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of the

Legislative Assembly of Manitoba

**DEBATES
and
PROCEEDINGS
(Hansard)**

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Speaker*



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MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Sixth Legislature

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LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, June 15, 1995

The House met at 10 a.m.

ORDERS OF THE DAY

(continued)

COMMITTEE OF SUPPLY

(Concurrent Sections)

FAMILY SERVICES

Mr. Deputy Chairperson (Ben Sveinson): Order, please. Will the Committee of Supply please come to order. This morning, this section of the Committee of Supply, meeting in Room 254, will resume consideration of the Estimates of the Department of Family Services.

When the committee last sat it had been considering item 1.1 on page 56 of the Estimates book and on page 25 of the yellow supplement book.

Mr. Gary Kowalski (The Maples): I thank the committee—

Mr. Deputy Chairperson: Order, please. Just a procedure here. Is it the will of the committee to allow the honourable member for The Maples to say a few words? [agreed]

Mr. Kowalski: I thank the committee for that opportunity on behalf of the Liberal members in the Manitoba Legislature. I have been assigned the duty of representing their views in the role of critic for Family Services. It is one of many duties, so, although it is a department that deserves a lot more attention than I will be able to give it, I just wanted to put some remarks on the record.

One of the things that I notice in the minister's statements, it starts off talking about the importance of the balanced budget, but there is also a social budget, a social deficit that is being created here in Manitoba. Some members of the government have pointed to their electoral victory as a mandate for a number of issues, everything from government control to their spending priorities.

I think what has to be mentioned is that, under the rules of our form of democracy they have the majority of members in this Legislature, which allows them to form government, but it also has to be remembered that 57 percent of the Manitobans did not vote for candidates who were Conservative candidates and therefore may not have embraced all of the spending priorities, all of the philosophies and the platforms.

I cannot say it was because they did not approve of the spending priorities in this government as to Family Services or to gun control or to boot camps or to any issue.

So, I think, as a member, a candidate in the last election who represented a philosophy in a political party that received almost a quarter of the votes of Manitobans, I have a duty to represent that viewpoint in this committee and in the Manitoba Legislature. Just as I represent not only the people who supported and voted for me in The Maples, I represent all the people of The Maples, this government represents not only the 43 percent of the people who voted and supported their party and their candidates, they represent all Manitobans.

That viewpoint, the opposing viewpoint has to be listened to. Of course, they have the mandate as a majority government to do what they wish. Morally, I think there is an obligation to look at the opposing, the other viewpoints of many Manitobans.

So, as I started to say, the minister's statement starts off talking about the importance of the balanced budget and its effect on Family Services and the quality of life for families. Yes, a balanced budget is important, but there is also a social budget.

As a community constable working in a core area of the city of Winnipeg—I know I ran into the member opposite, the member for Burrows (Mr. Martindale) when I was a community constable, he was working in the same area—many of the issues that are dealt with by Family Services, of course, the greatest impacts are felt in that core area. You do not have to live in that area, you do not have to have come from that area to

necessarily understand it, but I am assuming that if an analysis was done on the amount of electoral support that this government got, it would be in inverse proportion to the needs of the poorest of Manitobans.

So I do not discount this government's concern about the issue, but until you have been there every day, you have seen the effects of the policies, you have been there at two o'clock in the morning with the person who is hungry and has fallen through the net of Family Services, it is an impression that is left in your mind for a long time following.

In daycare, I will say that our daycare system in Manitoba probably is one of the best in Canada. We have been far ahead of the rest of Canada as far as our daycare system, but we have got a long way to go. It still does not meet the needs of many parents. I think it is more of a shame to the rest of Canada rather than something to be necessarily proud of in Manitoba that our daycare system needs a lot of improvement. I am a former member of the Manitoba Child Care Association, being on the board of directors of a number of daycares, and I know the discrepancy between the amount of education we expect of daycare workers and the benefits that they receive. They often commented, it shows the value of society where we will pay more for people doing occupations that maybe do not have the personal contact with children where it is creating products and selling cars or selling groceries, you are paid more than taking care of our most valuable asset, our children. So, we have got a long way to go there.

There will be a tendency, I think, through these Estimates through all this Legislature to raise the spectre of the big, bad federal government and their spending cuts. I, as every other Manitoban, will stand up and scream for more money. The same as I remember—I come from a very large family and when my grandfather was a fairly affluent farmer in Charleswood, my dad would scream that I would get my fair share of all the grandchildren. Well, yes, I will stand up for Manitoba and I will scream, but let us not let that detract from saying, with what we have got, what are we going to do with it? What are going to be our spending priorities? Let us not put all our energy at pointing fingers at the federal government.

I was a member of the Seven Oaks School Board and we could have sat around screaming about offloading by the provincial government. When the spending caps were put on us and the inability to raise taxes, we said, okay. We had a moment of angst and then we went on to say, okay, that is our situation; what are we going to do with the money.

I think that is the business of this government, and that should be the business of the opposition here to say, okay, it is a bad situation, we would like more money, but this is what we have been dealt with, and we will continue to lobby for more money from the federal government, but within that sphere, what are we going to do with it, what are going to be our priorities, what is the Manitoba government going to do for the people covered by Family Services?

* (1010)

As I said, I have just been assigned this role of critic for the Liberal members in the Manitoba Legislature, so I do not have the staff, the research, the background yet, but I just wanted to assure that I have a keen interest, the Liberal members of the Manitoba Legislature have a keen interest in Family Services. We may not be able to devote all the time that we would like to be critics in this area, but we just want to put on the record our concern for this department. Thank you.

Mr. Deputy Chairperson: Item 1. Administration and Finance (b) Executive Support (1) Salaries and Employee Benefits \$481,600.

Mr. Doug Martindale (Burrows): Under 1.(b) Salaries and Employee Benefits, Administrative \$240,000. Are we on the same page? Page 25? Could the minister tell us if those are merit increases over last year?

Hon. Bonnie Mitchelson (Minister of Family Services): Mr. Chairperson, yes, they are merit increases and employee benefits that are the reason for the increase.

Mr. Martindale: Mr. Chairperson, I have the annual report for the department for '92-93. I presume that the

'93-94 report is not out yet. It is too soon. It has not been tabled yet. It has been tabled.

Mrs. Mitchelson: It has been tabled in the Legislature, and we do have copies here if you would like a copy now.

Mr. Martindale: Mr. Chairperson, I am embarrassed that I do not have it with me, but I could not find it in my office. I moved offices. That is my excuse. I have not unpacked yet, so perhaps I will come back to the annual report later with questions. I am ready to pass this line.

Mr. Deputy Chairperson: 1.(b)(1) Salaries and Employee Benefits \$481,600—pass; 1.(b)(2) Other Expenditures \$80,700—pass.

1.(c) Children's Advocate (1) Salaries and Employee Benefits \$207,800.

Mr. Martindale: Mr. Chairperson, I have some questions about the Children's Advocate report, his first annual report for '93-94, called Taking Up Their Cause, and there are numerous concerns here that the Children's Advocate has identified, almost so numerous that it would take a lot of time to get into all of them, but many of them are very important, so I am going to spend some time on this appropriation.

One of the concerns that the Children's Advocate raises on page 8 in his report is that he has not always been able to successfully influence policy or funding decisions, and one of the reasons for that is because he has not been invited to participate in any of those processes.

I would like to ask the minister if there has been any change in that either since the report came out or possibly in the change of ministers, because he does talk about the previous minister. So could the current minister tell us if he is now invited to participate in policy and funding decision meetings?

Mrs. Mitchelson: Mr. Chairperson, if I can just indicate that—I guess I would say that I do not believe it is the role of the Child Advocate to participate in the budgetary process. The roles are clearly defined

through legislation, and he is there to serve the best interests of children and to ensure that children are protected and nurtured and cared for and that our systems are providing the kinds of supports that are needed for children.

He has made recommendations in his annual report, and as any other recommendations that come to government, we look to those. If you can just go back to the report, it covered the year from—it was the '93-94 fiscal year, and it was his first annual report. It was a little late coming out, and from the time the report had been written and the recommendations that were made in that report came to government, there were many of the recommendations that were already being implemented or underway.

There were other recommendations that were more long-term recommendations, some medium-term, some long-term, and we are continuing to work to try to implement some of the recommendations that were made. There are others that are still outstanding, and there are some that we accept as recommendations that we will be able to implement.

So we are moving, but I do not believe that it is the Child Advocate's role to determine funding. That is a budgetary process. We have to determine in the Department of Family Services what our priorities are.

It is clear that our priorities have been for children. You will see an increase in the amount of money we spend on protection and prevention in the Child and Family Services area.

So it has been a high priority, and we will continue to ensure that children are protected. We will continue to focus our energies and our efforts on early intervention, family support, family preservation, in those areas; so if I can indicate, we will continue to work to implement them.

We will work with the advocate. I meet with him on a regular basis. There are issues that he raises around specifics. He has talked about broad systemic problems. I do not disagree that there are problems in our Child and Family Services area. If in fact we had a system that was perfect, we would not need the

dollars, we would not need the resources, we would not need a Child and Family Services agency, we would not need an advocate. There are problems; he has raised issues. We are attempting to work very closely and very carefully with the advocate, the agencies and the families that are involved to ensure that we find better ways of protecting and ensuring that the children are safe and secure.

Mr. Martindale: We will get into the detailed recommendations later, but to continue on page 8, unfortunately the Children's Advocate disagrees with the minister. He goes on to say: and secondly the majority of such activities and decisions are directly related to government's agenda for cost reduction and not necessarily service enhancement based on the actual needs of children and families being served by the Child and Family Services system. So I think, to paraphrase what the Children's Advocate is saying, you cannot separate the budget or financial decisions from the service needs of children.

He goes on to say: The Children's Advocate cannot remain silent when funding is being reduced or decisions are being made which impact on the ability of the Child and Family Services system to meet the needs of children. This is the true essence of being an advocate for and on behalf of children and youth in Manitoba.

So I would like to ask the minister, if the Children's Advocate is not part of budgetary meetings and decisions, does he in his regular meetings with the minister make recommendations on areas that have to do with budgetary decisions?

Mrs. Mitchelson: I suppose the advocate has indicated that he believes there have been cuts and reductions in the support for children in the province of Manitoba, and I guess we would have to agree to disagree. I do not agree with that statement. If you look at the amount of money that is going into support for children, there has been a major increase, not a decrease, in the amount of money. I do not see a cut. I see an increase in supports for children, in the dollars that are spent in supporting children in the province of Manitoba. So that is an area that we will agree to disagree on.

Mr. Martindale: Of course, the reason for the increase in the total budget for support for children could be an increase in the number of children coming into care. At the same time, we know that there have been reductions in foster family rates, for example.

On page 11, the Children's Advocate says that there is not acceptance and confidence in the Children's Advocate, at least not the kind that he has been expecting from various parts of the Child and Family Services system. I would like to ask the minister if, since this report was published, she can indicate if the Children's Advocate feels there is more confidence and acceptance in the Children's Advocate now. Has there been a change?

Mrs. Mitchelson: It must be remembered that it was this government that did put in place a Children's Advocate because we felt that there was a need for someone to be looking after the best interests of children.

It was our legislation and our government that put in place the Children's Advocate. We have heard the recommendations that he has made. The process that has been followed since the report came out is that it was circulated broadly throughout the community. I did request the Children's Advocate to meet with all of the agencies that were involved in delivery of services to children. I have asked all of those agencies to respond back to me by the end of June of this year with comments on the Child Advocate's report. The advocate has met with several agencies. There are still some outstanding, but I think he has attempted to meet with every agency or set up meetings with each agency throughout the province.

* (1020)

I have to say that the issues surrounding children are very difficult issues, individual issues, and my heart goes out to any child that is abused or neglected. In a perfect world, we would not see the numbers of children in care that we see in the province of Manitoba or right across our country. I think it is important and incumbent that government, that the Child Advocate and the agencies, the people who are involved with caring for children who have fallen through the

cracks—and we have to remember that the reason that we see children in care or children having to be protected is because somebody has neglected or abused those children in the first place, and then you have a system, you have agencies, you have people who are in place to try and pick up the pieces after the fact.

It is incumbent that we work very hard and very carefully to try to ensure that families accept the responsibility for parenting and have the skills and the ability to parent their children. You know, it is one of the biggest responsibilities, I think the biggest responsibility that any of us ever undertake, is to raise and nurture and love our children, and, obviously, there are those who do not take that responsibility seriously. We are then having to spend major resources in trying to fix the problem after it has happened.

I just have to say that it is incumbent upon all of us to look for constructive and positive ways to try to deal with the situation. We need to put our heads together around this. It is fine to lay blame. The initial blame has to go to those who have abdicated their responsibility to parent their children, and we have to find ways to try to put the tools or the programs in place to ensure that people accept that responsibility.

You know, if we could stop the problem before it happens, then we would not be in the situation of dealing with very troubled kids in our society, and our system.

Mr. Martindale: Well, unfortunately, Mr. Chairperson, the minister did not answer the question.

The question was, does the Children's Advocate feel that there is more acceptance and more confidence in him and his role now than when he was reflecting on his first year as advocate? Perhaps the minister would know whether or not there is more confidence in him from her regular meetings with him.

Mrs. Mitchelson: Mr. Chairperson, I would sense that the lines of communication have opened up. There was a lot of criticism of the whole system, and I think we have all come to the realization that the Children's Advocate, the department, the agencies, are trying to work better together, trying to find solutions together.

I would hope that the next annual report will reflect that there has been that effort to co-operate and ensure that we are putting children first in all of our discussions and our decisions.

So I would sense that the lines of communication are opening up and that everyone is trying to work together, and at the meetings that have been facilitated by staff from my department, the agencies and the advocate have all been involved in those meetings, and I think there is a sense that there is a willingness to want to work together to solve the problems.

Mr. Martindale: Mr. Chairperson, I would certainly hope for the minister's sake as well as for children in need of care in Manitoba that the next annual report is much more positive, because this report is devastating. It is an extremely critical report of this government and this minister's department and some of the agencies and organizations that provide service.

Going back to the minister's previous answer, I am really disappointed that the minister would blame people who in many cases are victims, namely parents. It is quite amazing that the minister would even use the word "blame," especially since, you know, her government's policies have contributed to many of the problems.

We have very high unemployment in Manitoba. We have a lot of hopelessness and despair. There have been cuts in social assistance, and a lot of this has put tremendous pressure on families, many of whom find that they cannot cope and have difficulty raising their children.

At the same time as there have been cuts in social assistance and other areas, this government betrayed an election promise and instead of finding \$10 million for a new arena, they found \$37 million for a new arena. So I would hope that the minister will refrain from blaming parents for the abysmal statistics of the number of children in care in this province, which I understand is the highest in Canada.

To continue on page 11 in the advocate's report, he feels that there is an unrealistic self-view of infallibility and omnipotence held by many within the system. I

am wondering, since his report has come out and since parts of the department are being asked to comment on it, if they have got the message and if they are changing their attitude, so I would like to ask the minister if some progress has been made in the last six months in that area.

Mrs. Mitchelson: Mr. Chairperson, I would like to think and believe that there is progress being made on a daily basis.

There are a lot of issues that need to be addressed. If my honourable friend can recall, we did announce during the election campaign that we would be doing a major review of The Child and Family Services Act.

We are in the process now of putting in place a mechanism to do that, looking at a piece of legislation that is somewhat outdated and trying to get community dialogue going around what changes need to be made in that legislation, and I think there is a willingness on behalf of the department, the agencies and I would say the advocate, too, and the community, to address the issues surrounding children and try to find better ways of delivering service and ensuring that children are nurtured and loved and cared for.

Mr. Martindale: When will this major review of The Child and Family Services Act be completed?

Mrs. Mitchelson: Mr. Chairperson, when the process will be completed I cannot indicate. I can indicate that we will be embarking upon the process of a major review in the very near future.

Mr. Martindale: Will there be public consultation?

Mrs. Mitchelson: Absolutely.

Mr. Martindale: In a public way or just in meetings behind closed doors with agencies?

* (1030)

Mrs. Mitchelson: Mr. Chairperson, I think there is enough concern in the public, the people of Manitoba, to want to ensure that the issues are fully addressed and there is dialogue around many of the issues that have

been raised and brought to our attention from the public.

I cannot indicate today what exactly the process will be, but I can guarantee that the public will definitely have their say.

Mr. Martindale: Well, I would urge the minister to have public meetings, so that we know what people's concerns are. If the minister only consults with agencies and their boards, we may never know what the concern is on, so I hope the minister is assuring us that there will be public meetings then.

Mrs. Mitchelson: Mr. Chairperson, absolutely, the public will be involved as a very active partner in the process, and I am not going to sit in my office behind closed doors only with those who are providing services to children and expect that we will get the answers to all of the questions that have been raised around the issues of protection and support for children.

Mr. Martindale: I think the minister is being evasive. I think there is a big difference between consulting the public and having public meetings, and I was looking for some assurance that the minister would have public meetings, but we are not getting that assurance.

Could the minister tell us if she plans to bring in amendments in the second session of the Thirty-sixth Legislature?

Mrs. Mitchelson: As with any major review of legislation, it is hard to determine what the time frame would be. I would imagine when you look at any other major review and if you do want to genuinely consult the people of Manitoba, there must be a process that allows for the opportunity for that input.

It may be a process that takes a couple of years before major changes to legislation would be made, but that does not mean to say that if there are issues that need to be addressed on an individual basis, that there might not be amendments, but I would think that if we are looking at a whole new act and a new way of delivering service for children, that it might be up to a two-year process.

I would not want to predetermine that or prejudge that, based on trying to ensure that people have an opportunity to give us their opinions on what the problems are today and how they need to be addressed.

Mr. Martindale: Mr. Chairperson, the Children's Advocate has numerous recommendations, and I guess that raises the question of how quickly those recommendations are acted upon or implemented, and I am wondering if the minister could tell us what she considers to be a timely way to move on those recommendations.

Mrs. Mitchelson: Mr. Chairperson, I do not know if we want to go through the recommendations one by one.

Mr. Martindale: Well, we are going to later.

Mrs. Mitchelson: Okay—and discuss those and if that is the case, maybe I could indicate at that time what time lines or what time frames might be involved in each one.

I think with a major review of the act, we can look at and take into consideration many of the recommendations that have been put forward by the advocate, and some of those recommendations could be addressed through the process of review of the act.

It looks at the roles and the responsibilities then of the department and the reporting relationships and that kind of thing, and I think that is a good opportunity to get public input and dialogue going around what they really believe government should be doing, what those agencies that are mandated to provide service should be doing—and are we doing a good job right now?—and what needs to be changed.

Mr. Martindale: The Children's Advocate report on page 21 says: There must be a commitment to resolving these problems in a timely and sensitive manner. I am disappointed that, first of all, the agencies are being consulted, and the advocate's report is dated December 1994—and I believe it was early December—so more than six months have gone by for a response by agencies which seems like a long period of time, but, even worse, the minister is indicating that

it might take two years to bring in new legislation. Now I understand that legislation takes time, but I do not believe that two years, or even two years from now—so we are talking two and one-half years—is a timely and sensitive time to respond to the advocate's recommendations. Does the minister think that two and a half years is a timely and sensitive way to respond to serious problems?

Mrs. Mitchelson: I guess we have had a piece of legislation and a way of delivering service to children that has been in place for many years, and, very possibly, the way we are delivering service today is outdated. It does not mean that we will not implement and look at change on a timely basis where we can make change.

When you are talking about putting a new law into place and you are looking at legislation that not only our government but governments before us were operating under, I do not think it is unrealistic to think that we need to get major input and major feedback from our Manitoba community. That does not mean to say that the recommendations that are in the reports—some of them have been acted on; others we are working on.

But when you look at changing a whole new structure and putting a whole new structure in place, I do not think it is unrealistic to think that it might take a couple of years. That does not mean to say that all of the recommendations that have been made by the advocate will take two years to implement. We have implemented some already. We are in the process of working on some others, and we will continue to do that.

Mr. Martindale: Continuing on page 21 of the advocate's report, he says that, though the legislation speaks to the provision of family support services, in reality, very little funding is directed to this area of prevention. Now, at the risk of hearing the minister's speech on prevention, I do need to ask: Does she agree or disagree with the advocate on this? I know the minister is fond of talking about prevention, but the advocate is pointing out that very little funding goes toward prevention. So does the minister agree with this observation?

Mrs. Mitchelson: I think you will find that this report was written before the budgetary decision was taken in last year's budget to put in place a Family Support Innovations Fund that looked at early intervention, early child development. So the report, I would say that that comment in the report has already been addressed, to some degree, with the budgetary changes that were made in our last budget process to put in place a Family Support Innovations Fund so that agencies and other community organization would have the opportunity to access funds to try new ways of delivering services to children with the early intervention, the family supports.

Many of those programs are underway, and, hopefully, we will be seeing some positive results as a result of the changes in the way services are being delivered. So, if I could say, I believe that that issue has been addressed to some degree already.

* (1040)

Mr. Martindale: I thank the minister for that answer, and I look forward to asking more detailed questions on the Family Support Innovations Fund when we get to the Child and Family Services part of the department.

The advocate goes on, on page 22, to point out that, because of the lack of resources for prevention, which we will get into in more detail later, he believes that that is the reason why Manitoba has the highest number of children in care per capita in Canada. I am wondering if the minister could tell us why she thinks we have the highest number of children in care per capita in Canada.

Mrs. Mitchelson: That is an issue that we have been trying to come to grips with and try to understand. One of the reasons for looking at the Family Support Innovations Fund was to try to reduce the number of days cared, to try to get families reunited, if at all possible, as quickly as possible.

I think all indications would be that the longer a child remains out of a home and there are not any supports put in place, or there is not an attempt to try to get families back together, if at all possible, the harder it is to accomplish that.

So that is one of the reasons that the Family Support Innovations Fund projects are looking at trying to reunite families or trying to put the supports in place in families so children do not have to be brought into care.

Many of the projects are focused around trying to do just that, and because they are pilot projects, we will be measuring the outcomes and looking at what the results of the new way of delivering service will bring. We are hopeful that some of the new initiatives will, in fact, keep children in their homes with supports to ensure that parenting skills are learned and family problems are resolved.

We also have a new adoption initiative. We are finding that we have many children who are permanent wards that will never go back to their original families, who are in foster care. So we are trying to get the community, the agencies and the government department working together around ensuring there is a priority placed on providing permanent homes for children who are in permanent care and never seem to get out of our system.

So the agencies have come up with some ideas, and the community has come up with some ideas, and we want to support those new ways of delivering service and see whether we can make a difference and can reduce the number of days care and the number of children in care.

* (1050)

Mr. Martindale: I would like to read an entire paragraph from page 22, because I think it is a very significant paragraph.

The Children's Advocate says, and I quote: To illustrate this point, the Children's Advocate was advised by a few workers that they were not prepared to apprehend a child because the abuse was not severe enough and the agency's resources were limited. My concern is, how many bruises or child deaths does it take for the government to acknowledge that the Child and Family Services system is under tremendous strain? Agencies should not have to be forced to pick and choose which children they can protect. Our obligation towards all children must be fulfilled.

This is something that I hear from people in the community and staff of Winnipeg Child and Family Services from time to time. It seems that it is the most severe for 16- to 18-year-olds, that they will not be taken into care or provided any resources unless it is an extreme crisis, and that concerns me greatly.

Also, just this morning over coffee, someone was telling me that they reported a concern about one of their neighbours to an elementary school principal, and I know this elementary school principal. He is a very concerned person and very aware of what his obligations are under The Child and Family Services Act.

The concern that was raised was, I think, quite serious, but the school principal said, we cannot report this to Child and Family Services because it is not serious enough. We already have a number of children in this school who are involved with Child and Family Services, and we do not think that this situation warrants phoning Child and Family Services.

I am very distressed when I hear stories like that from the community because I think they should be able to make that phone call, even if it only means one home visit to find out that things maybe, in fact, are okay, or not.

Obviously, because of budget restrictions on Winnipeg Child and Family Services, they are not able to do that, so agencies and schools out in the community have got that message—do not phone unless it is extremely serious. I think the minister should be concerned about this, and I would like to know what her response is to this very critical observation by the Children's Advocate and the illustration that I gave, as well.

Mrs. Mitchelson: I would have to say that I am extremely concerned if, in fact, there are children that are being left unprotected in our community.

As I read in this report the concerns that were raised, I guess on an individual basis, with the Children's Advocate, I would be extremely concerned if workers out there were not doing their job in protecting—[interjection] Well, just a minute, I guess the

role and the mandate of those who are providing service to children is to try to ensure, in cases where there is an allegation of abuse, that those cases are followed up on.

I hear the criticism that there is not enough money in the system. We have put more money and more resources into supports for children through Child and Family Services year after year. We have never not funded any deficit that has occurred in our Child and Family Services system. You look right across all government departments, all government services and you look at hospitals, we have made very strong statements that we are not going to cover deficits, that hospitals are going to have to live within the budgets that they have been allocated and try to find different ways of delivering service.

One area within government that we have increased year after year, support and covered deficits, is in the Child and Family Services area. It may be a band-aid approach—[interjection] I take very seriously, you know, the comments and the sense that my honourable friend would be trying to leave an impression that I, as a minister, or our government do not care about children and children that are not being protected or cared for in their family circumstance, their situation or in any type of care that they might be in, whether it be foster care or wherever.

I do not think there is a Minister of Family Services that has had to deal with individual cases of abuse and read briefing notes, and hear instances where children have been abused and neglected, that has not lost sleep at night wondering how we can resolve the problem and get to the bottom of the issue. If more money was just the answer, I think we would all be prepared to put absolutely every dollar we possibly could into the system to try to make it work. I am not sure that more money is necessarily the answer. If I could be in every schoolyard and in every house on a daily basis monitoring how people were caring for their children and removing those children immediately if I felt they were being abused or neglected, we might be able to solve the problem.

The reality is that I cannot be there, and there is not anyone that can be there. We have to believe and trust

that families are going to try to manage and try to parent their children in the best possible manner. We know that that does not occur. We know that children do get abused and neglected, and we do know that we have to try to find a way to provide support and treatment and safe homes for these kids. I wish I had all of the answers. I wish I knew what all of the answers were. I think both of us—I look at my honourable friend, and I know that he cares as much as I do.

I guess it is fine to lay blame and to say it is government policy. I am not sure that, in the area of Child and Family Services, there has been much of a change in policy or direction. We are spending more money. We have mandated agencies. We have organizations. We are doing more and more to try to ensure that we care for children, yet we are not seeing the results we would like to see. I wish I had all of the answers. I think that this might be a time for us, as caring members of society, to dialogue around what the solutions might be. Maybe some suggestions or some ideas could come forward through this debate that would help to change the direction we are going in.

I think we have to trust and believe that people out there that are caring for children that have come from abusive situations are trying to do what is in the best interests of the children, but, you know, are we doing things the right way? Is there an ability to change the way we are doing things? I do not know. I am struggling to find those answers, and I am struggling to try to work with innovative, new ways of delivering that service. If we can identify the issues early on, before they become major problems and before our children get too damaged, maybe we can make a difference.

I do not think there is anyone that works in the system that honestly, in their own heart, does not have the best interests of children in mind as we try to implement programs. I think that is one of the reasons why the agencies and those that are out there caring for children have come forward and said, let us see whether we can find a different way of delivering service; let us get to the problem before it gets us, I guess, before we get children that are in a circumstance or situation where they are Level 4, Level 5 care and

they are so damaged it is hard to believe that we will ever find a solution to their problems.

(Mr. David Newman, Acting Chairperson, in the Chair)

Mr. Martindale: I would like to go back to the Children's Advocate's statement where he says, agencies should not have to be forced to pick and choose which children they can protect.

I would like to ask the minister: Why is the Children's Advocate having to write this? Why are agencies forced to pick and choose which children they can protect?

Mrs. Mitchelson: Mr. Chairperson, and I do not know why that statement was written, but I would not anticipate or expect or I would not direct that anyone should pick and choose what children should be protected. I think any child that is in need of protection should be protected.

Mr. Martindale: Well, Madam Minister, I think it is because they do not have the budget. I think that they would like to be able to provide protection in every case where it is required, but they are saying and the advocate is saying that they do not have the resources to do so.

I would like to continue on page 22. The advocate reflects on case planning and case supervision and says—actually he quotes from one agency's counsel, I presume legal counsel—we have no problem proving that children need protection. It is in the case planning where we fail.

I would like to ask the minister if changes are being made in case planning?

Mrs. Mitchelson: Mr. Chairperson, I guess the one problem I did have with the report was that, in instances where an individual was quoted anonymously as having stated something, my concern was, if that was stated and the advocate was there to protect the best interests of children, how was that followed up on? Who was that reported to and was there any action taken? Unfortunately, until the report was tabled and

made public, in many instances the agencies were not aware of the comments that were being made in the advocate's report. I guess that is part of the problem with having a new structure and a new office put in place to try to monitor. I think, you know, it would be very important that the advocate's report would in fact reflect what had happened.

If he heard that there were children out there that were not being treated in the proper manner or were not receiving the service that they should be receiving as a result of a problem, that would be reported to the proper authorities. There would be a request or recommendation for some action to be taken and his report would reflect whether or not action was taken and whether or not the problem was resolved.

Unfortunately, when the report came out I became aware that in some instances the agencies or the proper line of communication, the supervisory staff or the head of the agency had not been notified. There had not been recommendations made, and there had not been an opportunity to resolve the problem.

So I think part of what we need to do—and I have discussed this with the advocate, too—I want to know on each case if someone out there in the community is saying we do not have the resources, we have not treated children in a proper manner. If that is in fact happening, that should be investigated immediately. There should be recommendations made on how we change the way we do things, and the advocate should report on whether in fact the agency has responded, the department has responded, to recommendations that he has made. There has to be that dialogue. We need to be addressing the issues as they arise, and I am hopeful that future reports will reflect and criticize when action has not been taken as a result of the advocate bringing those concerns forward to the appropriate people.

Mr. Martindale: I think the minister in her response criticized the Children's Advocate who works for her. That is pretty amazing, and he is not—

Point of Order

Mrs. Mitchelson: Mr. Chairperson, on a point of order, I am not criticizing the advocate. I think when

you have got a new office in place with a first annual report that there are issues that have to be worked out. You know, I am very concerned if in fact there are people out in the system that are making comments that would indicate that children are not being appropriately served by our system that those should be followed through on immediately.

I think that is critical if we are going to change the way we provide service to children. When an issue is identified it needs to be immediately looked into, and let us all try to work together to see whether we can find a better way of ensuring that children are protected. So he may say I am criticizing the advocate. I think constructive criticism in how we, on a very timely basis, get to the bottom of a specific issue and get it resolved in the best interest of the child is very important for all concerned.

The Acting Chairperson (Mr. Newman): Honourable minister, I believe that would be a dispute on the facts, and perhaps you could carry on with your question.

* * *

Mr. Martindale: Where I disagree with the minister is that she seems to be implying that these are individual problems which should have been taken care of within the agency. In fact, the advocate goes on to say that he has seen a vast diversity in the quality of case planning. This quality is neither agency specific nor to a particular service unit. In some instances, no case plans were found to exist. In other situations, even though case plans were developed, some agencies did not implement them as expeditiously as possible. In the majority of situations, neither the children nor the family were involved in case planning. As well, once a plan is put into place, there appears to be a lack of flexibility that would allow for the plan to be revised if it does not appear to be meeting the needs of the child or family.

I conclude, from those two paragraphs, under case planning and case supervision, that he is talking about a problem that is widespread, not individual situations. I would like to ask the minister if changes have been made in case planning since last December.

Mrs. Mitchelson: We are working on that presently within the agencies and within the system. We have a competency-based training program that does look at standards and ways of delivering services, ways of dealing with individual cases and some standard structure and protocol right throughout our Child and Family Services systems. We have embarked upon competency-based training. I think all supervisors within the agencies have been trained, and now the field staff are being trained in a consistent manner so that some of the issues that have been raised in the Child Advocate's report can be addressed.

Mr. Martindale: Continuing on page 22, the Children's Advocate has some criticisms of permanency planning and says permanency planning is supposed to encompass the notion that every child has a right to a long-term care plan and placement in a family environment wherever possible and that this is being bastardized. Well, I looked that up in the dictionary, and it means, declared illegitimate. I think the advocate is saying that, even though there is supposed to be a notion of permanency planning, in fact this notion is illegitimate. It does not exist.

He goes on to say, and I quote: Agencies have used this concept in order to offload children with particularly demanding behaviours on extended family members through private guardianship or extended family foster placements. Unfortunately, many of these family placements receive little, if any, special training, supports or compensation for the care of these children. Often these placements break down, resulting in the agency having to re-intervene in more aggressive and intrusive manners.

I think this is a very serious criticism of permanency planning, and I would like to ask the minister if major changes have been made in this area, not just in the planning but in providing supports to families, since this report was submitted to the minister.

* (1100)

Mrs. Mitchelson: Indeed, this is area that I have had a special interest in. When I talked a little earlier about our new adoption initiative, I think it is critical that we all work together again to try to ensure that

permanency planning is a priority within the agencies and that we, wherever possible, try to find a permanent home for children. I think children deserve no less than having the ability to have a permanent, loving and nurturing home.

(Mr. Deputy Chairperson in the Chair)

Since we embarked upon this initiative, we have an adoption co-ordinator who is working very closely with the agency. We now have an inventory of all the children that are in permanent care. In the Winnipeg agency, we are looking towards continually updating and reviewing permanency plans and trying to ensure that we, wherever possible, can put the supports in place for the children as they are moving through the system.

When you look at, say, post-adoption services, I think there is an issue that has been brought to my attention. We need to be looking at what we can put in place, and I am not sure that we need a different system that deals with services for children that are in foster care. Maybe we need to be co-ordinating our efforts and our energies.

We have discussed this and are now in the process of looking at, when we put services in place for adoptive children, maybe there is another process or a similar process, or maybe we can work together to ensure that post-adoption services and services to foster families are co-ordinated in a fashion that we can maximize the use of our resources.

Mr. Martindale: Going on to page 23, determining risks and needs of children, this is one area of the report that kind of surprised me because I was already aware of the Manitoba risk estimation scale, which I believe was developed by Faculty of Social Work staff at the University of Manitoba.

The Children's Advocate points out that there is at least deficiency in the risk estimation scale and recommends considering a broader assessment tool developed in England. I am wondering if the minister's staff has had a chance to look at this and whether they think that it could be used to improve the Manitoba risk estimation scale.

Mrs. Mitchelson: I guess we sense that we need a little more experience on the process that has been put in place in Manitoba, to see how well it does work. We are certainly not opposed to looking at what is happening in other jurisdictions, and what we want is the best system, but I guess we have not had enough time to really evaluate the process that is in place here in Manitoba right now.

Mr. Martindale: I presume that the reason for that is that the Manitoba risk estimation scale is still fairly new.

Mrs. Mitchelson: It was started about three years ago, so it is relatively new, and we are still trying to determine how well it is working.

Mr. Martindale: Going on to the topic of treatment and resources for children and families, the advocate reports out, and I quote: The availability and adequacy of appropriate treatment resources continues to be sadly lacking within the Child and Family Services system. Agencies are faced with many of the same realities that families are faced with, that is, there is a general lack of resources for treatment purposes throughout the province, particularly in rural and northern areas as well as on reserve. Those resources that do exist often have long waiting lists.

I would like to ask the minister at least two questions on this. The first one is: what plans are being made to improve treatment resources, particularly in rural and northern Manitoba? That would be my first question.

Mrs. Mitchelson: I guess that is an issue that we are looking at and trying to address. One of the initiatives that we have undertaken, and I know we are going to talk about it a little later during the Estimates process, is the Child and Youth Secretariat. I think it is important that we maximize the resources that are available out there and look at co-ordination of services. The issues around support and treatment in rural and northern Manitoba are issues that do need to be looked at and looked at very carefully.

We have to see what mental health is doing, what other resources are available out there and ensure that Health, Education, Family Services and Justice are

maximizing what is there and seeing whether there is a way that we can find a better co-ordination of services within the existing resources that we have. So it is an issue that needs to be addressed, and we are working on it.

Mr. Martindale: Well, a supplementary question would be: is the department planning to provide more resources since the advocate seems to be saying that there is a lack of resources? The minister is using the word "co-ordination." I agree. There is always a need for more co-ordination, but the advocate did not say there is a need for co-ordination. The advocate said there is a general lack of resources, particularly in rural and northern Manitoba. So what is the department doing to act on that recommendation?

Mrs. Mitchelson: I am not saying that there are going to be more resources, and we may argue, or we may differ. I believe that more money does not necessarily mean better services. I mean, if we look at integration of services, if we look at what is happening for children in the Department of Health, what are we doing, reality tells me that there are going to be no new resources. We are going to have to look at co-ordinating the resources that we have in a better fashion and integrating resources that might be available that we are not using to the best of our ability. So there is not going to be more money. We heard the Liberal critic talk about having to dialogue around using the resources that we have in a better fashion, and we are going to have to do that. That is reality.

* (1110)

Mr. Martindale: Well, I commend this minister for her honesty, but whenever a constituent in rural or northern Manitoba contacts one of our caucus members and cannot get adequate service because there is a lack of resources, we will tell those individuals what the minister said in Family Services Estimates, that there are not going to be any more resources, and the minister will have to take responsibility for those unhappy people that cannot get the services that they need.

The second question that I have is regarding treatment for alcohol and drug abuse for adolescents.

The minister can probably inform me as to what is available from AFM, but I have had two pieces of casework where adolescents went to a facility in Saskatchewan, I think it is called White something, I cannot remember—White Spruce, Saskatchewan.

I would like to ask the minister why adolescents have to go out of province for treatment for alcohol and drug abuse.

Mrs. Mitchelson: The AFM does have programs available through the St. Norbert Foundation. They have a program in Selkirk, one in Sagkeeng. We have just recently approved a Family Support Innovations Fund in the Parkland Region for a substance abuse and family intervention program, so that is a new program that is just in the beginning stages.

I am told that there are some communities that choose White Spruce as the treatment of choice for their people. Some of the aboriginal communities, I understand, do not believe in the AFM philosophy. They would prefer the White Spruce program and are funded to enrol in that program.

Mr. Martindale: Could the minister tell us which community in the Parkland will be the site of the new program?

Mrs. Mitchelson: It is in the Parkland Region, and it is out of the Dauphin office.

Mr. Martindale: I am sure the MLA for Dauphin (Mr. Struthers) will be happy to hear that and also the residents of the Parkland Region. Maybe it will make up for the closure of the Human Resources Opportunity Centre in Dauphin, different service, though. Continuing on with the report, the advocate has some very serious concerns about foster care, on page 25.

It says: Advocacy is not valued by the system, and this commitment is often viewed as interference. Foster parents are rarely considered as members of the team.

It goes on to say: The screening of prospective foster homes within Manitoba has not undergone any radical revamping within the last decade.

He says: Monitoring support and training for foster parents is inconsistent, if it happens at all, and the challenges of finding and retaining foster parents with knowledge and expertise continues to hinder the system. As well, the shortage of culturally appropriate homes remains critical.

I would like to ask the minister, what changes have been instituted or are you planning to institute as the result of these criticisms of foster care?

Mrs. Mitchelson: That is something that I am very interested in looking at, how we deal with allegations of abuse in foster care.

I believe one of the recommendations from the advocate is to look at a different appeal process for how we deal with allegations of abuse, and I am interested in looking at, and in the process of determining, whether there is not a better way of looking into allegations of abuse in foster care.

Mr. Martindale: That is only one problem pointed out by the advocate. The advocate reflected on foster parents not being considered a member of the team, and that screening of prospective foster homes has not changed for a decade. Support and training for foster parents is inconsistent, if it happens at all.

I would like to know if there are plans to act on all of these concerns of the Children's Advocate.

Mrs. Mitchelson: Mr. Chairperson, there is funding of 50 cents per day per child in care for new training that is available. That is in the agency's budget, and, hopefully, will be undertaken. I agree there is an issue around the screening of foster parents that has to be dealt with and addressed, and I have to say, quite honestly, it has not been addressed as yet.

It is something that I feel needs to be addressed and we will be looking at.

* (1120)

Mr. Martindale: I hope the minister will be more than looking at it. I hope there will be action as a result of these concerns.

Going on to maltreatment, abuse of children in care, we could get into a lot of detail here. The Children's Advocate refers to the Suche report, and I know that the minister's department followed up on all those recommendations with a publication entitled, Government Response to the Independent Review of Reporting Procedures in Children's Residential Facilities. This is dated April 1992.

We are now at June 1995, and in December '94, the Children's Advocate still had a lot of concerns about these recommendations. Rather than going through the recommendations one at a time—because they are quite numerous—and going through the department's response of April '92 one at a time, I wonder if the minister would be willing to have her staff prepare an update on the recommendations and even in a similar format would be helpful, recommendations, current status, action plan and make it available to myself and to the member for The Maples (Mr. Kowalski).

If she would do that, it would be greatly appreciated, because I think obviously there are still some concerns there since the Children's Advocate has commented on it.

It is possible that, since a lot of these things have to do with legislation, that the minister is going to say that will be reviewed and possibly amended or changed in the new legislation, which I may hear quite often if I went through all the recommendations one at a time.

So I think because I have some time constraints, if the minister would provide an update—or I guess it is a question: Will the minister provide myself and the member for The Maples with an update?

Mrs. Mitchelson: Yes, we can get that prepared for you and provide it.

Mr. Martindale: Could the minister indicate some sort of time line for getting it to us?

Mrs. Mitchelson: Would about a month be acceptable?

Mr. Martindale: As long as I have it before the session resumes in October.

Going on to a new section, Aboriginal Children, the advocate talks about the First Nations Child Welfare Task Force Report, in fact, makes a very interesting comment that the \$500,000 that it cost could better have been spent on aboriginal children.

I wonder if the minister could bring us up to date on what is happening with that report and its recommendations. I know that I have asked the minister questions on this in the past, and I know that one of the main recommendations was that the federal government pass Child and Family Services legislation and give First Nations control over First Nations children, which, if acted upon, would be a major recommendation because it would mean that instead of the provincial government having the jurisdiction, the federal government would have the jurisdiction, and First Nations would become I guess mandated agencies. So that would be a major change.

However, I know that this minister has written to the federal minister who has said they are not going to act on that recommendation. I guess that puts into question almost all the other recommendations as well, so I would like the minister to bring me up to date on what is happening with that report and its recommendations, I guess, particularly if the provincial government is going act on any of the areas within their jurisdiction.

Mrs. Mitchelson: We have been trying to work with the native agencies to look at quality of service and delivery of service issues for children, but our honourable friend is quite right when he talks about a lot of the recommendations in that report being contingent upon the most important, I suppose, recommendations that would be federal legislation that would provide for the establishment of native child welfare agencies. Children, then, would be under the sole responsibility of the native agency set up under that federal legislation, and I have to say that we have not received much co-operation or support from the federal government around these issues. I have been out to meet with Minister Irwin, and, you know, there are some really big issues around child welfare on reserves that need to be addressed.

It all falls into the whole issue of dismantling of Indian Affairs, federally, and aboriginal self-

government, which, I know, not every member of our aboriginal communities is supportive of. I think we had some discussion and dialogue around some of the women and children on reserve in our last discussion around Estimates, and a real concern, that self-government is not the answer for them. They are very, very nervous about the additional power that might be put into the hands of the leadership, and they are not sure it is going to serve the best interests of women and children. So there is some fear about what self-government will mean, and I tend to think that, at times, we get caught up in the political dialogue from one level of government to another and forget what is in the best interests of the families and the children in the political process. So I have some real reservations about what it might mean.

We have some issues around some specific native child welfare issues that are of grave concern to me. It is very difficult, as a minister who, under legislation, has the responsibility for all children in the province of Manitoba and there is a jurisdictional dispute. We are not allowed to go onto a reserve to check and monitor the circumstances, situations to ensure that children are being protected. It is an issue that the Child Advocate and I have been discussing, you know, frequently and very recently.

It is difficult when you have another level of government, an aboriginal government, that is saying, those children are our responsibility, and not recognizing the provincial law when it comes to the statement that we have ultimate jurisdiction under Manitoba law.

Then you have a federal government that is not prepared, although they are supportive of self-government and are talking of devolving and dismantling Indian Affairs and turning everything over to our aboriginal community, to put in place the legislative authority for that power to change hands. It is, I guess, very disturbing for me. We would not want to get into a confrontation with an aboriginal community over the issue, but the reality is, if there is a child that is abused or hurt or killed, I could be severely criticized, yet we are not being allowed to monitor the situation to ensure that kind of thing is not happening.

So we are in some difficult circumstances right now, and some very pressing issues are going to have to be resolved. There has to be co-operation, and I am not sure that all the time there is the political will to put children first as opposed to worrying about whose responsibility it is.

I think it is all of our responsibilities, and we need to be working together. So I am really struggling right now with how to come to grips with some of these issues. I do not think the federal government has taken a stand. They would like to work without legislative authority, to change things and do things differently. I am not sure that is necessarily the right way to go.

In the absence of federal legislation, provincial legislation prevails. That means that we, as a government, I, as the minister, have responsibility for all children under the law, and, in some instances, I am being prevented from being able to do that job.

Mr. Martindale: I thank the minister for that answer. I acknowledge that nothing is happening for various reasons. So since we are stuck with the status quo, I need to ask about some of the advocate's observations and comments. On page 28, the advocate says, the effects of a lack of policy direction is most evident in the relationship between the Child and Family Support branch and the various First Nations agencies. Either the support branch is seen as being too heavy handed, or it appears that issues are simply ignored because of potential political fallout.

Now, I do not want to get into this if we are only talking about one or two communities in Manitoba. [interjection] Are we? Well, then, I would like to continue on to page 29, where the advocate makes further observations about services to 16- and 17- year-olds. I raised this earlier, and it is a big concern with myself and with staff of Child and Family Services agencies. I guess the basic question is, why are not 16- and 17-year-olds getting the kind of service that they are supposed to get?

Mrs. Mitchelson: Certainly, where there are protection issues, we are concerned that 16- and 17-year-olds receive service. I guess the issue comes, you know, if the 16- or 17-year-old willingly wants to

participate in a treatment program, those treatment programs are there and the supports are there.

In fact, when that child refuses to be a part of any treatment program or process, it is pretty difficult to mandate that activity to take place. I am not sure how old my honourable friend's children are. [interjection] You have a 17-year-old. We might get into some discussion around 17-year-olds. How many, at that age, still listen and still accept advice and take that advice and do exactly what they are told? I guess, we are experiencing or seeing, within the system, where major amounts of dollars are being spent trying to change the direction or the life of a young individual when that individual wants no part of that treatment.

Is that best utilization of our resources, or could it better be spent in other ways? So where there is co-operation and where there is a willingness and a desire to participate, the resources are there. Those will not be taken away. It is only in the case where, you know, a child does not want to participate that there is not service available.

* (1130)

Mr. Martindale: I would be quite happy to talk about my 17-year-old, Nathan. He listens to his parents 99 percent of the time, and he was chosen as a valedictorian at Sisler High School this year.

Going back to the Children's Advocate report, he points out that Child and Family Services agencies do not have the mandate nor resources to provide after-care services, which many former children in care could benefit from. He goes on to say that the problem that results from that is that they often end up coming back into the system.

Now, I do not whether he means when they are still 16- and 17-year-olds or not. I was at MacDonald Youth Services recently, and talking to the staff there, we heard that many adolescents who are part of Child and Family Services, when they turn 18, frequently they are not in school, they are not employed, and they end up being the ones who fall through the cracks and end up either on social assistance or on the street, which is why MacDonald Youth Services has a hostel.

So it would seem to me that it would make sense to provide service to 16- and 17-year-olds, even if it is not mandated, as a kind of prevention. This minister talks lots about prevention, believes in prevention. Here the advocate is saying that, as a result of these service deficiencies for young adults, particularly former youths in care, in all likelihood, they will become future clients of the system in regard to their own children.

Well, I guess I am making two suggestions: One is that they are going to become clients either of the Child and Family Services again before they turn 18, or they are going to become social assistance recipients after 18, or their children are going to end up in care, as the Children's Advocate points out.

So my question for the minister is, are you willing to act on this concern or have you already acted on this concern regarding resources for 16- and 17-year olds?

Mrs. Mitchelson: Mr. Chairperson, it is an issue and it is a major concern, and I think what the advocate has pointed out is very real.

We do know that very often—and I have talked very often about the statistics around young single parents. I mean, when you get a young girl that becomes pregnant and parents a child and decides to parent that child, we know that there are major, major issues involved. We also know that the children of those young girls who end up living in single-parent families tend to need the services of our child welfare system at six times greater degree than other families.

Those are pretty startling statistics, but it tells me that there is a lot of work to be done, a lot of work in educating. It goes back again to the comments I made about parenting being the most responsible undertaking that occurs in our society. Yet, very often people are not prepared and do not have the tools or the understanding of exactly what the implications of parenting are to succeed.

That is why we are seeing what we are seeing in our society today. So it is important that we start to work—first of all, I would like to prevent pregnancy at that age, but we all know that is unrealistic, to

completely prevent. I think it important that we try very hard to educate young girls and young men on the responsibilities of parenting and what exactly that does mean. I think at all cost, if there is a choice made to parent a child, that parent has to understand the full responsibility and the implications, and we have to ensure that parenting becomes the No. 1 priority above all else. So I am working on some innovative new ways of trying to get that message out and to work with young people around those issues.

My honourable friend mentioned Macdonald Youth Services, and I was just over there visiting in the last couple of weeks seeing how we could work together with them. I think it is important and it is critical that our mandated agencies and our nonmandated agencies out there are working together in co-operation to ensure that, if there is an issue and if there is a child that—and I am talking older children now—needs some sort of transitional support, those supports are there.

Macdonald Youth Services does great work. I am very impressed with the work that they do. We are dialoguing around how we can work together to address some of the issues, but it is critical that we start at the early end of things.

It all fits in, again—and I guess we will get to the Child and Youth Secretariat and how health fits in with Family Services, with education. Ultimately we know that—and one thing that probably is not mentioned in the advocate's report is that these are children that end up in our welfare system. They also end up in our justice system to a great degree.

So unless we are all trying to find the solutions together, we are not really doing a service to the kids that need our support.

Mr. Martindale: Just to conclude this section, I see that the Children's Advocate will comment on the implementation of a new policy statement from this department in his next annual report, so we will be looking forward to that to see if his recommendations have been followed up on.

I would like to go on now to the role of the Child and Family Support branch. The advocate points out on

page 31 that he has come to the conclusion that there is an apparent lack of vision and leadership within the Child and Family Services system and has some very interesting quotes: As for what the directorate does, we are confused too. We deal with them as little as possible. They do not do anything, anyway. There has been criticism accusing them of being nothing more than a bureaucratic or political tool. They are geared towards keeping a lid on issues.

That is rather interesting. They are probably the people that start running around and phoning around when Martindale raises an issue in the House or writes a letter to the minister.

He also says: Crisis management continues to be the norm.

He points out: They are the only part of the system that have not been formally and externally evaluated for their effectiveness and utility as the cornerstone of the system.

So those are some pretty serious allegations, and I would like the minister to respond to them if she could. I guess the questions are, has the minister acted upon these concerns and if so, what is she doing about them?

Mrs. Mitchelson: I would say that my honourable friend is probably right when he talks about—you know, when a letter comes into my office from a critic or from any member of our community that raises the serious allegation around how a child has been treated in the system, it certainly is the department and the departmental staff that try to get to the bottom of the issue and ensure that we have heard all sides of the concerns that have been raised and that the child or the family or the community has been treated in a fair manner. So, yes, that is part of the role and the mandate of the branch, to determine whether things, issues have been handled appropriately.

We do deal with a lot of case specifics. My office gets many calls from the general public, from families of children that have been apprehended that are very disturbed about the issue, and I guess part of the role and the mandate of the branch and the department is to ensure that, to the best of our ability, we know that the

public has been best served by the process that has been followed.

I think that—and here we go again to the legislation and the review of the legislation, but the whole role and the mandate of the directorate I think will be an issue that will be discussed and there will be some dialogue around during the review of the act. If there is another role and mandate that needs to be undertaken, I am sure that will come to light, and there may have to be some decisions made.

You are quite right. There are fires, occasionally, to be put out, but the issues that deal with children that come to my attention as the minister are issues that I think need to be fully and thoroughly investigated to try to ensure there has been fair and just treatment.

Mr. Martindale: Could the minister tell us if she plans to have a formal and external evaluation of the Child and Family Support branch?

* (1140)

Mrs. Mitchelson: As I indicated, as we go through the process of reviewing the act, the whole role and mandate of the directorate will be looked at in that review process, and that will be a process that will be external from the department.

Mr. Martindale: I have covered a lot of the topics that are also recommendations by the Children's Advocate. Rather than going through them one at a time, I would like to do two things. I would like to ask some questions on the recommendations, but I would also like to ask the minister if she would be willing to provide myself and the critic for The Maples with a response to the advocate's recommendations as to what action her department will be taking on them, in order to speed up the Estimates process.

Mrs. Mitchelson: I can undertake to do that, but I would like to put a qualification on that. I think we are waiting for responses back from the agencies regarding the Child Advocate's report.

I know the advocate is in the process of meeting with all of the agencies, so we will await the results of those

meetings. He and I are dialoguing around how the meetings are going and whether we are making progress or we are not. So I think there are a few things that are still ongoing that should be wound up within the next month. We will compile all of that information and sit down and discuss that. I indicated a month for the last report you asked for. I think we might be a little—two months or so, in developing that response.

Mr. Martindale: I would like to thank the minister for being so co-operative in providing that information to me.

Starting with the first recommendation, probably we will have to agree to disagree. I believe that the advocate should report to the Legislative Assembly. The minister thinks that reporting to the minister—well, I will turn that into a question.

What is the minister's response to the first recommendation, that the Children's Advocate be required to report to the Legislative Assembly?

Mrs. Mitchelson: I think that was an amendment that was put in the legislation as it was passed, that we review the office of the Child Advocate and the reporting structure within the first three years of the legislation being in place. We have undertaken to do that.

I would not say, quite frankly, at this point in time, whether the advocate should report to the minister or to the Legislature. I have no preconceived thoughts. I think we have to listen to the argument and the debate around that issue and come to some resolution. I am not hung up on any one way of seeing the office report.

Mr. Martindale: In that case, maybe I should submit my private member's bill for a third time. I see in a news release from Saskatchewan, dated March 22, 1995, that the advocate there is permanently appointed and must be approved by the Legislature. Does the minister plan to look at that when reviewing the legislation?

Mrs. Mitchelson: I think we will look at absolutely everything when we review the legislation, what is

happening in other jurisdictions, what is working, what is not, and what would be best suited to Manitobans' needs.

Mr. Martindale: The legislative review can happen within three years of coming into effect. Will the minister be reviewing the legislation this year, or next year, or are you going to wait for the three years to run out?

Mrs. Mitchelson: The process will be set up sometime between now and next June.

Mr. Martindale: Has the minister received a request from the Children's Advocate for more staff?

Mrs. Mitchelson: Yes.

Mr. Martindale: According to the Estimates book, there will be no more staff. There were four SYs last year, and there will be four SYs this year.

Mrs. Mitchelson: That is correct, but that does not mean to say that we have not provided additional resources for the advocate on an as-needed basis. We have seconded some people over to help with some of the backlog. I believe he is looking at hiring a summer student. At this point in time, there are no additional permanent SYs, but I think we are trying to work co-operatively to accommodate some of his needs. I know he feels it is a major issue, and we will continue to evaluate and monitor.

I guess, with the review of the Child Advocate's office imminent or coming up in the very near future, if the reporting structure should remain the way it is, there would be certain considerations. If the reporting structure should change, there might be other staffing considerations. At this point in time, if we can work co-operatively to try to provide some resources on a secondment or term basis as needed, we will continue to do that. With the uncertainty of what the structure might look like a year from now, it might be a whole new structure with a whole new focus. If it were reported to the Legislature, there might be another—we might be looking at different staffing needs, is what I am saying. To permanently put in place staff today,

when we are not certain of the future of reporting structure, I think, is premature.

* (1150)

Mr. Martindale: The Children's Advocate has recommendations regarding the Child and Family Support branch, specifically that less energy is spent on serving political and bureaucratic requirements. Can the minister tell us if that recommendation has been or will be acted upon?

Mrs. Mitchelson: As I indicated in one of my earlier answers, as long as the public is contacting my office and has questions about service delivery for children, I am going to expect that, in a very timely manner, the department investigate and provide those answers to me. I am also going to expect, through any budgetary process, that the department provide the support and look seriously at the requests and the requirements for services for children and expect them to be there to support that budget process so that in fact, when we are looking at priorities in the Department of Family Services, all of the issues around children will be taken into consideration.

I have indicated earlier also that, as we review the act, the role and the mandate and the structure of the directorate will definitely be a part of that review. I do want to indicate that, although there have not been a lot of major issues in the Department of Family Services, from time to time, we do know that emergencies arise, and there is a lot of publicity around individual cases or circumstances.

I want to ensure that I am briefed and up to speed and have the assurances that children are being dealt with in the proper manner. There are a lot of requirements by a minister of the bureaucracy on the Child and Family Services side, and I want to ensure that I am informed and the information is coming forward so that we can make policy decisions and changes in direction for funding that need to be made to see whether we cannot improve our child welfare system. I want to say that there are certain things that are required by a minister of the bureaucracy and those requirements have to be met.

Mr. Martindale: So the answer is no.

I would like to go on to page 40, under (d), No. 2, the advocate recommends the establishment of an aboriginal program directorate. Does the minister plan to implement this recommendation?

Mrs. Mitchelson: Here again, that was one of the recommendations that came from the Fox-Decent task force report, and I have some difficulty, quite frankly, in the absence of federal legislation, to set up an aboriginal parallel directorate.

My concern would be, and I think it would be a concern of all members of the Legislature, that Manitoba as a province cannot determine that we have special obligational responsibility to any one group in Manitoba society.

If in fact the federal government believes that through self-government and through turning over responsibility for all kinds of different areas of government to our aboriginal community they want to put in place legislation that would establish a directorate for aboriginal people, that is their responsibility, but we could have no end to the requests for parallel directorates for any segment of our Manitoba community, any group within our Manitoba community. And I do not think any government of any political stripe would want to give preference to any one group or community in our Manitoba society.

So I would have to say at this point in time, in the absence of federal legislation over child welfare and the setting up of a structure under federal legislation, we as a province are not prepared to move in that direction.

Mr. Martindale: What I hope is my final question for this line is, on page 41 the Children's Advocate recommends discussions with the Faculty of Social Work to change their curriculum, and it seems to me that there may be a need for this, because the recommendation right above it talks about front-line workers having no knowledge in the areas of child development, child mental health, healthy child sexuality, interviewing and communication skills with families. So has the minister initiated discussions with the Faculty of Social Work?

Mrs. Mitchelson: Yes, my department has started meeting with the Faculty of Social Work. I think it is critical that we do understand and know, and one of the criticisms the advocate has made is that really our students in the Faculty of Social Work do not graduate with the skills and are not prepared to meet the needs of the Child and Family Services system and the support for children that they should be prepared to meet. So we will work with them and—well, we have already opened the dialogue—we will continue to try to find some solutions.

Mr. Deputy Chairperson: Item 1.(c) Children's Advocate (1) Salaries and Employee Benefits \$207,800—pass; (2) Other Expenditures \$99,100—pass.

1.(d) Social Services Advisory Committee (1) Salaries and Employee Benefits.

Mr. Martindale: I have a lot of questions about the Social Services Advisory Committee and the appeal process, but I think there is only one important question to ask here. The reason for that is that with the repeal of the Canada Assistance Plan and its replacement with the Canada Health and Social Services Act, it is no longer a requirement that there be an appeal process.

So I would like to ask the minister: In absence of that requirement under federal legislation, does the Province of Manitoba plan to continue the current appeal system?

Mrs. Mitchelson: It is certainly something that we will have to discuss. I honestly believe that Manitobans should have the right and the ability to appeal decisions that are made, and even though it may not be a requirement, I think we would have to look very carefully at that before we discontinued any appeal process. It will be open for discussion, but I think the process has worked fairly well, and it is one avenue for people to seek some clarification around decisions that are made affecting their lives.

Mr. Martindale: Well, I am pleased to hear that the appeal process will continue in Manitoba in spite of the fact that it is not a federal requirement anymore. However, I disagree with the minister that the appeal process in place now works well, and I have some

detailed questions and suggestions for making changes and improvements.

Can the minister tell me if, when social assistance recipients are notified that their benefits have been discontinued or changed or any decision has been made that affects them, and they have the right to appeal, are they given the form on which the appeal should be made at the same time as the notification letter comes?

Mrs. Mitchelson: My understanding is that when there is a change in benefits, there is a letter that goes out to the person that indicates there is this change, and then it does indicate the requirements if you should determine you want to appeal the process. I am not sure what the rest of the question was.

Mr. Deputy Chairperson: The time is now 12 noon. Committee rise. Is there leave to go for another minute or two?

Mrs. Mitchelson: I think, Mr. Chairperson, if we could just get the question clarified. I might not have the answer right now, but I could provide it as soon as we come back this afternoon.

Mr. Martindale: My understanding is that the appeal form is not sent out at the time of notification. My question is then, would the minister change it so that the appeal form is included with the decision?

Mrs. Mitchelson: I will look into that.

Mr. Deputy Chairperson: The time is now twelve noon. Committee rise.

EDUCATION AND TRAINING

Mr. Assistant Deputy Chairperson (Gerry McAlpine): Order, please. Will the Committee of Supply please come to order.

This morning this section of Committee of Supply, meeting in Room 255, will resume consideration of the Estimates of the Department of Education and Training. When the committee last sat, it had been considering item 16.(2)(f)(1) on page 39 of the Estimates.

Ms. Jean Friesen (Wolseley): Mr. Chair, I had some questions to ask about special needs students under this line. There are a number of lines we could ask it under, but since we are here I wanted to ask about attention deficit disorder and whether the department was considering evaluations of students, as they do in some provinces, before entrance into school. Has it looked at any of those programs in other provinces—I think New Brunswick is one of them—to see whether it might be looking at that as a policy for Manitoba?

Hon. Linda McIntosh (Minister of Education and Training): I am advised at this point that they have not examined this as a policy item to this point. We do have an early identification system, as I think the member knows, that has been in place quite a few years, over a decade, and we provide grants to divisions for that early identification and we ask for early identification at kindergarten at the beginning of school. You cannot have early identification once you are midstream. Early identification means just what it says, right at the very beginning. Grants are provided to divisions for that purpose.

Mr. Chairman, just before we go on to the next question, there were some items that were asked for. We have those now and if I could just table them. I will just indicate what they are so the member is aware that we have the costs of the documents that she was looking for, fee-for-service payments and the apprenticeship handbook, the multiyear development plan for distance education, indentured trades, the hub schools, the Portage and Winkler proposal, the home schooling by region, and what is new. I have those here, and I shall put those on the table. I have them tabled for the members' benefit, for their information.

Mr. Assistant Deputy Chairperson: I thank the minister for those submissions.

Ms. Friesen: I just wanted to follow up on the early identification program. Is this specifically related to attention deficit disorder or is that a general grant for early identification of a variety of problems?

Mrs. McIntosh: We have specifics that we target: vision screening, hearing screening, language delays and, of course, teacher observations bring forward

details noticed in the classroom by the teacher. Teachers have the ability to watch for and look for things that will become evident as the child starts school. The obvious ones, of course, would be language delay. It would be very visible. We work as well with the preschool services and we are in the process of developing a preschool-to-school protocol for transition that would pick up some of these things even prior to the beginning of the actual learning experience in a public school.

We give the grant proposals focused on certain areas. I will just indicate some of them to you. We give grants for professional development in areas of identification and programming for special needs students in the early years. We talk about teacher observation and the importance of teacher observation. Grant proposals focused on professional development in terms of the areas of identification are ones that we target.

* (1010)

Also, we have school team meetings for planning for special needs students and for planning modifications to the regular curriculum, and resources and materials specific to early identification as well as the establishment of divisional early years committees to plan professional development and information about resources and monitoring of the EIEP process.

I keep going back to my own division and I do not mean to, it is just one that I have some familiarity with and I am sure that as I become longer in the tooth in terms of my tenure in this portfolio I will begin to know other divisions as much as I do this one particular one, but it does focus on the attention deficit disorder in terms of professional development and resources.

Some other divisions, I am informed, have identified this as a priority as well, and the department puts out four videos for parents and teachers in this regard. We also work with parents. We will have parent information sessions about programming for children with special needs, and we entertain grant proposals for that type of servicing as well. So I do not know if that provides the detail you are seeking. If you need further

clarification, I will be pleased to attempt to further clarify.

Ms. Friesen: Yes, that is certainly part of it. The concerns that have been expressed to me have been that it is believed that whereas some divisions do recognize this, not all divisions do, and there is not a sense, in some parents anyway, that the department recognizes it. So I am wondering whether that is the case, first of all, and whether there are plans to look at this in the context of special needs grants.

Mrs. McIntosh: One thing that the member should be aware of is that the Level I funding includes this, inclusive of this particular group of needs, and funding for a Level I targets that particular group of children. So it is there and it is identified in that way, and I am presuming the member is asking, is it over and above that? So my response, in terms of the additional monies that might be available, was an attempt to identify over and above the Level I funding, which of course targets certain groups of children including that group.

Ms. Friesen: The Norwood School Division has experienced some difficulties in having recognition of the Level II grants that it has applied for, and I believe it has experienced a 20 to 30 percent drop in the acceptance of its special needs Level II approaches to the department. I am wondering what the department's response is to that. Is there some special reason why these particular grants have not been accepted this year? As I understand it, the children for whom the grants have been applied for have not changed in their abilities or their needs for special assistance, and I am wondering what the department's response has been to the Norwood School Division.

Mrs. McIntosh: Mr. Chairman, I thank the member for the question. I am a little puzzled as to how the member can say that funding for Norwood for special needs has been cut, when funding decisions for the division are not finalized until the end of September. I wonder if she can clarify what she means by her question, because I do not know how she is able to say what the final count is going to be at the end of September when we do not have the enrolments in yet.

Ms. Friesen: Mr. Chairman, my question was related to Level II special needs grants for which applications have been made and subsequently rejected. It was not to the Norwood schools grants. I think I did say Level II special needs, and I am basing this upon a report in the newspaper, in the Lance newspaper which I am sure the minister's staff are familiar with. It was simply that, that Norwood has a number of children—I do not know proportionally how it relates to other divisions, but students for whom Level II grants were available in previous years, the same students when applied for this year with the same level of need in the school's estimation, have not received the funding. That, at least, is how the newspaper reported it, and I am wondering what the department's response has been to that. First of all, is it true? Secondly what has been the response?

Mrs. McIntosh: Mr. Chairman, staff have indicated to me that the department has met with Norwood since the appearance of those articles and that Norwood and the staff have agreed that the original decision that they agreed upon prior to the reporting was in fact the correct decision, so I can only assume, with that kind of agreement and the clarification in a subsequent meeting, that the original agreement was the right agreement, that that should allay any misperception that might have been provided to the media.

* (1020)

I have to indicate that each of the students was reviewed and that the agreement was reached and that the funding, if there are other Level II grants being requested, September 30 is the date that they will have as the deadline, and Level II and Level III funding is provided to school divisions to assist in programming for students with severe and profound needs.

In the Norwood example some of the students have progressed. The member indicated that the needs of the students, that some of the students—I will back up a bit here. Some of the students had only been funded for a one-year program to stabilize the programming. That occurred and the member indicates that, in fact, the one-year program put in place to stabilize did not result in stabilization, that the students' needs had not changed, and yet I am advised that the students did,

indeed, progress and that was the reason why the agreement struck between the division and the department when they reviewed each of the students came to the conclusion that it did.

Somebody maybe informed the media or gave the media information that was different from saying that the division had agreed with this. Hence, the department met again with the division, and they received a reconfirmation that, indeed, the original decision was a correct analysis of the needs.

Having said all that, the final decisions for '95 and '96 only occur at the end of September so whatever the circumstances were or are, it is incorrect to say that there has been a final decision on special-needs funding when the deadline is still more than three months away.

The member knows that funding is allocated annually and funding decisions for individual children begin in the spring, and the progress continues into the fall. That is in the event that a school receives new children who are eligible or some dramatic circumstance of change occurs.

Low-incidence funding has not been completed for the '95-96 year. The deadline, as I indicated, is September 30, and new students in exceptional circumstances will continue to be considered right up until that date, department staff, in-service, Norwood School Division on the low-incident guidelines in the application process in March, so it is not a recent thing. What maybe happened was there was a premature contact with the media and a gap of communication internal to the division where maybe the person who had the premature contact with the media had not been in communication with others inside the division who could inform of the agreement that was reached.

You know, when all is said and done, the overall funding for Level II and Level III has increased dramatically over the last six years. Since 1989 and '90, the Level II has increased \$9.3 million, going from \$7.7 million to \$17 million, and Level III has increased \$6.3 million from \$2.4 million to \$8.7 million. That is due to increased funding in these areas, as well as the ability to identify better and have increased participation rates, as well. So decisions regarding

funding are based on the criteria established for Level II and Level III. There have been changes and improvements that may have occurred over a period of time in a child's education achievement and whether a specialized program above and beyond regular programming is in place.

There is no shortage of funds for special needs as the figures I have just given you indicate. There has been a dramatic increase in funding for Level II and Level III, and in Norwood School Division funding for Level II, their 1994-95 average, is one of the highest in the province. Within a total picture of dramatically increased funding, this particular division, even within that, has had one of the highest average increases in funding for Level II in the entire province. I hope that answers the question, both in a generic and a specific sense.

Ms. Friesen: Could the minister tell me approximately the dates of the meetings that took place with Norwood School Division where they agreed that the original decision had been correct? I was not sure whether the minister said there were two additional meetings or one additional meeting.

Mrs. McIntosh: As I indicated a little bit earlier in my response to this question, there was a meeting that took place in March. That was one that we can identify. Then the staff, in their regular work with the special needs people in the division, have visited the schools, have been onsite, have examined programmings and they deal with the special needs people in the division. My understanding is that it was another individual, not the special needs person who had done all of the work with the department in terms of who required assistance in terms of funding this year. It was not that individual that spoke to the media. It was another individual who had not had the up-to-date communication from the special needs people.

About five or six days after, there was an article that appeared in the media. There was another meeting then held with the special needs expert plus the individual who spoke prematurely to the press without having had the information from the special needs person. The purpose of that meeting was to clarify and to determine if in fact the agreement that had been

come to with respect, had been arrived at with the special needs experts and the people in the department who had been doing the onsite visitations and so on, was still in fact appropriate. At the same time, I would imagine updating the individual who did speak to the media so that he would have the updated information and be able to speak with some accuracy as to what had been happening with those in charge of special needs students.

The purpose of the funding, as the member knows, is to have students change and grow. If someone who had not been talking to the special needs experts inadvertently made the assumption that, because there was a child who last year had a special need, that special need would still be needed, and without realizing that there would be changes in funding for those who did in fact change and grow in the year of funding they had received before, if that person made the assumption because the person once labelled special needs at a certain level would always remain at that level, then one could see how that person could make the error.

Hopefully, that meeting to explain that the purpose of the funding that some of those children received was one year to stabilize and to change and grow and that it was in the opinion of the experts who worked with these children and provide funding to those children that in fact some of those changes, some of the goals that were set had been met, I think that was probably clarified for the individual.

* (1030)

Some students are going to need support for a longer time, obviously, and their funding then would be asked to be continued. Others may need only a short-term intervention. At any rate, it does appear that the agreement is there should further funding be needed for other students or changed circumstances. The deadline, as I indicated, is still three and a half months away.

I think this is all just an unfortunate circumstance where somebody prematurely, without full knowledge of what had been occurring, made a comment to the media that maybe should have been checked out before it was made.

Ms. Friesen: Just for my own purposes of clarification, all grants are for a year. I am not sure what the minister is talking about when she says this was a special—she did not use the word special, but this was a one-year grant to stabilize. So was this a different kind of grant than any other grant?

Mrs. McIntosh: All grants are for one year, but the member knows and I assume knows quite well that while grants are renewed each year, there are some grants that are put in place where there is an expectation that, if it is a transition period—maybe the member does not know this, I should not be making assumptions.

If the division and the special needs person in the division, in conjunction with the others responsible for that child, ascertains the child is going to be in a transition year where they can move from one program to another, and they say we will require funding for student X again this year but it is our expectation that at the end of this year this child would be able to be moved into a different program, then they signal at the beginning of the year that they do not expect it to be automatically ongoing.

Whereas others will be saying we are requesting funding again for child X, it is our expectation that this funding will have to continue on an ongoing basis; we do not at this point see a moment when the child would be able or the student would be able to come off that level.

So the member is correct in the—yes, grants are renewed or not renewed annually, but in some instances those working with the student have a pretty good idea that they are in a transition year.

I am advised that in this particular situation that there was in fact that situation existing. I am advised that it was identified in certain instances here in this division that it was the expectation that at the end of the year the student would be able to move to a different program and this would be a transition year.

Ms. Friesen: Mr. Chair, there were several grants which were not renewed in the Norwood School Division. Was that the case in each of them that the

department had indicated that these were to be transitional grants and then subsequently reapplied?

Mrs. McIntosh: I am advised that every child in the Norwood Division that was brought forward for consideration in this regard was reviewed. They are reviewed against a set of criteria. Those who met the criteria were funded. Those who did not meet the criteria were not. That discussion on the review was something that the special needs co-ordinator—I want to make sure I have the right title here—knew and agreed to as appropriate. I indicate again the massive increase in funding for special needs at Level II that has been put in place over the last four or five years in the province, extremely large increase in funding. As well, this particular division is one of the highest recipients of this kind of funding in the entire province, even in an era of increased funding overall.

The final point I leave with the member is that once again this process goes on until September 30 and that the department is always in a position of examining and re-examining and examining and re-examining the needs of students. It is not a closed-door process where they say, you come in and once you are on, you are always on and you never take it off, or you come in and if you are not on in the beginning, you never get put on. Children move in and out of this system because it is one that responds to identified needs.

* (1040)

Ms. Friesen: I recognize the great increases that have occurred in these areas in funding, and obviously part of it is the increasing number of students who are able to be incorporated into regular schools with this kind of assistance.

The Minister has indicated the scale of the increase over the last few years at Level II and Level III. I am wondering, is she anticipating that there will be caps on this kind of funding?

Mrs. McIntosh: I have not heard of that concept. We have had no discussions about caps and I do not think we have ever had caps on special needs funding. I do not know if that is coming forward as a suggestion or not, but it is not one that we have looked at.

Ms. Friesen: I wanted to ask about what I think is, what is called in the Estimates Expected Results in this section 16.(2)(f). It indicates on page 57, site visits to all schools will be conducted to monitor implementation of school plans and funded programs. I am wondering if the minister could perhaps explain this. Is this going to be a regular site visit? Who is going to do the visiting? What kinds of evaluations are being conducted? How are they conducted? Where are they being registered, et cetera.

Mrs. McIntosh: The member is referring, I think, to the regional team, where you were talking about site visits to all schools, on page 57, I think. The regional team's unit, it is called, will administer and is administering and monitoring categorical grants. It will provide information and assistance to divisions and schools regarding departmental policies and guidelines and collaborate with divisions to develop regional initiatives to support implementation of priority areas. It is a supportive and collaborative venture of reaching out.

(Mr. Peter Dyck, Acting Chairperson, in the Chair)

We will continue to administer and monitor categorical grants in low incidence funding, student support grants, English language instruction for native students, early identification and education programming, small schools grants, English as a second language, and in collaboration with school divisions, review and develop annual divisional action plans for the services for students with special needs. Another key thrust will be the interdepartmental interagency collaboration on regional and provincial committees.

We have, in collaboration with school divisions, identified certain regional initiatives, and they will include regionally based training and consultation with specialists and support for programming initiatives in technology, dealing with the emotionally behaviourally disordered students, violence prevention, language arts, early literacy, mathematics, middle years schools and aboriginal awareness. But you note in there, of course, the special needs have been identified as part of our regional initiative that was developed in collaboration with the school divisions, and they indicated then they

would like that kind of consultation with specialists and supporters for those particular programming initiatives.

(Mr. Assistant Deputy Chairperson in the Chair)

Ms. Friesen: Will each school be visited by regional teams on a regular basis?

Mrs. McIntosh: Mr. Chairman, the schools will be visited. I should indicate first of all that the consultants are assigned to be a prime contact for divisions in order to provide services, but that prime contact will direct them to school visitations. So they will be visiting all schools where programs are and working with the divisions as regional managers. The managers will be meeting regularly with school superintendents, and the concept here—I have the names of the various regions here, but I think you know them—is an attempt to become more field-based, to be in the field rather than sitting here in a building like this on Broadway removed from the places of activity.

As we reach out, we work in the field with the deliverers of service and have regular ongoing contact with the divisions. We will also then bring back suggestions from the field. You will see us begin to do things. We were talking the other day about the revolving secondments, as opposed to just having a secondment that deals with one area forever and everything else gets neglected, the suggestion of revolving secondments so that needs that are identified can have a turn with a seconded expert.

Those kinds of ideas we can pick up in the field and bring back to place into the mix here and be more properly responsive to what people delivering the service are saying and give them an easier way to reach us than having to write letters that have to go through the delivery of the post office, which is not always the speediest thing in the world and that type of thing. Even phone calls are hard to return sometimes, but with regional people we can achieve a better contact.

So schools with categorical grants, as I indicated, are definitely visited, and they are visited one, two, three times a year, as many times as the school requests or as needed, and they are generally visited in order to support the programs that are in place.

* (1050)

Mr. Assistant Deputy Chairperson: Item 16.2(f) Program Implementation (1) Salaries and Employee Benefits \$4,774,500—pass; (2) Other Expenditures \$2,594,100—pass.

16.2(g) Student Services (1) Salaries and Employee Benefits \$1,896,300.

Ms. Friesen: I wanted to ask about the Manitoba School for the Deaf and the changes that the government is planning in the building, in programs, in administration and housing at the School for the Deaf.

Mrs. McIntosh: Does that mean that we are going to skip the one and just go straight to this one? There is another section in there. Do you want to skip over it?

Ms. Friesen: Yes, there is a little discussion there about where we should examine the Manitoba School for the Deaf, and there is a line 16.2, 2.(h), which is specific to the School for the Deaf, but under 16.2, 2.(g), which I think is where we are, there are also some elements for the School for the Deaf, the residential and day program, for example. It is a mixed grouping.

My question was, there have been some changes in the programming, in the residence, in the housing of the Manitoba School for the Deaf, and I wondered if the government could give us an idea of what their plan is and how that plan has been developed.

Mrs. McIntosh: I thank the member for the question, because this is a particular interest of mine. The School for the Deaf is going to be moving into some very good computer technology type of learning experience. The modifications to the existing building in which the students are housed were estimated, and I am approximating here, to have been about \$4 million.

The department has been looking for some five years for an alternate site. The one school that they have looked at throughout that whole period of time is Alexander Ross school which, would cost about \$2 million dollars to upgrade to the standards desired by the educators. So it is cutting the cost in half.

In April of this year, the Premier announced that the department and the authorities assigned to deal with negotiating had arrived at a decision to relocate the existing student body and staff to Alexander Ross school which is in the St. James School Division. That move is slated for implementation; target date is September '96. In the meantime there are ongoing discussions, particularly with the parents of the students, although they are also bringing in for discussion others who are on the advisory committee which is not necessarily composed of parents, but people who have a keen interest in the School for the Deaf.

Apparently, throughout all the ongoing discussions, there had been some on the advisory committee who, while they all knew, of course, that Alexander Ross school was one of the ones being considered, had not been aware that they had come to an agreement. Some of the parents did, but some of the advisory council members did not. They were wanting to have things to say and those discussions are going on at the present time.

So the change in programming will be technology. The change in site, the housing would be to move from the existing facility over to the Alexander Ross school which is deemed to be an improved facility for the students and their needs. In particular, I think some of the people interested in science are really thrilled with the new science lab at the new school.

The number of people who live in a certain part of the city are very pleased to be in a more accessible location close to the Perimeter and Portage, and certainly the people who live in the west end of the city are thrilled because they do not have to go nearly as far. It will be like any move. You will find there will be some who are very pleased and some who would rather stay where they are. The parents, the ones that I have been most in contact with, because I feel it is the parents who will be most affected, have been very supportive, indeed.

Ms. Friesen: I got a bit lost there in advisory committees and who had agreed to what. I am just going to go back over some of it. The minister said that the Premier had assigned authorities to negotiate

this move, which I assume is essentially an issue of real estate, to negotiate the move. Could we sort of explain that one for the start?

Mrs. McIntosh: I do not think I said that but maybe with the juxtaposition of the wording it came out that way. I indicated the Premier made the announcement, and the Premier did make the announcement.

I suppose, indirectly, everything that happens in government is under the authority of the Premier, but, no, the Premier was not involved at the working staff level where the proper authorities, the people who are assigned to do these things—I am putting it that way because I am not even quite sure who all of the individuals were involved in the negotiating. I know that in anything to do with government buildings and government programs there are authorities within Government Services, within the particular department and, in some cases, crossing departments who are, as part of their duties, assigned the duty of negotiating these types of things.

* (1100)

So I do not know who the people were, the names of the people who did the negotiating, but the proper authorities who always tend to those things and tended to this thing had been working on this for many years. I can remember this being a topic of discussion in 1990, before I was elected. As a person living out in the community I can remember this discussion going on. Will the deaf students be moving to Alexander Ross school? That was the question being asked in 1990, before I was elected as an MLA even. So it has been going for a long time.

I think my sense of it is a large part of the interest in this was to be in terms of the existing building they are in, which is a beautiful building. I think there was a desire to see that there was some appropriate use for the existing building before relocating the current tenants from it to more suitable facilities for them. It is a beautiful building. Running the risk of dating myself, I indicate that I graduated from that building myself when it was called the Manitoba Teachers College. That is where I took my own teacher training in what is now the School for the Deaf.

So it is a beautiful building and I think there was a strong desire not to see it left empty. That may explain, in part, the delay in terms of announcing any decisions. Does that answer your question? I cannot recall the second part.

Ms. Friesen: Yes, that was the first part. I was not clear really what the minister meant by negotiation, but it was really the negotiation of the real estate move.

Now the second area that the minister mentioned was the ongoing discussions with parents. I am assuming that is the advisory committee that the minister meant, or was there a different advisory committee for this transition?

Mrs. McIntosh: I should indicate that there is a difference between the parents and the advisory committee. The advisory committee is—I am not sure if that is its official name—but the advisory committee is made up of a number of people who are interested in the education of the deaf.

So you will find, for example, a representative from the Manitoba Association of School Trustees sitting on that council or that committee. That person, the representative from MAST, would of course be interested in the education of deaf students because they are students receiving education in Manitoba.

They may not have a personal acquaintance with, live with a deaf individual or someone extremely hard of hearing, and may not have intensive study or knowledge of the needs of the deaf community or even of the deaf culture, but they would be interested in ensuring that education was available and that education be of good quality for those students. So you will find a number of representatives on that council fit into that category.

The parents are a different group. The parents are the people who live with and love these children and have an intense desire to see them properly placed and housed. One has a group that is there as an advocate for the deaf, in terms of this wider group of representatives, and support for the deaf, but not necessarily experts on the deaf or well-acquainted with deaf people.

My biggest concern, and I am certainly glad of the existence of the advisory council and I certainly support what they want to do, but for where the children will be physically housed, my main interest is the response of the parents, because they are the ones who will be sending their children to the new location and looking at transportation, all of the things that parents do with children.

Without trying to make an alienation between the parents and the advisory council, I will listen to the parents first and foremost.

Staff members as well, of course, have a strong interest in ensuring that they have the proper facility. There have been a number of discussions over the past number of years actually, and many of the staff and parents of children at the school knew that they were looking at an improved facility.

As soon as the announcement was made, I went out and invited whoever was willing to come or wanted to come, out to see Alexander Ross school. It was a wonderful, thrilling night, because the science lab, the theatre, the number of things in that school that the students could see and that the parents could see were very clearly to their liking. When they realized that there was a walkway through to the bus stop, of a distance of about the width of two streets, they were really, vastly relieved, because somebody had been telling them they would have to walk two blocks to a bus stop or things of that nature, which were totally untrue.

I think seeing the facility was the thing that really was most important, once all of the understandings that the staff did in terms of what would it cost to upgrade the old school versus what would it cost to upgrade the new school. The new school is completely wheelchair accessible. It has two rooms with risers. It has air conditioning, which certainly did meet with vast approval I must tell you, from a wide number of people. We have had a couple of visits now to the school with a couple of hundred people from the deaf community at each visit. The closer it gets to the warm weather, the more the air conditioning is touted as a really good thing.

They had some concerns, and some I think still do. Some of the concerns that they had in the beginning were it is an inaccessible location, but when they saw the location and realized that it is at the corner of the Perimeter and Portage essentially, and that it has got a bus direct to it that goes—it is an express bus that can be caught at Polo Park from anywhere in the city, and that there is indeed a walkway that takes them right through from the bus stop to the front door of the school, and that it is not behind the race track in the boondoggles, somebody said they thought they had been told. When they saw where it was and they saw that they could get to it around the Perimeter much more easily than they could get to the current location by having to go through the city, they were really delighted.

There will still be some, of course, who live closer to the existing school for whom it will be a further trip and, of course, they would prefer to stay in the existing school because they now will have a longer distance to travel. On the other hand, there are just as many who will have a shorter distance to travel and, of course, they are happy.

We determined that the difference in distance, the longest that any person would have to travel in excess of what they are travelling now I believe was eight minutes from downtown Winnipeg, if they are going by Transit. Of any of the existing students clocking out the Transit routes, for those who currently take the bus to the current Tuxedo location, the extra time added to any one of those students is only eight minutes more from downtown Winnipeg. Of course, there are several for whom it will be much, much less. I mean I have one constituent who lives right in the vicinity of the school. There is another constituent of the chairman's, in fact, who is sitting right beside me, who will be much, much closer. Those two will be certainly saving a lot more than eight minutes by virtue of the new location.

The other thing that people are indicating about the location is that because it is in close proximity to the corner of Highway No. 1 and the Perimeter, that those students who come in from outer-lying regions will be able to—they will go home on the weekends or, if they commute, will be able to get to the school without

having that drive through the city. So we are pleased about that.

Another thing that some of the parents have mentioned to me that I thought was rather an interesting point, some of them have said they really liked the Tuxedo location, they really like everything about it, but their incomes are such that finding a home to live in in that particular location was difficult for them. What they have said about the Alexander Ross school, I had one parent tell me this: we really, really like this area, she said, because it has homes that are in our range. We can afford the homes in this area so we now have an opportunity maybe to actually live near the school. We really could not afford the real estate around the Tuxedo school. This is more in our price range.

We have a commitment to have the parents involved. We believe, as you know, in parental involvement, not just in the deaf community but in the wider community as well. We have planned to have parents involved in the process of the move, bringing them in on consultations about the renovations and the program which will be accomplished through an implementation committee structure, and that kind of involvement is going on now.

I regret very much that apparently there were some on the advisory committee who indicated that through these last four or five years, they had not been aware that there had been a move considered for the School for the Deaf. Maybe they were newer members to the committee, or—I mean, it certainly has been known for a long time that a move was coming and why it was coming and that Alexander Ross was high on the list for consideration. It may be that in the final weeks of decision making, the advisory council or committee itself was not notified, but certainly, there were many parents who were quite aware because they had been driving their kids past the school and saying, now, that is where your new school is going to be. So somehow, they seemed to have indication.

* (1110)

We also have another concern that has been raised that I also have complete empathy for, and that is that

some members of the deaf community feel such allegiance to that particular building because they have had a history in that site. You know, originally in 1921, that building housed the School for the Deaf. From time to time, it was not the School for the Deaf. The School for the Deaf was relocated a few other times, during the war, and, as I said, I graduated from it as a teacher during those years that it was a teachers' college. So while it has not always been the School for the Deaf, way back in the beginning it was a building that housed the deaf community.

The community around it was different at that time. Certainly, it was not built up as the community of Tuxedo has since built up, the roadways, the bridges, those things that are now—there was no Charleswood Bridge, for example, at that time, and there sure is going to be one now. Once that is open, the convenience of that, not just for the hospitals and the ambulance—I mean, it has not just made Grace Hospital and the people in Charleswood happy that they now will not experience the tragic death on the highway that they did when they could not get the person from Charleswood around to Grace Hospital in enough time, but it is also going to make it more convenient for things such as the School for the Deaf.

So things around the school have changed. The needs of the community have changed. In 1921, when that school first housed the deaf community, there was no need to worry about upgrading the building for computer technology because there was no computer technology. The education for the students has changed. Their ability to be mobile has changed.

So I do understand the attachment they have for that particular building. It is a beautiful building. I love it, too. I think it is a testimony to all of those who have made that site work for the deaf over the years, that they have, some of them, developed an allegiance to the actual bricks and mortar. As with anything, I have gone through school closures far more than I like to remember having gone through in my own division, and I understand the attachment to the bricks and the mortar. I have seen schools close, and I have also seen and can bring forward literally hundreds, if I had the patience and the wherewithal to get on the phone and start calling them all, hundreds of people who would

say, you know, Mrs. McIntosh, when they voted to close my school, I was so disappointed; I said my children could never be happy in the new place.

Well, I am here to tell you that they are very happy in the new place, happier, in fact, because the programming that they were able to have in the new consolidated school did, in fact, improve, as we predicted it would, and the taxes did not rise, as we knew they would not.

But that initial knowing that you are going to no longer go to the familiar place that has the memory tucked in the corner where you first did whatever it was you did that made that memory special, that is a sense of sadness that I completely understand and staff completely understands. I can tell you, though, that the last comment made by the last person we sort of said good night to, the last time we were over at Alexander Ross school, and I do not know if the principal recalls this gentleman standing at the door saying, now you promise us you get us this school. You promise us you get us this school, and I said, well, we will do what we can, sir. He said, ah, is better for the kids; you promise us you get us this school. We finally said good night, and we all went home.

I know that the reaction, once people saw some of the things in that building, was, oh, wow, this is what our kids need, and while we will be sad to say goodbye to the bricks and mortar, the opportunities are greater here, and we will always have that special feel for that old building.

Ms. Friesen: I think the minister has identified two issues which are of significance, and one is the emotional attachment of not just the parents at the school but the deaf community in general, generations who have been attached to that school which was founded in the 1920s, as the minister indicated, as a regional centre, not just as a Manitoba centre, and it was an era when Manitoba Education and the founding of that school was very much in the progressive vanguard of education for special needs, and I think the sentiment is an historic sentiment, as well, a sense of pride in what has been accomplished in the deaf community in Manitoba, that is attached to that building, as well.

The second issue, I think, that she has identified is the concerns of some parents at a process which is not perceived to be perhaps quite as the minister outlined, and I wanted to go back over some areas of that.

We talked, first of all, about the building negotiation which came to a head at the beginning of April, and then the minister talked about ongoing discussions with parents and continuing discussions and a continuing role for the advisory council.

* (1120)

I wonder if the minister could tell me, first of all, who is on that advisory council. I am not looking for names particularly, but positions that they represent. For example, the minister indicated there was a person from MASS. Who else is on that committee, and was that committee formed for the express purpose of making this move, or is that advisory council an advisory council to the School for the Deaf, an advisory council for deaf education in Manitoba that advises the minister generally? What is its broader function?

Mrs. McIntosh: First of all, no, it was not struck to deal with the finding of a better facility for the students in the school. It is an advisory council that was set up. Its basic mandate is to provide opinion and ideas and thoughts and advice to the minister on anything to do with the life or lifestyles of children who are profoundly hard of hearing or deaf.

That has a very broad mandate in terms of their looking at everything in a student's lifestyle or a child's lifestyle that will be part of his life experience and education and result in a well-rounded individual whose needs have been met, and so they look at a wide variety of things. It is a broad mandate, not a specific mandate.

I do not think it was envisioned that they would—and I say "I do not think," and I guess maybe I am making an assumption here. I keep saying to the member, do not make assumptions, so I should not do it myself, but I am going under the assumption, from what I understand of the mandate, that they would not be involved in the fine details of particular decisions.

They might indicate they want students to be trained for technology, and give that as a piece of advice, but they would not say when, where, and how. Do you know what I am saying in terms of them?

Now, in terms of the members, it is called the minister's advisory board. It has representatives from the School for the Deaf, from community programs, from agencies such as the Society for Manitobans with Disabilities. It has a representative from the parent council of the deaf school.

They have a Parent Association for Hard-of-Hearing Children in Manitoba, which includes representatives from rural Manitoba and others from Winnipeg. It has three deaf community representatives, and those would be people who work, for example, in the interpreters' program. We have the Manitoba Association of School Trustees. The interpreters' association has its own formal rep, I am advised, and the Association for Visual Language, and I think that covers it.

Ms. Friesen: And these people are appointed by the minister, except for those who are—well, maybe I should divide that. Some people will be appointed by the minister; some are delegates from their associations.

Mrs. McIntosh: No, they are not appointed by the minister. The minister has one appointee. The rest are selected by their own organizations.

Ms. Friesen: Is this the organization that over the past five years, six years, I guess, has been looking at the issue of the relocation of the deaf school?

Mrs. McIntosh: No, they would not be looking at that type of issue. They would be looking at more along the lines of, do we have enough interpretive services available, those types of things, just to give one small example. But where a building is is not something that—unless it were going to be moved into a completely different location, like to Brandon or something, but not when the proximity is so close.

Ms. Friesen: So it was the department that over the last five or six years had been looking at some alternatives to the existing School for the Deaf, and

when the department had found what it thought to be an appropriate other location, it would bring that decision or that proposal before this advisory council as a matter of general policy?

Mrs. McIntosh: Mr. Chairman, my understanding is that no, that is not the type of thing that would have gone to the advisory council, except as information, because the interest of the advisory council is in reviewing provincial approaches, resources, the success level of students, making commentary on the bilingual program, for example, those types of things.

The parents council, though, would be one that would be consulted, because it would be the parents who would actually be affected by having to send the child eight more minutes on a public bus or change the time it takes to get back and forth to a building, so the parents would have the direct interest in the location.

The advisory council would have a direct interest in programming and accessibility, that type of thing, which I think is a given. I mean, if there is going to be any change in accessibility, such as moving it to a different city, that would be a major change in accessibility, but minor adjustments, eight-minute type adjustments, would not really be considered as that much longer, especially when so many have a shorter distance to drive at the same time.

The Advisory Council for School Leadership has been formed since the relocation announcement to provide advice and consultation because it was felt very important that the parents should have some indication and say in how these things evolve. We know we do have a few parents who are saying, but the old school was closer and I have an emotional attachment to the bricks and mortar. We know we have just as many parents, if not more, on the other side saying, the new building will be so much better for the kids and in fact is closer for some of us.

They need to be talking. It is very important. We believe in that and the parents are the ones that we will be talking to.

Ms. Friesen: The minister said earlier that there were ongoing discussions with parents and that they were

being involved and that an agreement had been come to. Those discussions go on at the present time.

I do not take notes as quickly as Hansard, but that was what I wrote down from the minister's earlier comment. I am wondering how parents have been involved. We have two kinds of councils here now. We have a parents council that existed before the move and we have an Advisory Council for School Leadership formed since the move.

Do those two groups still exist in parallel? How has the minister been meeting with parents and discussing with them? I guess to some extent this also involves the previous minister, because the discussions would certainly have come in the period since Christmas or even earlier, I do not know. How have those parents been involved? How were they prepared for the suggestions that the government was going to make? What kinds of discussions have there been as follow-up?

Mrs. McIntosh: In terms of my memory of things, I could give you exactly what I know I lived through. I can then pass on to you my understanding of things that occurred when I was not present. I know, and I can only say before 1990, I cannot remember how much before 1990, but I know I was not an MLA, so it had to be back that far, that there was talk in my community, in which Alexander Ross school is located, about the possibility of the School for the Deaf moving to Alexander Ross school. It was well before I was elected.

In fact, I can recall when I was still on the school board discussion coming that the Department of Education was exploring various facilities around and that Alexander Ross school might be an ideal site because of its location close to the Perimeter and Portage and because it was wheelchair accessible and had all of the community attributes that were needed that it might end up being an ideal site for the School for the Deaf. Basically, one of the main reasons was because of the Perimeter and Portage. Easier access, not having to drive right into the city to get at it and yet still very accessible to the city people because of Portage Avenue and the Perimeter—that was seen as very appealing. Being on a direct express bus route, as

well, was seen as being very important. Those conversations were sort of floating around at that time. It could have been back as far as 1988, for all I know. That kind of understanding and that kind of discussion seemed to be floating around for four or five years in a very loose kind of a way. Certainly, because I have friends who have a deaf child who attends the School for the Deaf, I know it was something that they often spoke about.

I mentioned a particular—I said, well, there is one parent driving their kid around the school, and that was about a year ago where we had one parent who would, whenever they would be out in that end of town, drive their student past Alexander Ross and say, this is the school that you will be going to some day. But they said that so long I think that student is now due to graduate and will probably never get to go there. That was not new. That was sort of known and that was known with at least some of the parents who were in that school because I know them and we talked about it at the time as, you know, Mrs. McIntosh, you are the MLA for the area, do you know when the kids are going to come to Alexander Ross? I would say, I have no idea, I do not know. I am not in that department, I do not know what decisions they are making.

* (1130)

When in April '95 it was decided that it was in fact a go, that the school division was willing, there now was a potential tenant for the historic building, which I know from all those who were concerned about the building, they did not want to see that historic building left vacant by virtue of the students relocating to a better, in terms of educational needs, facility, that announcement was made. Because I was MLA for the area, I attended that announcement and was very surprised when one of the people from the advisory council said, we did not realize that this agreement had been reached, and that sort of surprised all of us.

This would be the larger advisory council that I described where you have all of the organizations presenting their own, choosing their own people to sit on it. There was a representative that had been invited by government to attend that and that individual said that she had not realized the agreement had been

reached. So we were surprised. Immediately then, from my perspective, we then called a meeting and invited everybody who wanted to come, connected with in any way, shape or form, but especially the parents, to come over to Alexander Ross and tour the school and take a look at it.

Some of the parents of the younger students who were new to the school may not have been aware of the possibility of relocation. I do not know their communication with each other. I do know that some were aware, and some seem to have not been aware that an agreement had been reached, although certainly everybody was aware that the potential for relocation was very real because they knew the costs were almost \$5 million to upgrade the existing building to meet the educational requirements, and we certainly wish to provide them with those educational requirements.

To do it for half the price in a facility that better suits their needs we think is good, and while there probably are still some parents that are saying, well, we would like to stay where we are, we love the building, and it is closer to where we live, we know that there is a vast body that feels a different way, now that they—if there was any lack in communication before, it is certainly being made up for now because I have been staying in close contact with people.

In fact, I am off to the Deaf Centre tonight to a meeting there with the interpreters, so I am definitely staying in touch with all of those who, ironically enough, will now fall under my department, as well as in my constituency. I was meeting with all of these people before because as the MLA for Assiniboia, I felt it very important that anybody coming into my constituency—it is just the way I service my constituents, but now I have a higher interest because I am now Minister of Education, and I want to see the very best for these students.

I am signing up for sign, and I am getting a little skilled but am still very sad at my performance in that sense. I lack that bilingual ability at this time, although I have been trying and will be taking lessons later.

We will have what we believe will be if not the most outstanding centre for deaf education in Canada, then

at least up there with the top two or three, once the renovations at AR are complete. The basic facility itself is extraordinarily appropriate. Once the renovations are in place, it will be, I would be willing to venture, one of the top in Canada.

* (1140)

I come back to say, I understand this attachment to the building. It is a beautiful building, and for those who went there in 1921, and some of those people are still around, it is like selling the family home in terms of leaving, but there does come a point.

My mom and dad sold their family home two years ago, two and a half, no, three years ago now, and it was hard to do. It was really hard to do. It was the family home, but moving into the air-conditioned apartment with no problem with stairs anymore and right on the bus route and everything for my parents was the right move, even though it was hard to leave the family home.

That is what I feel this is not unlike, and I have great empathy for that feeling, but the building will not be left vacant. I had one parent right at the announcement say, the building will not be left unattended. I said, not at all, because you will have the Pan American Games people going in, and for them, they will honour the building, and I say honour the building. It is a building that needs to be honoured. It will be taken good care of, and it will not be left to be neglected in any way.

Ms. Friesen: My question was actually directed at how the minister has been working with parents. I remember there were two councils. There was a parents' council which existed before the announcement, and then there was a new council, the Advisory Council for School Leadership. That is why I wanted to clarify advisory council. It is a shorthand which could be applied to both.

My question was, how has the minister been working with the parents? She did mention that shortly after the announcement in April she had invited parents to tour the new school. The two councils, do they exist in parallel? How has the minister met with them, and what kind of input are they having into the decisions?

Mrs. McIntosh: I apologize to the member because I do know that is what she asked when I got carried away here on a different tangent for which I apologize.

There are two groups, and how am I staying in touch with them? The advisory council is the larger umbrella group. We have been trying to set a meeting, setting a date for me to attend one of their meetings, and the one I was hoping to get to is the one next Monday, but due to Estimates—I mentioned the other day my frustrations with the lengthy Estimates process. That is one of them; I will be missing the opportunity to go to an advisory committee meeting because Estimates are on. That is not—I mean, we will find another time. I guess what I am trying to say is for very legitimate reasons, such as Estimates, I have not been able to get to the advisory council meeting. That is the big broader group.

Although I have spoken one-on-one with many members of that council, we have had telephone conversations, we have had visits at various functions at the School for the Deaf one-on-one, but not for me to attend one of their regular meetings which is really what I would like to be able to do. So that is the one group.

Some of those people I see in their other lives, because they are not all—like they are not focused 100 percent of the time on the deaf community. They have other lives. They are sitting there as representatives.

The parent council—which is the second group—I have had opportunity to be with them more regularly I suppose in that some of those members, a couple of us, are personal friends. So I get to talk to them. I have as well attended functions at the school. They have had two meetings I think at the school that I have attended that were large-group meetings. I attended in my capacity as MLA for Assiniboia, and one I just went as a person who went. I have not actually been out to the school since I became Minister of Education, although, as I indicated, I am going tonight to a meeting at the deaf centre with the interpreters and attending their meeting. Those are the two groups.

The third group that we are talking about is the implementation committee, and that is—I think when

you are saying are they all running parallel—the implementation committee is the group that will be working on the transition between the old and the new, so to speak, because as I indicated in terms of programming, the trend in education of the deaf is to use technology. The use of technology is—when we say "technology," it is opening doors for wide groups of people. This is one group that it is really important for.

So the implementation committee has not yet been formed. It is about to be formed, and it will have on it parents, representatives from the deaf community who are not necessarily parents, someone from the Government Services staff who will be talking about any renovations they want to do, because they were talking about, you know, where will we put this and where will we put that. We thought that we would really like to have the input from the students, parents and staff as to where they would like to see things going in the renovations. You will have on there a Manitoba School for the Deaf student and a staff member and someone from the advisory board, that board of self-appointed people—I mean, they are not self-appointed. They do not appoint themselves, their groups appoint them.

I have had two meetings. Staff is meeting on my behalf with the parents. They have had a meeting with the parents of children in residence. That is a very important group because there is a residential component to the School for the Deaf. Of all of the groups that need to be consulted, I think that group is important. So staff, on my behalf, have met with the parents of children in residence. They have also had two meetings with the parents' council, and staff have been involved as well in three general meetings including parents, and two meetings with the deaf community as well. Those are sort of general meetings open to everybody in those particular arenas. So they have stayed in touch. I am staying in touch as best I can, given the limitations of my time, by phone and by meeting.

I think that if you were to come back in five years and ask how it is going, you would see a state-of-the-art School for the Deaf with up-to-date technology, a beautiful building in an extremely good location, and parents and students and supporters who say they are

very glad that the relocation was able to occur and, probably, the chairman of the Treasury Board will be happy that we saved him \$2.5 million at the same time. That is not to be discounted as we move to balanced budget.

* (1150)

This move is the right move regardless of cost, in my opinion. Even if this move were to cost money, it will provide a better facility in which to educate and house these students. We look to try and do things that do not add costs, but rather can maintain or reduce costs. What we feel is that we have, at the same time that we are doing this, been able to actually save money.

We are committed to providing a full range of options for the education of deaf children, and relocating the deaf education program will give students the best opportunity to reach their potential in a modern, technologically advanced school without the disadvantages of an institutional environment.

So we are seeking input from parents, from staff members and from the deaf community to finalize plans for the move and very much appreciate the support we have received so far. We will be working to alleviate any concerns that still might exist amongst some people, make sure that they feel that everything is okay. We are at the point right now that if we were to reverse this decision, there would be an uproar from those who now are eager to go to the new school.

At this point we have a situation where there are some now whose preference is to move to the new location. Those people have contacted me. I have their names, their addresses, their phone numbers. I appreciate very much their personal contact to let me know of this support. These are parents of children in the school. I do appreciate that, and if they ever read this I want them to know that without naming them and respecting their confidentiality, I have been grateful for their quiet indication of support. It helps me.

Ms. Friesen: I am mainly concerned with the way in which parents were able to be involved in the decision. That is why I have been asking about parents councils in particular. Earlier on the minister had suggested that

there was a parents council that existed at the school that was consulted before the move, and that after the announcement was made a new council called the Advisory Council for School Leadership, I assume formulated on the same basis as the minister's guidelines, had been created. Then the minister said that her staff had met with parents of children in residence and that there had been two meetings with the parents council.

My focus is upon parents of children in the school and the way in which they have been able to be a part of making this decision. Could the minister perhaps tell me when these meetings took place with the parents of the children in residence and with the two meetings with the parents council. I am assuming that we are talking—I guess I need to know which council we are talking about in that case. Is it the parents council before the decision or the Advisory Council for School Leadership after the decision? Do those two organizations still run in parallel, or do we know have general agreement at the school that there is an Advisory Council for School Leadership, which represents parents? If that is the case, how is the department working with them?

Mrs. McIntosh: Maybe it helps if I put this into a different context. The member is aware that we are asking all schools to have parent advisory councils. I indicated the other day that if schools have existing parent councils and they wish to reform and develop the council according to the framework that we have laid down, we would encourage them to do that. That is what has happened here. We have now an Advisory Council for School Leadership. You will find on that advisory council some of the same people who were on the former parent council. I do not know if that clarifies it for you or not.

I have some information I want to table before we go. I will not do it right now, I am just afraid I will forget. Maybe I could slip it in right now. I do not want to take us off topic, it is just that I do not want to forget to table it.

If I may, Mr. Chairman, the member from Wolseley (Ms. Friesen) had asked to have information regarding 16.2(f), staff changes for 1993 and 1994. I have the

information to table if I could just slip that in this dialogue so that it is not forgotten and indicate that it has been tabled and we can go back to the topic we are on.

Mr. Assistant Deputy Chairperson: I thank the honourable minister for that submission. The Clerk will distribute it.

Mrs. McIntosh: These two groups will continue their work, along with the implementation committee, and the two groups that I am about to indicate to the member are ones we have discussed, the minister's advisory committee for the deaf, and hard-of-hearing. They will continue their work, as will the parents' group, and they will be directly involved in the school advisory council as well.

In terms of the meeting dates, the school principal for the School for the Deaf has just handed me a note that indicates that on May 9, the Manitoba School for the Deaf, home and school final executive meeting was held. On May 10, the advisory council was formed coming out of that, like that restructure took place; and backing up a little bit, on April 30, there was a meeting with the staff and the residents' parents only, just those parents whose students are in residence. May 16, the first meeting of the advisory council. May 30, the second meeting of the advisory council, and the next meeting will be June 19 which is Monday.

Ms. Friesen: I appreciate that. That does help clarify things. But my specific question was, how have the parents been involved? How have they been prepared for this, what eventually becomes quite a dramatic move, so how has the department worked with parents over the last six months, the last three months, the last month? What meetings have occurred, and what preparation has been involved?

Mrs. McIntosh: I just would like some clarification on what is meant by "dramatic" in dramatic move? This is a sincere question, I am not trying to be flip or anything.

Ms. Friesen: Dramatic in the sense that we have been discussing it here today, and that is, a building that has a long-time attachment, and it is a big change for

families. I am concerned about how parents have been involved in this decision, and how families have been prepared for it?

Mrs. McIntosh: I thank the member for that clarification. The Home and School Association that was there before, I understand, was not formally consulted as to should we conclude agreements on Alexander Ross school, but they had over the course of the years and months leading up to the agreement received all the indications that were there that there was potential for such a move, and maybe because of the sensitivity surrounding negotiations on such a negotiated agreement, I do not know, but they were not given sort of like an opportunity to vote on should we go ahead and sign the agreement.

Certainly they knew that the potential was there for that agreement to be reached—maybe that is the best way to put it—without knowing that it had been reached until they were informed. So they were informed that the agreement had been reached in April. The fact that there was the potential for such an agreement was known to them. What had not been known to them prior to the announcement was that the agreement had, in fact, been reached. They were not given prior notification. They were told simultaneously with the broader announcement to the public.

Ms. Friesen: What meetings have there been with the parents since then? How has the department been working with parents, meeting with parents, since then?

Mrs. McIntosh: Okay, I do not know if I have all of them here, but I certainly will have the majority of them here.

April 10 there was a tour of the school, an open house of the school. I was there for that one, and I remember it well. April 11 was the home and school general meeting. April 12 was a meeting with the parents and the deaf community. April 13 was a general meeting at the Deaf Centre. Staff was present at all of these. April 18 was the second open house, and I believe I was there for that one as well. May 3 was the home and school executive meeting. As I indicate, staff was at all of those meetings. Those are ones that we can recall from our memories here without

going and checking the files. I guess the indication here is that the staff has worked very hard to try and understand any concerns that are brought forward. I have a very genuine interest in this area.

I felt, on another occasion, and I will backtrack just a little bit to try and help the member understand the commitment that I feel, back to when I was Minister of Housing and we enabled the deaf community to have a couple of our vacant units to transform into a day care centre for children who were either deaf children of hearing parents or hearing children of deaf parents or deaf children of deaf parents, and it is called the Sign Talk Children's Centre, at that time, meeting with those people, coming into my first contact with the deaf community and seeing hundreds of people in one room communicating in a way that was outside my realm of experience—

Mr. Assistant Deputy Chairperson: Order, please. The hour being twelve o'clock, what is the will of the committee?

The hour being twelve o'clock, committee rise.

HEALTH

Mr. Chairperson (Marcel Laurendeau): Will the Committee of Supply come to order, please. This section of the Committee of Supply has been dealing with the Estimates in the Department of Health.

Will the minister's staff please enter the Chamber at this time. We are on Resolution 21.3 Community and Mental Health Services (a) Administration (1) Salaries and Employee Benefits.

Mr. Kevin Lamoureux (Inkster): Mr. Chairperson, the other day I had asked a question in terms of if the minister would be able to provide the community health centres, and I did get a copy of the annual report so you will no longer have to give that.

I do have a copy of them, but I do want to proceed ahead with some questions with respect to them, and that is to try to get a bit better of an understanding of how the community health centres are in fact, not necessarily put together, but how they operate.

We briefly commented on it earlier in terms of do they meet the demands from within the community, is it board driven, what sort of influence does the Department of Health have in terms of services that they are going to be providing?

In looking through this, of course, there are budgets that are fairly different in terms of monies that are allocated out to them, and I am wondering if, for example, you have the one board that might be more progressive in its thinking in trying to bring things into the community and other boards—what sort of limitations are there on one of the health boards in terms of, well look, they see something happening over at this clinic, they would like to be able to provide that same sort of a service? How do all these sorts of things work out?

Hon. James McCrae (Minister of Health): Mr. Chairperson, the development of our community health centre network has been an evolutionary process. Community health centres are governed by their own boards, which are drawn from the communities they serve. With community health centres you are likely to see, in some cases, a targeted approach to specific needs that may exist in a certain area or a need that perhaps is not felt is being adequately met by the rest of the system.

A board, for example, would take the initiative to identify a need as a result of community input into the deliberations of the board, and certain focuses would develop. Then what happens is the community health centre board would approach the Department of Health with a proposed new program, a proposed expansion to a program, a proposed change to a program. Then of course, like with any other proposal, our department people would examine and evaluate and make recommendations to government, and government would then make a decision about whether to fund. So what there is today would have developed in basically that way.

We have, for example, the Women's Health Clinic. It obviously has a certain focus there, and that developed over a period of time as a result of consultation in the community and with the government. So its activities are what they are through

that evolutionary process, like the hospital sector. By the way, the Manitoba Health Organizations provide services to the community health centres as well, like they do for other institutions and facilities. Like other institutions, you will see strengths and weaknesses in various places in the system, and those are the things that boards and the government, through the ongoing partnership, would address.

There will be times when government will ask a community health centre to embark on a particular approach, not unlike perhaps the way we worked with the Misericordia Hospital in our discussions respecting obstetric services and services that might be appropriate for the Misericordia Hospital to deliver in the future. A decision had been made that the maternity ward there should close and that that work ought to be done elsewhere. On the other hand, there are other things the Misericordia Hospital is good at doing and has a history for, and so they were asked to do some other things. That took some discussions back and forth to bring us to that point, and so that evolved in that way.

* (1010)

Similarly, with the community health centres, in some cases we might ask for a whole range of services that you might find in a hospital situation, and I use Hamiota for an example there. Basically everything that happens in health care, the board at the Hamiota Health Centre knows about or is involved in and works with the various components of the community and works also with the department.

It has been an evolutionary approach. It may be in the future that we will ask for other specific matters to be undertaken by community health centres. There may be changes in focus in a particular area—I do not have anything in mind—but there may be a change or an expansion. More likely you will see expansions in these services because they are involved so much in primary issues, which are very important to us, and community issues, which we are trying to develop so that we can have a broader approach to the operation of our health care system.

Mr. Lamoureux: I am pleased to hear the ending remarks in terms of the minister referring to

opportunities that might be there in the not too distant future. If we take a look at the different range of services that are provided from the different clinics, does the department have the different services that each centre has?

I would be interested in receiving a copy of a list, if it is not in the annual report, and you will have to excuse me if it is there, but I have not seen it, but a listing of services, if you will, of cumulative services of what the health centres do have to offer and if in fact there are any of those services that are consistent through each of the clinics, like, does every clinic provide any what would be perceived as an essential service for a community clinic?

Mr. McCrae: I would be delighted to share with the honourable member the menu, if you like, of services provided at each of the centres. We would like to have that as co-ordinated as we can, especially in a, now I will refer to Winnipeg as the big city here. We have a lot of things that need to be done in the city and we want to know if they are being done efficiently.

I want to know if each of the community health centres is working co-operatively with all the others. I know they have an organization and an association. I want to ensure that the services being provided by the community health centres complement each other and work well in an integrated system. If the honourable member wants to share with anybody he wants to the services available, let people know about it, it is good, because what I want to see is the appropriate use of each of these types of services.

The problem that sometimes occurs in our emergency rooms, I wonder if sometimes those problems do not occur because people could have visited their community health centre instead of thinking only of the emergency room. In that continuum of services, the community health centre has an important role, and I would like the public to know about it.

Mr. Lamoureux: I would concur with the thought in terms of that there no doubt are incidents where one could cite individuals taking down, whether it is children, adults, whatever, going to emergency in any of the hospitals that are out there when in fact there is

a local community health facility which they might have been able to go to if, in fact, they felt somewhat assured that the attention would be given to them regarding their concern.

In going through the annual report I noticed that there is a number, I am just doing a brief count, it comes across as approximately eight of the health centres where there is actually a decrease in budget allotment. I am wondering in terms of, if we are trying to provide better services into the community, why is it then we would see budget reductions in this area? I believe there are eight of them, at least I had counted eight, when you would think that we would be expanding in this area.

Mr. McCrae: It is always dangerous to look at a list of numbers and come to some quick conclusions. These are actual numbers, these are not budget numbers. The honourable member also should look at the bottom line which shows an increase, so that each one will have throughout the course of a year various adjustments that happen to the budget process. I have tried to explain this to the honourable member for Kildonan (Mr. Chomiak), that there are new programs entered into sometimes mid-year. I mean, I feel just as much like explaining the increases as I do the decreases.

I think the honourable member would be cognizant of the reality that we all work with, even the community health centres. We think that there are more things that community health centres can do. They do not always require more or different things community health centres can do, do not always require an infusion of new money. Did the honourable member refer to eight facilities? Well, there are probably more than double that number. All together there must be about 30—about 32. So you could say—32 minus eight is 24—that 24 had increases. I guess it depends which syllable you want to put the emphasis on. I think that when you look at the bottom line there is an increase there, and without detailed questions it is pretty hard to make the kind of response the honourable member raises.

He raises the question as if there is some kind of concern, and if there is one, I would like to know what

it is, because I see an increase overall to the community health sector. We have announced that this year we want to see them provide more service than they did last year, and we will be making money available for that this year. So I am not sure what the member is getting at.

Mr. Lamoureux: Mr. Chairperson, over the years government has been talking about the deinstitutionalization of health care, if you will. Over the years we talk about delivering more health care services into the community. One of the best ways that we can do that is through the health care centres, and if you go through the listing—and I appreciate the minister's comments with respect, yes, there is more than half that are receiving, substantially more than half that are receiving actual increases, but when I look at it and we pick out—for example, the first one off the list is Deloraine southwest health district. You know, if we could get some sort of an idea as to why it is that there would have been less money spent than what would have been projected—for example, was there a service there that was cut back? Was it something in which they found a better way to spend the monies that were there?

Do we have some of the health care centres actually cutting back on services? If we do have them cutting back on health care services then the question would become why would they be cutting back on those services. Is it because the community feels that the demand is no longer there? Because if in fact the demand is still there or it is still a higher demand, then we would think that they would go to alternative health care facilities which could be more costly, whether it is a walk-in clinic, whether it is a hospital. So that is the reason why the question is posed in terms of the decreases that are seen with some of the health care centres, because ultimately, as I say, if we are looking at bringing health care services closer to the community, one of the best ways of doing that is through the health care centres that are based in the communities.

* (1020)

One would have thought that that would have meant more of an ongoing type of increase as services are

enhanced and expanded. Likewise, you would anticipate that there would be savings at the other end, such as hospitals.

Mr. McCrae: Yes, I want to assure the honourable member that the numbers that he sees in the annual report reflect no reduction in services. I am assured of that by the department.

There is a tendency for politicians, I do not usually criticize the honourable member for this, but maybe others, to take one line somewhere that shows a reduction for whatever reason—and the Deloraine situation is a good example. One year's numbers we were looking at was a year where they were engaged in some major change and restructure that required more money that particular year than usual. Then you are comparing the next year that shows a reduction from the previous year. It does not surprise me a bit. What we have done is enhanced service there, and it shows less money, so numbers can lead to some wrong impressions sometimes.

Yes, I think there is a tendency in a particular sector or even a particular community health centre that perhaps wants to see more financial resource come their way for whatever reason, and they point to yesterday's or today's news that talks about some reductions at St. Boniface Hospital and say, well, there are those reductions, but we are sure not getting any of that here in the community, leading one to believe that nothing is happening in the community.

The question ignores altogether the fact that down in Boissevain, where our personal care infrastructure is being enhanced for the future, that throughout the province in various areas and especially in Winnipeg, personal care services are being greatly enhanced. The Home Care program and all of the other enhancements that we have been talking about, nurse resource centres and so on, are happening. One player will come along and make this point.

Now, if it had any merit, that would be a different matter. If a particular community health centre is just plain not getting any attention from the government, then that is appropriate to raise that and be critical of the government for that, for what it is, not for what it

means to the whole system. We are all committed to the same thing. We are all committed—well, most of us are committed to shifting resources from the acute sector and using those resources effectively in the community, all the while making sure you do not shift too much out of the acute sector.

But let us be honest about this. There are some hospitals in this province that are not running as well as they should. There are some community health centres in this province that are not running as well as they should. What are the reasons for them? Are they the government's fault?

I am prepared to be told if there is something that we are doing wrong as a government or if our funding emphasis is not in the right place or some such thing, I am quite prepared to hear that, but I am also going to challenge the boards of community health centres and the communities they serve to get with the program too, to challenge themselves and do not always assume that the leadership from the government is not right and therefore nothing is going to work? No, it is not right.

We have too many players out there that are doing a fantastic job and have demonstrated that a good job can be done in terms of population health planning at a community level and working with other partners in the system.

I am not being specific obviously. There is no need for me to do that, but I say that we want true partnership from all of the partners. I am extending myself, my department is doing that, to keep an open mind about the issues, but let us not seize an opportune moment in the politics of health to make some kind of cheap point that might get some attention, but it will not get a population health result or outcome that we really need to see.

So what I keep doing every time I go to a meeting of any board or any organization is to appeal for that corporate-type of thinking. I am talking corporate in the sense of provincial, regional, community thinking that says, what really is the best thing for our population, and let us work together to achieve that. And so, yes, there are some community health centres that perform better than others.

There are some hospitals that perform better than others, and sometimes the reason is the nature of the community it serves, sometimes the reason is the nature of the membership of the board. There are stronger boards and not so strong boards. Those boards that are not strong, recognize that and find ways to improve the make-up of your board, so that the community's best interests are being reflected there, and that includes in the dealings with the government.

This is not a confrontational system anymore. It used to be. The election ended that. We now work together. The nature of these Estimates, most of the time, demonstrates that we are into a less confrontational stage of the development of the politics of health. There is a greater understanding every day now that we have to work together, and that is what I appeal for, and if, as I say, there is a community health centre that wants to, or the organization wants to make some point that what the honourable member said is correct and wants to prove it, I will be all ears, because I believe firmly that the shift to the community is the right thing.

This emphasis on prevention and promotion is the right thing, but that does not mean you take your whole \$1.85 billion and put it into one program. I mean, we have got hundreds of programs to keep going here, and some of them, we have programs we need to get rid of, and we have programs we need to start in order to keep building on that health system that takes account of the whole person and the whole population.

Mr. Lamoureux: Mr. Chairperson, seeking information, the Minister of Health indicates that, you know, you pick one line and you say, well, because you are assuming that there is a decrease, that that means that there has been a decrease in services. No, that was not necessarily a general assumption. What we are trying to find out from the Minister of Health is more so the level of services. In his response he indicated that the level of service has not changed within the community health care centres, and that is reassuring to hear.

When you see a decrease in a line, it does and should raise the question as to why. That is why we have the Estimates process. You ask the question, the minister then says, maybe there was a capital expenditure of

some sort or some up-front cost to getting a service up and running, and then the following year, of course, there is going to be some sort of, or should be, or could be some money savings, and that is a reasonable answer to give, and that is the reason why we have Estimates—to ensure that concerns of that nature are addressed.

I hear the minister, in his comments, saying that the services that have been provided from the health care centres over the last year are, in fact, being maintained. I am quite glad to hear that.

I also acknowledge that the Minister of Health does have the responsibility to challenge all of the different boards that are out there, and he would not be doing his job if in fact he was not doing that. Because, ultimately, it is the Minister of Health that works along with the communities that have to hold boards accountable, because not every annual general meeting—and I am sure the Minister of Health has attended many different annual general meetings.

Quite often an annual general meeting will be whatever the board is prepared to put into it. If they make a mass appeal and do a serious literature drop and so forth to try to get more people to attend an annual general meeting, you are going to have that much more of larger community input. If it is an annual general meeting where there is minimal work done to organize the annual general meeting, then it will be a relatively small number of people that are providing that community input. And that is one of the reasons why the Minister of Health does have the responsibility in terms of making sure that all boards are in fact being challenged, because each board does have different abilities.

* (1030)

One of the things that we have to be very careful of is that we do not deny a community that is out there opportunities, because maybe there are inexperienced boards, or one board might have more ability than the other. In some cases, it is a question of maturing some boards or helping or assisting boards, and the department can be a support or provide that sort of support if it is deemed necessary from local boards.

I would ask the minister, with respect to the clinics or the health care centres, are there defined catchment areas that are there? For example, Nor'West is the health centre out in my area. Is there a defined catchment area for that particular board?

Mr. McCrae: Yes, Mr. Chairman, the centres define their service parameters by geography and/or by target population. I do not live in that particular region, but if I wanted to use the services, I could.

Mr. Lamoureux: Suffice to say, then, that board members that would be participating on the centres would then have to live in that geographical area or in that target group?

Mr. McCrae: No, Mr. Chairperson, I do not think the centres want to limit the opportunity for input in that way, so that if a centre is serving a targeted population, for example women, and there is a possibility of getting the services of an extremely capable person to be on the board, and the person lives outside a particular boundary, that would be an unfortunate sort of approach, so they do not limit by geography one's entitlement to serve on the board.

Mr. Lamoureux: Is there anything that dictates that you have to have a certain percentage of community people or defined catchment area residents participating on a board?

Mr. McCrae: It would be up to them really, Mr. Chairperson, to make their constitutions and by-laws. It would be hoped that they would do so in concert with the department who is going to be the funder, but those things would be governed by by-laws and constitutions.

Mr. Lamoureux: I take it, then, that the department would have copies of all constitutions, by-laws of the centres and would assume, then, that they would be reviewing those. I guess what I am looking for from the Minister of Health is some sort of assurance that—and the percentage I would use would probably be somewhere around 75 percent.

I just kind of draw that figure. I think that seems to be a reasonable percentage of what one would anticipate would be local community involvement.

Can the minister give any indication in terms of what he would feel would be an appropriate community or target population involvement on the health centres?

Mr. McCrae: I think it would not be appreciated by communities if I were to bring my own personal biases and impose them on the constitutions and by-laws of the various community health centres.

I think the department's concern is that, is the constitution or by-laws of an organization—are those things achieving the population health requirements that we want to see happen or see met as a department which governs the whole population of the province. Of course, that means the different populations within it.

I would not want to say 75 percent or 100 percent or 30 percent or 80 percent. I do not know. It might work in one community and not in another one, appropriately. I think the department's overview would have to do with the kinds of things I have said. If something stands out to us that appears like some kind of hijack, if you like, of a community and a government-funded organization—let us say a political party wants to take over a particular health centre, and it could be shown that this had nothing to do with population health needs. I would be concerned about that. If I felt that a group of men in the neighbourhood wanted to have an all-male board and that would mean the exclusion of female persons from such activities, that would give me some concern if I could prove it. You know, I would want to see action taken.

So the idea is to serve the community, how best to do it. It may be felt that in a particular region there should be, if there is a 10-member board, seven of them should be from that immediate community. Well, the democratic process, whichever process is in effect in a particular situation at the annual general meeting or wherever it is these decisions get made, let us let that process work rather than impose certain requirements.

The only thing I say is I want to see the community health centre indeed serve the community. Problems have arisen from time to time and I am approached about those problems, and if I can help in some unbiased and impartial way to help organizations

through difficult periods, my office is there. I do not like to impose myself where I have not been asked or I am not welcome, but I certainly do have to take a responsible approach because it is this government that funds to a very large extent the activities. If something goes wrong, obviously you know who is going to be approached about it; it is going to be the government. That happens all the time.

* (1040)

So if there is a problem that the honourable member would like to share or if he knows of an issue in a particular area that somehow I can appropriately help, just let me know, but I am not about to impose my values on the community when the community has its own values. Where those values are legitimate and acted on in a democratic way, I really do not have any role in that situation.

Mr. Lamoureux: Mr. Chairperson, I wanted to move on to walk-in clinics, but I also want to make some comments with respect to what the Minister of Health just put on the record. I guess I would agree to disagree with the Minister of Health. I do believe that community health facilities should be predominantly—the board should be predominantly made up from the people that live in that particular community, or if it is a target population-based health clinic, then from within that target group.

I think that should be fairly easily achievable if in fact the will, not necessarily of the Minister of Health, but of the boards is to try to get community members involved. That is the whole idea behind the community health centres, to try to get community members more aware of it. One of the best ways to do that is to have neighbours and so forth that are serving on the boards. I do not think that this would be a movement on behalf of this government for the first time.

You can look at the education reforms. In the education reforms there is a certain percentage of people who are on the advisory boards that have to be parents, and I think that is a responsible way of doing it. Equally, I believe it would be responsible for government to say, look, on the health boards that are out there, because we are trying to strive for

community-based health care services, we are going to put, whether it is—and I just use the number of 75 percent. That might be my own personal opinion; I believe something of that nature is achievable. But there is nothing wrong with the government saying, here is what we would like to see in terms of participation as a minimal requirement for the health clinics.

The other comment that I wanted to make before I move on to the walk-in clinics is the offer from the minister of the menu of services, as he termed it, and I think that might be an appropriate way of terming it. Yes, I do look forward to receiving that menu because I think that that menu will assist at the very least the next time we come into the Health Estimates, because I really want to focus more attention on how and what we can do to ensure that those community health centres are really playing a more significant role in the health care delivery of all the different services that are out there.

I personally believe and have always believed, primarily because of when I look at the Nor'West Health, of the benefits of the health centres.

Getting on to the walk-in clinics, I was going to ask the Minister of Health, how many walk-in clinics does the province currently have, and how does that compare to, let us say, five years ago? I am trying to get an idea in terms of the number of walk-in clinics and how they have increased over the last number of years.

Mr. McCrae: I appreciate what the member said about disagreeing with some of the things I said. I think I know the reasons why. There will be times in the history of any organization when they come upon some difficult times, political times. Those things arise with all of the best intentions when with constitutions and by-laws, things can still not work for a good part of the population. I can refer, for example, to the issue of therapeutic abortion and how that creates division in some communities, regardless of the structure, make-up of the political governance of an institution.

So I appreciate why the honourable members says what he does. I just do not know that by the

government coming in from the so-called ivory towers and imposing rules, that in itself might have the effect of bringing people together only to be mad at the government. That is something that works quite often. You can get bitter enemies, at least we will come together long enough to take a strip off the government. I mean, that happens. But I do not think that has a lasting effect of healing whatever wounds exist locally.

So I will keep in mind what the honourable member said. I still think that if we are wanting the emphasis to be on community here, the more we can empower communities to sort out the composition of their board and how the organization should be governed, that is better in my view. Someday the honourable member's comments might prove me wrong in an individual situation, but I think from a general standpoint, I am going to be right. We will see an honest difference of opinion, I think, here.

With respect to walk-in clinics, it is going to be hard for me to answer that question because of the pure problem of definition of what a walk-in clinic is. I do not think we have a designation for the purposes of funding of the fee-for-service system the difference between a walk-in operation and any other kind of operation.

If the honourable member would like to help me define that, it might make it easier for me to answer his question.

Mr. Lamoureux: I think it would be definitely beneficial if we can come up with some sort of definition of a walk-in clinic. The type of clinic that I am referring to is where it would be classified, no appointments necessary. You just walk in and there are health care professionals there that would be able to serve you.

Mr. McCrae: Even that is going to be a problem, because I know that some of the recognized clinics that are not known to be walk-in clinics have a no-appointment aspect to their operation, so you could maybe call that a walk-in within a clinic.

You can see the difficulty there. Depending on the relationship that a person has with his or her own

physician operating in a traditional clinic, something comes up for you healthwise, you may very well be able to get to see your doctor without an appointment in certain circumstances. I am not saying that it defies definition. It just has not happened yet.

I would watch the Manitoba Medical Services Council as it does its work, because I know a year ago there was talk that certain aspects of the operations of walk-in clinics in Manitoba might come under the scrutiny of the Manitoba Medical Services Council. That might well happen, and that might define what a walk-in is more by the way doctors are funded than it actually sets out some written definition of what a walk-in clinic is.

One of the biggest clinics in Winnipeg has a component that allows you just to walk in and get service without an appointment, so does that make the whole clinic a walk-in clinic? I think it may be a bit of a question of semantics, but if something really turns on the importance of this, I am sure that it will be addressed.

Mr. Lamoureux: Mr. Chairperson, for all intents and purposes, a doctor's office could be termed a walk-in clinic, there really is no substantial difference, is really what I am hearing. If that is the case, I would ask do we have actual numbers of doctors' offices that are out there? We have a number of physicians, some are specialists and so forth that might not necessarily have offices per se such as a general practitioner. Can I get some sort of an idea of doctors' offices?

* (1050)

Mr. McCrae: We will share the information we have with the honourable member. I am not sure how it is set out, but I am sure that through our records, we know how many physicians there are, we know what they are paid by Manitoba Health and for what services, we know their addresses and I think we know how many clinics there are, but they are just not designated as walk-in or otherwise.

The best example I know is that my opponent in this last election, a New Democratic opponent, is a physician. Many, many people in Brandon say, well,

he is a walk-in doctor. I said, oh, is he? I did not know that. I think if you look at his office it does not say walk-in on it, but you can walk in.

It was an interesting point as a matter of fact, because at one doorstep I was almost attacked by a union nurse who wanted to make some very strong points with me. After about 10 minutes I said, well, I guess I better be going. No, you are not going anywhere, she said, you are going to stand here and you are going to listen to everything I have to say. I did for about 45 minutes. Then you do not get your whole poll covered when you do that, by the way, but I was not about to run away either. At the end of it all, I said, oh, by the way, what do you think about walk-in clinics? Oh, I am against them. I said, okay, have a nice day. Oh, well, wait a minute come back here, come back here. There were a whole bunch of other things then said about walk-in clinics to justify them.

It is a very interesting experience to go through when your opponent is a physician. I do not know today if he would fit any particular definition of a walk-in, although that is how he is known in the community, as a walk-in doctor.

Mr. Lamoureux: Mr. Chairperson, there really is no hidden agenda behind the questions. What I am trying to get a better understanding of is that there seems to be more of a walk-in doctor—I do not know, maybe it is because of demands of patients that this is the sort of service that they want to see, where we are seeing more of the walk-in type signs, if you like. I am wondering how much of an impact that has had on medical services and the costs of medical services.

I believe I even heard the former Minister of Health refer to the fact that, here you will have an individual patient that will go from one walk-in clinic to the next walk-in clinic all in the same day, where they would be going to several places. The Minister of Health made reference to that 5 percent. That is why it is more out of curiosity in terms of is this something that is more recent where doctors want to be able to make themselves or some doctors want to be able to make themselves more available. I would assume that there is a bit of a difference, for example, in some walk-in clinics. I look at the one out on Portage Avenue by

Polo Park. It seems to have a great deal of people that go through it. That can be a positive thing, especially if it is preventing them from having to go to a hospital, knowing full well that there is a walk-in clinic that is fairly easily accessible.

I wanted to move onto another area of health care services, and that is with respect to group homes. To what degree does the Department of Health participate in group homes?

Mr. McCrae: Mr. Chairperson, there is a tendency for many Manitobans when the whole question of misuse or abuse of the health system is brought up to think immediately of the walk-in clinic. I think there are reasons for that. The walk-in clinics are prominent. You can see them. You know how easy they are to access, and so you know that abuse is associated with it. There is some truth to that. How much, is the question. Well, the immediate response then for those who conclude that great deal of abuse is associated with the walk-in clinic, well, let us just get rid of the walk-in clinic.

Unfortunately, we did not debate that a lot in the election in Brandon West. It did not come up that much. I do not think that is the right answer either. I know that there is abuse of the hospital system, but does that mean we close the hospitals? No.

Then the question is, so how do we get the walk-in clinic to work well within the continuum of health services? I think there are a number of things that should be done. With the help of health planners, with the help of the MMA and through the Manitoba Medical Services Council, I demand to see some progress in this area. For example, is the walk-in clinic playing its role appropriately in a comprehensive health system in the area of primary health services? There are indications that in some cases they are not, and so what are we going to do about that? We are going to address that with our partners in the Manitoba Medical Association through the Medical Services Council.

I think of the walk-in clinic as an alternative to the emergency room on many occasions. The emergency room should be there for people who are in genuine emergency situations. I know that options are there

even today and that the emergency room is the subject of misuse and abuse. I know that too, but I am not going to get rid of emergency rooms.

I do not think that is what the honourable member is saying, but I am saying that it may be hours of operation for walk-in clinics. Should that be changed? Should it be extended? Should there be more or different services provided out of that no-appointments system whereby pressure could be taken away? I made the same comments with respect to the community health centre, and I would make it about the walk-in clinic. Is it serving an appropriate role in a comprehensive health system, and is it playing an appropriate primary role?

Then I would like for the population in Manitoba to understand the different functions and the different capabilities of the various types of medical facilities, the walk-in clinic being one of them. So I am not asking for a virtual explosion of walk-in clinics throughout our province because that is not what we need. We need an appropriate use of them. We need the services provided in them to be appropriate to a comprehensive health system, and we need a population that understands the appropriate use of it.

An Honourable Member: And we need the opposition parties that understand it.

Mr. McCrae: Yes, we need that too. My honourable colleague from Emerson (Mr. Penner) brings much wisdom to this particular debate this morning.

Nothing is ever as easy as we all like to make it seem. It is always a little more complicated, and that is unfortunate because I would always prefer that everything was simple, and we could just make easy decisions and move forward. None of the decisions are easy because they all have to be arrived at as a result of appropriate research, an appropriate look at the population health needs that we have.

But we also should be looking at it from the point of view of an informed consumer. An informed consumer is going to make good use, proper use of the health system. So every time I get a chance I want to be part of a process that offers the consumer a variety of

services and encourages that consumer to use the one that is the most cost-effective and the one that is most likely to lead to an appropriate outcome.

* (1100)

I think there should be more money in these Estimates for us to spend money on television advertising. I have not achieved that yet, and if when I do I am sure my honourable colleague will say it is politically motivated or something. [interjection] Maybe we should get the three of us on the screen together and saying the same things. Is that possible? Well, I am willing to find out. The point is I am serious about that. We all learned a lot in the election campaign. Not enough, none of us. But we need to have a continuous regimen of health messages, to talk about health promotion, to talk about prevention of disease, to talk about the appropriate services to use in a given situation, as opposed always to thinking of that emergency room as the place to go or always thinking of our health system as a bunch of buildings around our province that we call hospitals. It is a lot more than that.

I am very happy that it is a lot more than that because it was because it was not a lot more than that in the past that we got into all this trouble in the health system. We put all the eggs in one basket—to use the old saw—and we need a number of baskets and we do. I am pleased to see the progress that happened in the last seven years, but certainly, along with progress comes mistakes, along with progress comes opportunities to learn how to do things better or differently and along with progress comes challenges.

It just happens that while all this progress is happening and all this new spending—it is humongous, Mr. Chairperson, the kind of dollars that the Filmon government has been able to make available for health care, and it is the envy of virtually every other province in this country. It does not mean that we did not have a recession, because we did. It does not mean that we are facing the realities of funding changes out of the cost-sharing arrangements between the various levels of government. That, unfortunately, has to happen whether I like it—and I do not as a Health minister—but it is happening, and it is not going to go away.

I know that there are some still saying, well, let us just make a political decision and change that and tax the rich or whatever, borrow some more money or tax everybody or make everybody poor so that we can have this or that. That approach is not on anymore. The people of this country will not put up with it. We recognize that.

So we are legitimately challenged to make good decisions. Very few are saying it cannot be done, very few. There is the odd union person out there who just says more money is the only answer and there are a few of their friends, too. Other than that, Manitobans and Canadians are looking to their governments and saying, get with the program, get serious, stop trying to fool us that we can have everything that we ever dreamed of having. Just give us some quality for the money you are taking from us. That is what they want.

The honourable member asked if my department is participating in group homes. I just ask for a brief clarification from him what kind of group homes he is talking about.

Mr. Lamoureux: Mr. Chairperson, I know there are group homes that are out there for seniors where seniors will actually go into the group homes, and I am wondering if the Department of Health actually contributes to anything of this nature.

Mr. McCrae: To this point, Mr. Chairperson, arrangements like the one the honourable member is talking about, mostly the Family Services department is involved in those.

We, as a department—and when we get into the Home Care discussion we will be talking about this—are doing a better job these days with regard to servicing of elderly persons' residences in the way we are co-ordinating our services. I have been hearing encouraging reports about that.

There are areas where we are not doing better yet. We will probably be hearing about those no doubt, but through the housing arrangements, federal and provincial, we have developed a network of elderly persons' housing, which is not really the group-home type of a thing the honourable member is talking about.

There are other extended care facilities—that is a Family Services issue—but even in those settings the Home Care program is there and available to people who need it.

Mr. Lamoureux: Mr. Chairperson, I am aware in terms of income security they do play a fairly significant role in this whole area, but given what quite often happens—and I think there is very strong correlation with seniors and hospitals and personal care homes. Once again trying to bring it right closer to the community itself, I think there are a couple of areas such as the group homes, such as board and room, such as, preferably and first, the highest priority, would be in the home itself. There are different services, but both the Department of Family Services and the Department of Health—and there could be other departments that I cannot think of right offhand that participate.

I am interested in knowing again, because of the changes that are ongoing in health care, in terms of what the Department of Health feels its role may be, and that might be in a co-ordinating fashion with the Department of Family Services, because a group home of, let us say, six seniors, for example, is it more cost-efficient, better service delivery to the patient to be able to promote that sort of thing over a personal care home facility? Is there in fact a role for the Department of Health, because if they do not pick up at the one end, then they are going to be picking up at the other end at a much more expensive and not quite as good a potential care for a particular senior?

The question is, what role does the Minister of Health and the government, through the Minister of Health, feel that things such as group homes, and I would even go as far to see if the minister would even be prepared to comment, let us say, on a board-and-room type home because I do see that there is a difference between a group home and board and room. Is there something in the future with respect to the Department of Health? At the very least, one would assume that there is definitely some sort of a co-ordinating role with the Department of Family Services.

Mr. McCrae: Mr. Chairperson, the type of idea the honourable member is talking about is not something

we are engaged in as a department. We are always looking at proposals or options or ideas that come forward. If the honourable member has a proposal of his own or he knows of a community organization or group that has some alternate ideas, something between the hospital and the personal care home, for example, something between moderate levels of care in the home and something more institutional like the elderly persons residences that we see or something between the stages we already have, because there are extremities. You may be near the point where you need to be panelled for personal care but you are not there yet. Yet it is getting to be more and more difficult to remain at home. I know what the honourable member is getting at, and we are not involved in that sort of thing at this time.

If there is something specific that the honourable member or some organization wants to bring to our attention, we are interested in seeing what there is there.

* (1110)

Mr. Lamoureux: Mr. Chairperson, this may be something which we will explore again in more detail or possibly even get, because I have had conversations with different people with respect to the role of group homes in particular. I do believe that the Department of Health should be, as I say, playing that co-ordinating role or at least participating in some sort of a communication with interdepartmental communication, if you will, dealing with some of these issues.

You make reference, for example, to the elderly person housing that the Department of Housing makes available, and many of the problems in those housing complexes are, in fact, it is kind of like a shoebox. I should not say all, but a good number of them are kind of like a shoebox when you walk into one of the units. If, in fact, they were expanded or retrofitted to a certain degree, you might be able to facilitate a senior to be able to remain in that particular block that much longer where there are not as much health care requirements having to be given, where the morale of the senior might be better off because they are allowed to remain with their friends and their neighbours who have been in the blocks.

So that is why I say, there is something that is there. In many cases it means quite possibly the Department of Health officials sitting down with Department of Housing officials and seeing if there is something that can be done. Ultimately, as I say, I think that you could be saving dollars if that particular senior ends up having to go into another facility that might be more costly to government and, ultimately, not as nice of an atmosphere for that particular senior because they might choose to, if they had the opportunity, remain there.

(Mr. Mike Radcliffe, Acting Chairperson, in the Chair)

With respect to the group homes, I know for example the Department of Family Services does provide direct grants for individual entrepreneurs, if you will, where they will take seniors into the home. So, once again, as a senior, if you are living in a community, there comes some point in time where you have to leave your home. One of the bridges that could be there as opposed to going directly into a personal care home could be a group home where there are qualified individuals who are prepared to provide the health care services that are needed, that there are standards that are kept, and the Department of Family Services already acknowledges this and does participate. Again, much like with Housing, I would think that the Department of Health has a vested interest in ensuring that what potential is there is at the very least being explored. Obviously, like the minister, I am not necessarily a professional in every aspect, but I do believe there are some good ideas that are there.

I admit during the election with someone who actually assisted me on the campaign, they had a board-and-room facility, and they felt that some of the simple things such as being able to hand over or provide some minimal care would assist them in having the opportunity to be able to retain some people for a longer duration. Again it seems that if we can prevent displacement while at the same time assuring that we are not compromising the quality of service that a patient might require, then I think that it is something that we should be looking at doing. Why? Because ultimately I believe and the Liberal Party believes that if it is delivering a better service to our patients or to

the clientele that is there, that is what we should be striving for.

A great incentive for government is not only are you delivering that better incentive, of course, but in all likelihood there is money that could be better spent by looking into things of this nature.

I will do what I can. If the minister over the summer wants to further explore this area—in particular the month of August, I am hoping I can get a couple of weeks in July off if we are out of the Chamber, and I am sure we will be out of the Chamber—but in the month of August if the minister wants to pursue that and wanted to talk to some of the people that I have been talking to, I will be more than happy to facilitate something of that nature but would look to the minister in hopes of getting some sort of acknowledgements that yes, the Department of Health, if it has not been, will start to enter into some form of interdepartmental communication with staff regarding the housing of, in particular, seniors and services that might be there and made available in order to allow them to remain in that setting for a longer period of time.

Mr. McCrae: Indeed, Mr. Acting Chairperson, I appreciate the honourable member's offer, and I say to him that in many ways we are already engaged in alternate arrangements. I am advised that we also are examining a number of different options. For example, we have in Winnipeg a seniors housing apartment staffed by nursing professionals which accomplishes some of the things the honourable member is talking about. These things happen in consultation and co-operation with other departments like the Housing Department. We are on that track, and if the honourable member has got other ideas that we have not heard about, I would indeed be interested in knowing about them.

Mr. Dave Chomiak (Kildonan): This branch of the department has been significantly reorganized with respect to the approach. We have seen the melding of certain areas and agencies within the overall approach. I wonder if the minister might briefly outline for me the rationale behind this particular change, the overall movement in this subsection to community and mental health services and the program and regional

development breakdown? We have a program branch, we have a Winnipeg program branch, we have a northern and rural.

Mr. McCrae: Mr. Chairperson, yes, a year ago, we began a very important process and changes at the administrative levels of the department. It might seem that is an end in itself, that you can make some savings. Indeed, there were a number of positions removed from the administrative parts of the department, and those who were involved no doubt went through some very difficult times in order to bring those changes about. We thank them for their forbearance, the efforts that they had to make and the advice they gave so that we could come out with a more streamlined administrative and program structure in terms of the effective functioning of the two.

* (1120)

By having Finance and Administration on the one side and Programs and Operations working together on the other, instead of the more cumbersome sort organization that we had previously. That is all good from an administrative standpoint, but it also can lead to very good results at the program delivery level. That is what it is really all about, but at the same time, you are able to save dollars, precious dollars. They become more and more precious as each federal budget is brought down. It has also improved communications within the department, and we hope to see results of those improvements in the months and years ahead.

With respect to Home Care and Mental Health Services, they have yet to become—how shall I put it—folded in. That time will come, and when it does I expect that the proper groundwork will have been laid and that also, again, at the program delivery level we will see some improvement.

I am sorry from time to time that administrative changes lead to some misunderstanding and also some comments that get made that are not true. That happens from time to time in the operation of public affairs, and sometimes from the most responsible quarters you will get a comment that maybe would not have been made had there been a better communication. We are trying to improve that. I

certainly am working very closely and I think very well with organizations in the system like the medical organizations, the nursing organizations. We continue to have our door open for the nurses union and some of the other ones.

Looking at my mail yesterday, I got a very, very nice correspondence from a union leader in Manitoba about the operation of one of our health reform committees—very, very complimentary. It read like the words of a person who genuinely wants to take a co-operative approach to the reforms of our health system and genuinely wants to keep the patient in mind. Boy, people like that sure get my attention, Mr. Chairperson.

Mr. Chomiak: Mr. Chairperson, I have some recent correspondence which I also will be passing on to the minister concerning some of the operations and difficulties, and it is not nearly as complimentary. I hope the minister will accept it in the same light that he accepted the complimentary one, because I think it deals with some valid complaints of workings in the system that are not being addressed and that are mentioned by members on this side of the House constantly.

I recognize the structural change and I am not going to go down the line of saying, gee, there was \$9 million in the women's program last year and it does not have a designated line in the appropriations this year. Why have you cut it out? I am not going to say you have cut out the \$1.2 million last year in Healthy Child because I know structurally that there has been a change. I am assuming—and I would the minister will correct me if I am wrong—if we talk about the women's program it is just that programmatically it is being now structured through the Winnipeg Region and through the rural and northern regions in probably two different branches and I suppose co-ordinated at the administrative level. I am assuming that.

There will naturally though be a very legitimate concern that Healthy Public Policy, because it is no longer a branch, and those kind of activities are not being adequately addressed—it is much easier to do when you have a line item in the Estimates—are not adequately being addressed in this area and are no longer a priority. That criticism will come. I just

wonder how the minister can assure us that in fact is not the case and what initiatives indicate that.

* (1130)

Mr. McCrae: Mr. Chairperson, I do not want to carry on a tradition that was a tradition characterized by too much tokenism and not enough action. I look at the Chretien cabinet and the way the Prime Minister restructured the cabinet. Well, actually it was on the heels of Kim Campbell who reduced the cabinet from, oh, 40 or more ministers down to about 25.

Did that mean that there was not still an emphasis on the areas of concern for the government of that day? Does it mean when Mr. Chretien restructures his cabinet—and no doubt the departments are all going through major restructuring—this is not a partisan comment—does it mean that the government in Ottawa does not care anymore about some department that no longer has a name or got folded in with another department? No, that is not what it means. Nor does it mean that here.

Our focus is very much on Healthy Public Policy. As part of that Healthy Public Policy, you are going to see emphasis on women's issues. You are going to see emphasis on children's health issues. You are going to see emphasis on the development of communities.

I think for a number of years we engaged in a lot of tokenism, all of us in this country. Governments said, well, this organization or group or part of our population—you know there is a real opportunity for governments to make some political pay here by identifying a certain segment of the population.

Let us give them a focus, some kind of tokenism we can do that will tell them that we like them and we want them to vote for us. That sort of approach does not really—people are smarter than that, Mr. Acting Chairperson. I think that especially today people are smarter than that because the population understands the environment within which we are working.

If I keep saying and showing through policy initiatives that Healthy Public Policy issues and community empowerment but community development

too are very key to what we want to achieve in health, well, the actions will speak so much louder than the words, I believe.

That is why, after seven years, we can show significant achievements, significant changes. Of course there are difficulties associated with change. I think if we show to the people that there is room for significant improvement yet, in the number of policies and programs that we have in operation now, and room for change to make improvement in results occur, and if we can be open enough with the people of Manitoba to say, in a difficult financial environment, here is what we are doing, here is what we have done, here is what we have not done well enough and need to improve, that approach will attract the ear of a population that is willing to engage in working with a government that is committed to policies that promote the public's health, i.e., a Healthy Public Policy, and when they know that a government is genuine in its desire to see communities develop from the ground up with the assistance of the government through the funding mechanisms.

I have a grants list here in my hand. I do not know how much time I should spend on it. I think the honourable member wants me to answer questions and [interjection]. He asks me to table it. I am going to be doing that. I will not go and review every single grant that is listed on here, for example, the Niverville Senior Services or the North Winnipeg Cooperative Community.

There are virtually dozens and dozens and dozens of these partnerships that really, I think, say we are interested in Healthy Public Policy and yes, we are interested in community development. That is more than tokenism. Even though a lot of these grants are relatively small grants, they are very significant in what they can leverage for us as a society. Yes, I am going to table this grants listing for the honourable member.

I know the honourable member made reference to some mail or some comments that are not going to be so positive. That is fine, if there is some substance to it. I will welcome it whether it is something I like to deal with or not. I will welcome it if it is going to bring about an improvement. You are not going to make

improvements if all you ever talk about is how great you are. We have to recognize there are areas where we are not doing well enough, there are areas where we could do so much better, we could spend the dollars more wisely, we could co-ordinate our efforts better. I recognize that, and I say so. It is the refusal on the part of politicians to acknowledge those kinds of things that, I think, get politicians ultimately in so much trouble. I do not particularly enjoy that aspect of the job. Where I believe that we could do more, I will say so.

Mr. Chomiak: As we indicated in this Chamber, the question was basically a lob question. The minister touched on the approach. There are several major public health initiatives that I think ought to be recognized, and are recognized, that should be priorities, healthy lifestyle, the question of smoking and the like, of which there are a number of initiatives, that I think have to be paramount. We have talked about a lot of them in Healthy Child that have to be paramount in terms of an overall approach. It should be one of the objectives and one of the very goals of this branch and this department to keep those initiatives at the very top of the agenda, with specific programs.

To that end I want to, even though we are technically dealing with 3.(a), I just wanted to turn to 3.(b), because it is all melded together, and deal with some of the specific programs that are listed on page 48 of the Supplementary Estimates book, which I think touch on this in a very specific way.

I am looking at the Expected Results, the third one where it says: address recommendations of the Provincial Cancer Control Committee Report. The minister has indicated that report is now being reviewed by the department. Can the minister give us any idea of—two things, actually. Can that report be made public, and secondly, when will we be seeing the movement towards dealing with those recommendations?

Mr. McCrae: Earlier on the honourable member asked me about the Provincial Cancer Control Committee Report and the palliative section of it. I responded that the palliative subcommittee, I guess it would be, had returned to the Provincial Cancer

Control Committee Report, but I have not received the report of the provincial committee to this point.

Mr. Chomiak: I thank the minister for that response. My memory had misinterpreted that response. The next line is the community nurse resource centres. Do we have a time line on development of those centres that the minister could relate to us?

Mr. McCrae: Yes, Mr. Chairman, time lines to the extent that you can predict how well your community consultations are going to go and how far along you are going to get with them. We expect the official opening of the Youville satellite nurse resource centre for this coming September, and the work is underway in Thompson, Norman and Parklands, our work with various community organizations and individuals in those regions. I would think by the end of this year or next year we would have further solid progress to report.

At this time, though, we are in the development stages of the Thompson, Norman and Parklands proposals, and at Youville we expect to be open for business in September.

Mr. Chomiak: Mr. Chairperson, can the minister indicate where the appropriation in these Estimates is for the community nurse resource centres, and what that amount is?

Mr. McCrae: When the honourable member looks at the Hospital section, he will see Community Health Centres as well, and it is in that area the nurse resource appropriations are.

Mr. Chomiak: Mr. Chairperson, could the minister indicate what the appropriated amount is for this year?

Mr. McCrae: We had identified a million dollars for the Youville centre. I do not know if we will get to spend that much this year on that particular one. The other ones, the amount appropriated will yet be dependent on what service demands we are attempting to meet in the various communities like Thompson, Norman or Parklands.

Mr. Chomiak: Mr. Chairperson, so for purposes of clarification, roughly a million dollars has been appropriated for the Youville Clinic in this year's Estimates, which may or may not be achieved because of the development, and there are no monies appropriated for the other centres because of the early stages of development.

Mr. McCrae: Yes, we have monies available. They are very hard to quantify. Should we need monies, if we get far enough along at Thompson, for example, and we need to spend some money, there will be monies available in this fiscal year—should we get to that point.

Mr. Chomiak: In the event that Thompson, for example, were to come together very quickly and they were able to establish a centre, it is conceivable that they could have a million dollars to develop the centre this fiscal year if it were up and running. I recognize that is hypothetical.

Mr. McCrae: Yes, I am assured that, should the opportunity arrive for the spending of some money on the Thompson proposal, the money would be there.

Mr. Chomiak: The next line indicates, "Ensure establishment of a Breast Cancer Screening Program." I thought that the breast cancer program was already operative. I wonder if the minister could update me just briefly what the status of the program is and what it proposes to do.

Mr. McCrae: Yes, the honourable member gets to a fairly touchy subject for me locally in Brandon because of the way things have worked there. However, we see Brandon and Misericordia being open late June—look at your watch for that one—or early July, and Thompson would be more in the fall that we could look for that.

What happened in Brandon was, the honourable member no doubt heard about that one, I got an invitation from the Manitoba Cancer Treatment and Research Foundation, and the mayor of Brandon and other dignitaries got an invitation to this opening. So we all arrived there, and we are all pleased and so on. Actually, what happened is quite all right with me, and I understand. The honourable member for Brandon

East (Mr. Leonard Evans) was there too, and I saw Dr. Decter there. He was there momentarily and then disappeared. Dr. Decter was my opponent in Brandon West who runs, I am told, a walk-in clinic in Brandon.

Anyway, so there is the leadership from the Manitoba Cancer Treatment and Research Foundation and they have this ceremony to more or less show interested parties the new facilities. Very significant work has been done in there. The facilities are attractive, and they look very welcoming. What happened, however, was the question arose, well, when are you actually going to be open? You know, here you are opening the place. Dr. Shachter very wisely responded—Dr. Shachter is the director of the Manitoba Cancer Treatment and Research Foundation—that in some weeks from now we will actually be able to take people and do the screening.

Dr. Shachter and the foundation wanted the people in Westman to know that this was happening and to start making their arrangements for appointments and so on. So it was all quite understandable. But the way it worked was quite different because later in the day the local television station, somebody in the union movement I think it was, tipped them off and they showed up and filmed—

An Honourable Member: It was not the union movement.

Mr. McCrae: It was not the union movement. The honourable member knows this for a fact. Well, that is good. That is nice to know. It must have been the NDP movement. In any event they showed the machine that was there being carried out of the building because that is not the machine that is going to apparently be there for the delivery of the service. All in all it made out to be somewhat of an embarrassing event, and yet it is important for the women of the Westman region to know about this service coming on stream.

(Mr. Chairperson in the Chair)

We are proud of it. We are proud of the facility there. Politics is politics. Health care is health care, and I am very pleased that women throughout

Manitoba will have the benefit of a breast cancer screening program because it targets women between the ages of 50 and 70, which is the appropriate group to target we are told by those who know about these things. That is the appropriate group to target. All I know is that we are going to save lives with these programs.

I am pleased to be able to say that it will not be much longer before they are going to be up and running and full speed ahead.

Mr. Chomiak: In line with this area, I wonder has the department given any consideration to the provision of a mobile cancer screening unit that could circulate around the province and provide that service to individuals who are in farther-flung locations?

Mr. McCrae: Yes, Mr. Chairperson, the question has come up from time to time. I believe the honourable member for Dauphin (Mr. Struthers) also raised the issue of mammography capacity for the Dauphin area, and I think we have not closed any doors on this point.

The technology is continuing to improve in this area. Change happens in that regard. We want to get a profile of whatever gaps might exist, once we have our screening process in place. Do not forget, too, the screening is for people who do not have symptoms. This is a routine type of screening program. I would suggest it would probably take pressure off the diagnostic programs that exist for people who do have symptoms and will give us an overall improved performance of the breast cancer program in the province.

So once we get the benefit of some data from the screening program, that would be a better time, probably, to look at the honourable member's question.

* (1150)

Mr. Chomiak: Moving on, as is necessitated by the quickening pace of this Estimates process, I wanted to move on to the prostate centre. This is a complicated area, however, I wonder if the minister could outline specifically what is contemplated with respect to the prostate centre. How much money is appropriated this

fiscal year for the development? If he could start off with that.

Mr. McCrae: We are making progress. Dr. Ramsey has been consulting with urologists in Manitoba on changes in prostate operative technology.

The changes are pretty significant. It seems like one technology was available last week, and we are into something else this week, and maybe something else will be on the market next week. It is changing so fast, it is making collaboration somewhat more difficult. The honourable member is right to raise this matter, because this is one of the organs of the body that requires attention to quite an extent in men who reach certain ages, and we are seeing more and more men reaching those ages.

As I said, the investigation and treatment of diseases and prostate cancer have become increasingly complicated. There is a dearth of knowledge in regard to the efficacy and effectiveness of treatment for prostate disease, and I suggest that is probably the case because of rapid change going on, and the ability to measure the outcome and the data related to outcome is hard to measure, because the methodologies are changing so fast. There is a lack of patient information and involvement in decision making regarding medical care, including this type of medical care. There are, I guess, at any given time, more than 2,000 Manitoba men with prostate disease, so that is why I say the honourable member is right to raise it, that it is that kind of incidence of disease going on.

What we want to achieve, we want to provide general education to the lay public and to physicians regarding prostate diseases, we want to provide information to patients suffering from prostate disease, we want to introduce and evaluate new treatment options for prostate disease, we want to track patient outcomes following treatment, we want to co-ordinate and conduct clinical and basic research in prostate diseases at the Faculty of Medicine, and we want to work closely with prostate cancer patient support groups as well. So we are very much into this, but how do you ever know when you are going to reach the end of something that is so fluid, shall we say, or so changing? But with the co-ordination efforts of Dr. Ramsey, we

hope to do some quality consultation in the coming months.

Mr. Chomiak: Just two questions again in this regard. Firstly, how much is appropriated this year for this centre? Secondly, can the minister just—I am trying to conceptualize where we are going on this. Are we talking about, for example, a prostate centre at, say, Concordia Hospital, that will treat, do research, educate, et cetera, out of there as a centre of excellence along the lines of ophthalmology in Misericordia? Is that what we are looking for, or are we talking about simply a co-ordinating role like the Children's Secretariat that will do co-ordinating branches of service and that prostate cancer treatment will still be done in various facilities, et cetera? Do we know what the end goal is for this particular centre?

My first assumption was that we were talking about a prostate centre per se, a physical structure that deals with research, treatment, education, et cetera, located at one of the hospitals or something like that. I just want to get some ideas, where we are going on that.

Mr. McCrae: It is difficult to attach an appropriated amount for this fiscal year to this particular issue. Again, through our Healthy Communities structure, should there be later on in this fiscal year some requirement to spend some money, those dollars can be made available, but there is no set appropriation for that.

The honourable member's question is one that I, frankly, had myself about the prospect of a centre of excellence or some such thing. This particular thing does not lend itself in the same way, as maybe other things, to a building or a place that you can say, this is the place for this particular thing. I see a co-ordinated, province-wide look at prostate issues. I would think that the Health Sciences Centre in the future will play that role in the sense of co-ordination and in the sense of research.

Mr. Chomiak: I thank the minister for that response. Just moving on to women's health strategy, it is curious because it says, "Development of a Women's Health Strategy," and maybe that is just a choice of words. Does that mean the province is presently still studying

and has a group that is studying what women's health strategy should be? Does that mean it is farmed out to various agencies or organizations? Do we have a women's health strategy? We had a Women's Health Branch with seven staff years, et cetera. Again, I do not want to place too much emphasis on the words, but it does say "Development of a Women's Health Strategy," and I wonder if the minister might update me as to what the status of that is.

Mr. McCrae: The program development component of my department is the component that would deal with this question. We are in the development of a strategy. Sometimes that leads one to think that nothing has ever happened or nothing is happening. We talked a while ago about the breast screening centres; we have women's health programs in effect in various places in Manitoba. I am not going to take time to go over all that, but I think when you talk about a new strategy or a strategy, you are talking about kind of developing that vision that you want to have as you move forward. And we do indeed want to develop a framework document on women's health, including

factors affecting women's health, current health status and emerging issues. We need to break down the numbers that the Centre for Health Policy and Evaluation, for example, looks at in arriving at population health type pictures and recommendations and break those numbers down more so that we can understand how some of these determinants and factors like that work for men and how they work for women and so on.

In consultation with the women's community, we want to identify priority areas for action within the context of provincial health priorities, such as—

Mr. Chairperson: Order, please. The hour being twelve noon, committee rise. Call in the Speaker.

IN SESSION

Mr. Deputy Speaker (Marcel Laurendeau): The hour being after 10 p.m., this House now is adjourned and stands adjourned until 1:30 this afternoon (Thursday).

LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, June 15, 1995

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