and some other western provinces, and the tap got turned off. The tap got turned off in 1974, the tap was turned off for a while in the 1970 period, it was turned off in the mid 1960s, it has happened cyclically every three, four or five years in this profession. The President of the University and the Dean of the School of Nursing at the University of Manitoba tell me they do not have the answers to that problem, but they believe there must be some

solution, there must be some kind of answer to it, and they are hoping to devise some approaches and strategies that will ensure that we don't have those cyclical shortfalls in the future, or at least that they are minimized.

It is after all, Mr. Chairman, at the risk of being chauvinistic and I hope I won't be misinterpreted, it is after all a profession that thus far has appealed basically to women. There certainly is a tendency for woman, when they get married, to remain at home, there has been in the past a tendency for them to remain at home and raise families. And then oftentimes in later years they will come back into the field. I think you have to recognize the reality that because of our institutions, of our way of life, of our society, that applies to women and not to men. The male does not devote his attention to the home after getting married, the female does; and that takes many of them out of the market for long periods of time. That is one of the reasons for that cyclical shortfall, but that is being addressed, Mr. Chairman.

MR. CHAIRMAN: The hour is 12:30 p.m., Private Members' Hour. When this Committee next resumes in Committee the Honourable Minister will have five minutes. Call in the Speaker.

Committee rise.

The Chairman reported upon the Committee's deliberations to Mr. Speaker and requested leave to sit again.

IN SESSION

MR. SPEAKER: The Honourable Member for Radisson.

MR. KOVNATS: Mr. Speaker, I beg to move, seconded by the Honourable Member for Wolseley, that the report of Committee be received.

MOTION presented and carried.

MR. SPEAKER: The Honourable Minister of Community Services.

MR. MINAKER: Mr. Speaker, it is my understanding that it is the desire of the House to adjourn at this time, and I beg to move, seconded by the Honourable Member for Kildonan, that the House do not adjourn.

MOTION presented and carried, and the House adjourned and stands adjourned until 2:00 o'clock Monday afternoon.