

THE LEGISLATIVE ASSEMBLY OF MANITOBA  
2:30 p.m., Friday, May 7th, 1976

SUPPLY - DEPARTMENT OF HEALTH AND SOCIAL DEVELOPMENT

MR. CHAIRMAN: Resolution 56(a)(1) - The Honourable Member for Wolseley.

MR. WILSON: Mr. Chairman, I was very disappointed that the members chose to drift over into the Lottery Section because I felt that when you're dealing with a Minister's Salary, and many things have come up during the course of the Estimates, that when you're dealing with a budget of almost \$400 million or \$395 million, some of the problems in the service to people in health care to me were of far greater priority than the Minister's conversation regarding the loss of these fresh dollars to the province. So I hope maybe later on that I may be able to get to deal with that low priority item which is, namely the lotteries.

I did want to again, because of this opportunity, to put on the record that I favour that health to me under this very large section in Estimates, is a service to people and I think that it's time that health care became something that was taken from general revenues. And I think the property tax owner shouldn't have to continue to pay the cost of many of these programs. And I think, starting with Resolution 56 and recapping some of the concerns and some information which might help possibly wake some of the people in this province up, because I certainly have been woken up and I think that I care and a number of other people care, and it's time that somebody pointed out and said: don't you care, it's time you got moving and looked at some of these situations.

And I think, for instance some of the policies that shows you the priority, for instance, some of the policies and that that are coming out of the welfare situation, and again the welfare seems to be administered by the Appeal Board. And their sort of sort Hughie milk-toast attitude to the whole situation gives me a great deal of concern because it certainly affects policy and the morale of all the staff. I think truthful need by all these people in low incomes and the unfortunate, should be the main criteria and we should be helping the needy, not the greedy.

I again raise the point: how many times can they move in one year? - and I'm talking about people on public assistance. How many pairs of glasses in one year? How many pairs of dentures and hearing aids in one year? How much furniture and appliances in one year? Aren't these the concerns of the Minister? And what price is the government paying compared to the private sector? Is his department concerned with the thrifty shopper attitude or the volume buying? Maybe because it's taxpayers' dollars, any price goes, I guess. But you know I couldn't help but feel that in the areas, the government doesn't seem concerned with the private sector when it comes to willful damage that's caused, non-payment of rent, non-payment of grocery bills for people that feel sorry for the children, there doesn't seem to be anything, they deal strictly with law. And dealing with law, why doesn't the Minister's department and the two twins who are busy talking to one another, why don't they chase down some of these husbands? Why don't they place a lien against his name for all the support that us taxpayers have been paying. I think the rights of some of the honest people in this province have to be protected.

I think in the employable section, I think that many of the people that are employable should be immediately put on the . . . employment program, it gives them some incentive and it gets a lot of the environment cleaned up and a lot of amenities and pluses to our area. I talked about barbecues along the Floodway and I talked about a number of suggestions, help in the community clubs, and things that people could be doing and getting out and getting some fresh air rather than being uptight and sitting at home with all the problems of the world because of their less fortunate position.

I did want to cover part of the Estimates with the Minister's proposal on child battery. I think it's a serious situation. I think it's the norm of today's society, and I think something should be done to educate the public, and I think we have to have a registry, sort of a register with periodic checks by his department to see these people are indeed cured and that their child battery situation doesn't continue.

I would have liked some support for the Minister and I know starting out, or leaving off this morning, the Minister again - I was sitting here in an innocent position

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(MR. WILSON cont'd) . . . . and the Minister took off on me again, for what reason I don't know, but he has basically done a lot to decrease the services in Wolseley, and I don't know whether that's because I'm the Member or what, but certainly the working mothers in my area are going to have to look to moving into another section of town, if they don't start getting some support for day care facilities, and if we don't start getting some support for our post-psychiatric recreational and location at 189 Evanson.

A MEMBER: Cut government spending.

MR. WILSON: Well I do say cut government spending, and I'll give you an example of waste. I'm glad the Member from Thompson brought that up. It's a low priority one but it has to do with Misericordia Hospital. You see because since the Minister or somebody decided that Major Connors should go, the hospital is not in as clean and proper position as it should be and I would like somebody to look at this . . .

MR. CHAIRMAN: Order please. Order. I think that the honourable member should be aware that the hiring or firing of Major Connors is not the concern of this department, it is not the concern of this Minister.

MR. WILSON: I will deal then with what I was getting to, Mr. Chairman, which is the laundry. I have a report here which indicates that - and I will withdraw any comments pertaining to Major Connors - but here's the report again which was under Major Connors' administration, and which they had a report on the comparative cost of doing laundry inhouse at Misericordia Hospital which worked out to 10 cents a pound. But those members opposite decided that Selkirk needed a politicized laundry, so tell me the cost of what it cost today to do hospital laundry? And then you decided to centralize it at Winnipeg General, and the cost is far more, far more than 10 cents a pound. And the savings go into the thousands of dollars, and that's the type of thing that I mean, and plus 20 or so employees may or may not have been laid off because of their dedication to the hospital. When these facilities are geared down instead of being improved upon, these people are then laid off, whether they were absorbed at the General or out at Selkirk, I don't know. But what possible sense does it make to handle the laundry four or five times just to get it out to Selkirk Avenue. And I've even heard if there's a fire in Selkirk, they have to shut off the water to the laundry in order to fight the fire. These are the kind of rumours that persist pertaining to moving a hospital or a laundry out to Selkirk without any consideration. So I do think that that's the type of waste I'm talking about and somebody's head should roll because of it.

Again, in the ambulance service, I don't agree. I think the Minister is discriminating against the City of Winnipeg because the grants are on assessment rather than per capita situation. What makes myself or my neighbour so much different from the fellow in Dauphin or in Brandon? We're people and we deserve the same per capita grant for protection and ambulance service as anybody else.

And again I talked about a number of situations, and the one I was concerned about --(Interjection)-- Well, I really did want to get into the one situation that I was concerned about which --(Interjection)-- I was very concerned when the Polson-Charles area turned down a government experiment in their area. I think three NDP councillors and the communists turned it down. I was surprised when East Kildonan turned one down, and yet the Minister continues to pile them into my area, not giving a hoot about the concerns and the off-shoots and the problems of concentrating them all in one area. --(Interjection)-- To the Minister of Health, that's exactly the biased attitude that I would expect. Why don't I build a wall. That's the ridiculous type of statement that comes from a person making his kind of money and with his responsibilities. --(Interjection)-- All right, all right.

MR. CHAIRMAN: Order please.

MR. WILSON: Let's use some common sense to the members opposite for a minute. How about denticare? Here's denticare, floating crews of people, civil servants from Australia and England, running around as dental nurses, in a very fast election year type of thing, where you've got to pile this universal denticare thing on right away. Now surely to God, with all these beds that we're short for care or for senior citizens and that, couldn't you go a little slow on this Denticare Program. We know you have the

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(MR. WILSON cont'd) . . . . control, we know you've got the vote, but why not go a little slow about it? Tell the people they can --(Interjection)-- I voted against it. --(Interjection)-- Well, I would have. I spoke out against it. I'm not here to try to outsocialize the members opposite. --(Interjections)-- Well I think a number of the dentists who I grew up with, they're going to lose their investments if they're not careful. The Member for St. Johns talked about salaried dentists, dental nurses, universal program, and the adults will be next because there'll be another election four years from now, if we don't get rid of you.

But again I think that the --(Interjection)-- The Minister says he's fed up with the charges here in today's paper, but I wanted to tell him to stop fighting with the doctors because I'm concerned about socialized medicine. A lot of people and practical experience, they are not getting proper medical check-ups today because of the rush, because of the low salary paid, and everything. Everybody is given an aspirin, everybody is given valium for their nerves, and people deserve, and I'm going to suggest that somewhere along the line we set up a preventative medical check clinic where people can go and get a true medical check-up for peace of mind, for peace of mind. They're tired of getting aspirins. And for peace of mind there should be somewhere where people can go and get a proper medical check-up.

MR. DESJARDINS: To finance this clinic that you . . . you're very much against socialized medicine and I'm sure it won't be the government, so who will work there, how will they get paid, and who's going to finance it?

MR. WILSON: Mr. Chairman, I am sure that if the doctors of this province were in a position where they didn't have to computerize people through their clinics that they would do it themselves. Everything left to the experts is what I'm talking about. All right we'll talk about the fighting Minister. He was sure fighting this morning. I don't know why he picked on me for his son-in-law. I had no knowledge the man existed. You know, I don't know they --(Interjection)-- Well. Never mind.

MR. DESJARDINS: Just so there won't be a misunderstanding, for the record make damn sure that it doesn't go out that he's my son-in-law, please.

MR. WILSON: Well listen I don't care what Dr. Wonderful says because I'm telling you the Free Press - and I'm not going to get into his relatives - you know the Free Press says he's so wonderful, Manfred Jager says he's so wonderful - yes he does. But could the Minister state what Mrs. Kay Jager does in his department? What are her responsibilities? What is her salary? What does a lady by the name of Mrs. Turnbull do in your department?

MR. DESJARDINS: There's no lady by the name of Mrs. Turnbull that I know of working in my department.

A MEMBER: She's probably no lady.

MR. CHAIRMAN: Order please.

MR. WILSON: Well, I'm sure the Minister is such a wonderful man, a nice man, that any relative or friend who wants to board the taxpayers' train, you know sort of like: Happiness is working with the Minister, you know. Well the Minister stood up this morning and tried to explain only one relative. I may ask for an Order for Return asking how many other relatives of his work in the government. I'm not really that concerned but somebody doesn't have to get up and talk about those type of things. Let's talk about \$395 million.

A MEMBER: Well why did you raise it.

MR. WILSON: Why did I raise it? To the Member of St. Vital, why did I raise it, because I sat here this morning and took abuse for somebody I didn't even know existed, and so I sat down at noon hour and started thinking: where does the Minister's daughter work? Where does the Minister's sister work? And let's get into the friends and all the rest of it. So the politicized situation exists on the other side, and I've listened to one speech after another where he talks about politicized situation when it pertained to the lotteries. Well I think the Minister, it is only proper that he should defend his relatives and for that I give him a lot of credit. However has the Minister got a handle on his department - it sure is a large one. And maybe he needs relatives to keep an eye on

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(MR. WILSON cont'd) . . . . some of the things that are going on because it is a large department. But is the Minister the most travelled Minister in modern history?

MR. CHAIRMAN: Order please. The Honourable Minister on a point of order.

MR. DESJARDINS: On a point of order. If the honourable member has any accusations about relatives, I explained one situation - if he wants to keep on referring to people in my department, either friends or relatives of people, I want him to name them.

MR. WILSON: Mr. Chairman, I hope that that doesn't take from my time because I did want to ask the Minister - I was just looking - I'm asking a question: is the Minister the most travelled in recent history? Is the Minister the most political Minister of Health, and the most politicized in his placement of dollars? You know, I'd like to give you a sample if I could. I have a letter here dated August 15, 1974, in which a particular hospital in the Minister's riding came to the City of Winnipeg for the support of the St. Boniface Community committee asking for \$756,000. However, the First Minister in the by-election said, we'll make this man the Minister of Health if elected. That's right.

A MEMBER: That's how it happened.

MR. WILSON: To the Minister, this rookie knew and I say, could sense, and I'm saying that I saved the City of Winnipeg \$756,000 because I knew that thinking of the member opposite, and I'll tell you what happened. I'll tell you what happened and the article is right here in the paper. It says the decision on the meeting came in a flurry of debate initiated by Councillor Bob Wilson, who said, granting St. Boniface Hospital 20 percent of its \$3.3 million improvement project for a new entrance and signage and stuff like that, was wrong and it would set a precedent and open the floodgates for all other hospitals to come in. And I simply said off the record to my colleagues, there's a by-election coming up, the government will give the hospital that 20 percent. And we know what history is, your government gave the hospital a 20 percent and the City of Winnipeg saved the money. --(Interjection)-- Well, thanks to me. --(Interjection)-- Well, you know, it's politicized dollars that make people wonder and you're going to be found out one day, and I don't know how, one of these days, as I say, and the beautiful part of Hansard is it records everything and you can refer back to it. But I think that the First Minister indicating that that gentleman was going to be the Minister of Health if elected was unfair to my former colleague on council and a very fine gentleman indeed. It's the type of tools that we working people have to fight with today when we run for political office. --(Interjection)-- And I'll tell you - the Minister of Mines said to fight fair. He said it the other day and I was going to but I don't have to get remarks like I did this morning, and I'm saying that I grew up in St. Vital and I know that the people in St. Boniface would never vote NDP, never. They voted for the Minister of Health and they voted for the man who could take care of them because he was in government. A \$359 million budget, that's a tremendous amount of responsibility. However, the people change and the Minister will now have to get down to priorities. At least, I hope he will. I think that St. Boniface has got enough. I think the Minister will start to do his job. I think he'll get down to priorities. An election year is coming up, he then has to put things in a non-political sense and the politicized projects will have to disappear.

But I say when you talk about priorities you need more care beds, instead of rushing into a universal denticare program where you're comparing beds for the sick versus capped teeth for the children, who may or may not need them. --(Interjection)-- Well, I pleaded with the Minister again under group homes to spread them out. I think he should search out and advertise for good homes, to take people in. Let the people of this city know and this province know the per diem rate, and maybe we'll get a few situations where that isn't becoming a money-making scheme.

I wanted to close, Mr. Chairman, on speaking about Mincome because I'm sure that the Minister knows that I'm very interested in this project. And if I thought if the Minister would tell the public the truth, if we could turn around . . .

MR. CHAIRMAN: I think the honourable member should just reconsider that last remark. You do not accuse members in this House of telling untruths.

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MR. WILSON: Mr. Chairman, I'll rephrase my statement, by saying that if the Minister could enlighten the public, which I'm sure he will, because either you are going to take the advice of all your . . . you're either going to have to advise all your social staff that they are going to be laid off in the future, because of Mincome, or you're going to have to support the basic annual income concept, or you're going to have to stop this charade, this waste of taxpayers' money. Because I don't think anyone is ever going to dismantle their empire. They're not going to. And I think that federal and provincial dollars that are going into this program - I may be wrong, but I . . . a crystal ball that this program hasn't got a chance of getting off the ground unless some nonpolitical dedicated Minister is willing to give the lay-off notices to his staff and say, we are opting for a Mincome program. Of course when this program Estimates of Education are completed.

I move, Mr. Speaker, seconded by the Honourable the Attorney-General, that Mr. Speaker do now leave the Chair and the House resolve itself into a Committee to consider of the Supply to be granted to Her Majesty.

MOTION presented and carried and the House resolved itself into a Committee of Supply with the Honourable Member for Logan in the Chair.

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MR. CHAIRMAN: The Honourable Member for Rock Lake.

MR. EINARSON: Mr. Chairman, the estimates today seem to be a see-saw affair, and I was hoping I'd be able to complete my problem, and for the third time I get back to the Minister and hope that this is the last time. --(Interjection)-- Well Mr. Chairman, I always appreciate the comments coming from my good friend the Minister of Mines and Resources, you know. At least it wasn't referring to a blackbird socialist this time.

But, Mr. Chairman, the Minister did answer my questions in regard to the Swan Lake Hospital, and the whole area involving our personal care home and hospital areas. And he made one comment, and I want to make sure that I didn't misunderstand them, but he said that the administrator was in contact with his department yesterday. I'm talking of a problem that has existed for two and half years. And I found this really strange, Mr. Chairman, that all of a sudden the administrator should now become involved and just as of yesterday. I don't know whether this is a coincidence or what. But I want to say to the Minister that in agreement in principle was given to his department over two and half years ago, and this came from the town of Miami, the Municipality of Thompson, which is part of my colleague from Pembina, also it had the support of the Mayor and the Town of Somerset. It also had the support of the Municipality of Lorne. And it also had the support of Indian Affairs Department of Ottawa which represent an Indian Reservation within that municipality. And, you know, Mr. Chairman, the Minister was trying to say to me that there was a conflict of interest between two towns in my constituency. I think, Mr. Chairman, if the government has a policy, they have responsibility. And I think that this Minister was sloughing off his responsibility by telling me this. I think that, Mr. Chairman, that I don't think I'm going to allow him to get away with making a comment like that, that I think that he has a responsibility, if he has a policy that he should abide by that policy and carry it out in the best interest of the majority of people, and particularly when he gets a concurrence, and so far as the principle is concerned of putting a personal care home being built onto the Hospital in Swan Lake.

And I just want this for the record, Mr. Chairman, whether we get any results or whether anything develops in the future or not, I don't know. I know the Minister said well, we have to take a look at the acute care beds in the Province of Manitoba when we consider adding on beds in the nature of personal care. And I can understand his point, Mr. Chairman, but the point I want to make is that assurances, as far as I was given to understand after the last election, was given to the people in that community and with kind of endorsement in principle I think that the thing has been dead from two and a half years ago up until yesterday. So I want, Mr. Chairman, to state very strongly that I'm not pleased with the way his department is operated and I know he hasn't been the Minister at all times, but he was also the Chairman of the Hospital Commission, which I think has some relevance and has some authority, and so I'm just going to leave this with the Minister, and I don't know whether he has any further comments to make or not.

MR. CHAIRMAN: The Honourable Minister of Health and Social Development.

HON. LAURENT L. DESJARDINS (Minister of Health and Social Development) (St. Boniface): Well I'll tell you, Mr. Chairman, that I hesitate to stand up after all the bouquets I've been getting as a Political Minister, and not doing my duty, and not worried about saving dollars for the people of Manitoba, and discontinuing Medicare, and so on and so forth.

I want to say to my honourable friend, the last person that spoke, that if he's saying that there was a commitment made to his area he is absolutely wrong - by no one. There is a policy of trying as much as possible, everything else being equal, to have a personal care hospital with the -- when you build personal care beds in an area to have them with the acute hospital, that is true. In fact there was no formal application for this hospital. I made three statements, I'll give you three reasons:

I said first of all that as for our guidelines that is not, definitely not one of the priorities in the area for beds. There are enough beds, compared to what we have in many areas of the province, in that area.

No. 2. At no time did these people agree that they would close some personal care beds, and there is no way that we are going to go and build personal care beds -

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(MR. DESJARDINS cont'd) . . . .did I say personal care beds, I meant acute beds - and that we're not, we're going to straighten this thing out and we want to close acute beds because we have too many acute beds, especially that many of these acute beds now have people like I've been told, so many times, that should be in personal care beds and if we're going to build a personal care hospital we want to be able to move them and close these beds that are not needed. There's no point having a hospital where the beds aren't used. There's two things.

No. 3. There has been a conflict. He tells me that it is our responsibility to go ahead no matter what the people said, and tomorrow he's going to tell me that the government is not involved, is not discussing with the public and is just pushing programs in real dictatorship. Now if there is a request, there has to be an application and a request from these people, and the request has to come from a group working together. Now if there's certain people in that district that do not want hospitals - and you're talking about a long time ago where they used to have financial responsibilities, this was changed only lately. So I say to my honourable friend that I don't blame him, I knew yesterday that I was taking a chance when I announced a program. I knew that some people like the Member for Virden and other people where there were buildings in their constituency would get up and tell me how wonderful the program was. And I knew that the MLAs for the constituency that had had no buildings, nothing going up in their constituency, would have to make a little noise. And I accept that, I accept that from the honourable member. Now if he is going to try to make capital gains at my expense, I'm going to fight back. Because it's not a question of not accepting responsibility, there's a limit to what you can do. We are spending \$135 million and we are looking at priorities. There will be 1,600 personal care beds built and there will be close to 1,000 new beds. Well that's pretty good. Show me any other provinces that are doing more right now.

And then, as I stated yesterday, I want to know a little more from the Federal Government. Will they say, fine, we will give you cost-sharing for personal care if you give us a trade-off of acute beds in an area that doesn't want to close acute beds, for instance, and then that in three years from now we will lose everything. I want a little more assurance. I would imagine this is what the members opposite me want also. You know, you can't have it both ways. You can't tell me, like your Thrifty Bob your buddy who's going to come out and tell us to save money and then you're going to tell us to build hospitals even if they're not the first priority. You know, it's very easy for everybody to say, this is fine and we're supporting you, except when it comes to my constituency because that's different. Well if we do that we'll have 57 people that'll say, except when it comes to our constituency. And that leads me to my own constituency because my honourable friend, he's very hard to follow. You know he gets some information here, he's playing with his paper, he's going in his desk and picking up things and he's talking about welfare, then hospitals and medicare, and then lottery and then relatives and so on. It's pretty damn hard to --(Interjection)-- No, no. You're easy to follow compared to this. . .I'm talking about the rooky.

My honourable friend tried to make a case here. Well of course, it's not the first time. He's going to be the great saviour here and, you know, I'm awed, I'm so pleased to be in his presence. And I will really be careful and re-read Hansard to make sure that I can do my work, because nobody on this side of the House before he came in had any constructive things to offer buy my honourable friend from Wolseley, you know. I say to my honourable friend that if he wants to read Hansard, that from the first day that I came in this House I opposed the 20 percent owners' equity especially in the city because you have people coming from all over the place. Now it wasn't something new. It was something that - I'll enlighten my honourable friend.

Now when the Conservatives were sitting here, when they brought in the Metro area the legislation was changed and the owners' equity could come from the Metro. I thought we only had one city, now he's talking about St. Boniface. Any day of the week that you want to go and see where the patients come from, I think that you will find that there's a very very small percentage of people coming from St. Boniface or coming from

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(MR. DESJARDINS cont'd) . . . .my constituency. I've been on record, as I say, from Day One proposing owners' equity because I felt that here in the city, especially in hospitals like the Health Sciences Centre and St. Boniface Hospital which are provincial hospitals and have referrals from all over the place and I felt that it wasn't fair, and eventually we worked up this and last year we removed the owners' equity. Now if my friend thinks he should take the credit for that, well, the way he's been performing in this House, he's got to find something, and if he is happy in thinking that he gets the credit, let him have the credit, that'll make him happy. I don't mind that at all.

And another thing, you know, he comes here like a real hard boiled guy. Well of course, he's telling his constituents that, he made it quite clear that he was known as Thrifty Bob, that he was going to keep on and fight the government, he's worrying about the tax money. And then again, of course I was very surprised, that must be a first in history, that this rooky came in and he had a free hand from his leader; his leader said, "Bob, you're my boy, and I'm giving you a free hand in consumer affairs, you're the critic." The way I read that, I thought he was the Minister of Consumer Affairs, but then when I re-read that he only meant the credit, the shadow cabinet. And his leader said, "Well don't listen to anybody else, you're my boy, whatever you want, I've got full confidence in you." So maybe on this side we should have another look, because the guy might have a little more, you know, all this appearance of not knowing what the hell he's talking about might be fooling us. He might be a great guy under all this. I'm saying to my honourable friend that what he was talking about, that he said no, but Bob Wilson said . . .

MR. CHAIRMAN: The Honourable Minister knows that we don't refer to members.

MR. DESJARDINS: Well, Mr. Chairman, if you remember, the honourable member had a press clipping in front of him and he said, it's right here, "Bob Wilson said over my dead body" or something like that, and I'm referring to the same Bob Wilson. So I say to my honourable friend that these hospitals serve all the population of Manitoba. I say that this was something that was legislated by the former government, and there was nothing wrong by it when they united Metro, instead of going to the municipality and so on, they allowed Metro to pick up this 20 percent. And I say to my honourable friend that Metro picked up the 20 percent, and the city picked up the 20 percent for the Health Sciences Centre; and it is true that at one time they felt, well, let's not pay it, and they refused to pay - in fact they didn't really refuse, they said come back. They said come back, because I saw some correspondence, and maybe there was some political partisan deal out there, I don't know. Of course, I guess the councillors are non-political, as my honourable friend shows that he is non-political.

Now he is talking about the cost. I'd like to give my friend some information. There's a person here from Winnipeg, and I've got the address, went out to visit a nephew in California who was having open heart surgery. And while on her visit, the bill for the operation was received by her nephew, and just for information she sent it over to us. The total bill for surgery and the hospital for 25 days was \$35,000. They paid \$9,630 for the hospital, the surgeon \$2,500, the anaesthetist \$750, the hospital, one week in another hospital, \$2,200, heart-lung machine \$3,500. So if my honourable friend figures that, you know, we haven't got a good program and we're spending too much money, well, this is fine. But I think that we have here in Canada a very good program. There's always room for improvement, there's no doubt about that. --(Interjection)-- I beg your pardon? If you live in Manitoba? Right. Well can my honourable friend tell me how much would be paid by this lady's nephew if this would have happened in Manitoba? --(Interjection)-- Right in Manitoba where we live. All right. Does my honourable friend know, has he got this information, would he know how much it would cost that person? Do you feel that a young person with a family and so on can suffer these kinds of bills. You know, you might as well take gas - if you're going to pay this kind of stuff, you're ruined for life, and your family's ruined for life.

So I say to my honourable friend, he's got some information, there's no doubt that he's got some spies around the area, and that's good. But he never completes the



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(MR. DESJARDINS cont'd) . . . .investigation. He's got a little bit, and you figure, oh God, he's getting close. And then, you know, he makes it so easy because he becomes so ridiculous after that, some of the statements that he's made. And he's got this business that he wants to make his constituency a model. He doesn't want any of these poor people in there. He doesn't want any homes or anything at all, he wants to build a wall around that. Well I've got news for you, I have nothing to say where these people go, and I'm not worried about it a darn bit, and if they go into St. Boniface or if they go next door to you, well it's too bad, I think that they have a right to live just as much as you, and there is no way I have enough priorities to start figuring, is this within the boundaries of my honourable friend's constituency, so you know he's repeating that in every speech, and he's very pleased when he's told that, what did he call them, the Marching Mothers or somebody, will be out of his constituency.

MR. CHAIRMAN: The Honourable Member for Flin Flon.

MR. THOMAS BARROW (Flin Flon): Thank you, Mr. Speaker. It's a great honour for me to speak under this portion of the Estimates, Mr. Speaker, from a miner, who is very lacking in education, to express his views I think it's terrific, and speaks a lot for our democracy. And when we hear the remarks made from that side of the House it really appals me because we have to compare, fight fair, which was expressed very well the other day.

But let me tell you what happened formerly under your government in Flin Flon, and your doctor's situation, your situation that pertains to the Social Welfare. When an employee went to the hospital it was certainly not going to be any reaction on the corporation, you could go there with silicosis or any industrial disease, never never would they admit it, this has been changed a bit.

The appointment system, it's been changed a great deal.

Compensation, let me tell you about that, where doctors would not fill out compensation reports, that's been changed with a little publicity and a little co-operation, where a man would wait three or four weeks to get a compensation cheque. Let me tell you how it was on compensation, if a worker did have a case. . .

MR. CHAIRMAN: Order please. We're not dealing with Workman's Compensation under this department, I'm sorry.

MR. BARROW: Mr. Chairman, we'll forgo that then. Well let me say this. I'll recommend this Minister . . .

A MEMBER: Right on.

MR. BARROW: Who on this side of the House could take his place? Who? Not one of you.

A MEMBER: Anyone.

MR. BARROW: This was caucused and Cabinet went to a great decision to put a man in that portfolio who had everything, integrity, charisma, forcefulness, personality, we couldn't find one so we took the Member from St. Boniface. Like I say again, who could substitute for such a man from that matley crew on that side of the House? Well I'd like to say, is welfare included in your department? The welfare situation in my area, abuse is less than one percent. And the former Minister who sits over there in his little blue suit, puts it very plain, when anyone complains about welfare abuse. He said look, if they show need, that's all, nobody starves in Canada. There was no complexity about that, and all of you who speak so fluently, like the Member from Pembina, now there's a man that expresses himself very well, I admire him very much. And he talks about welfare abuse at Green Lake, I admire him, but my God if I needed any welfare I'd go to him first, he's that type of guy. He really doesn't believe in what he's saying. The welfare abuse, certainly there is, there's always going to be abuse. Like the Minister said, there's a little bit of larceny in everyone's soul. But I think that there's more larceny in the souls over on that side than on this side.

I want to thank the Minister for what he's done in Flin Flon, both of them really, they've put a big addition to our hospital, at great expense, home care homes, they've got the doctor's reports going fluently now. And the strike situation, there's

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(MR. BARROW cont'd) . . . .an issue.

MR. CHAIRMAN: Order please. We're not on strikes now.

MR. BARROW: Pardon me, Mr. Chairman. After all, Mr. Chairman, all those doctors took the oath of "Hypocrisy."

A MEMBER: No, no, no you got the wrong words.

MR. BARROW: Well Mr. Chairman, I commend the Minister, and if anyone earns his salary on this side of the House, it is him, and if I had the power, he'd double that salary. He has a hard job, a tough job and he's doing it very well, Thank you.

MR. CHAIRMAN: The Honourable Member for Wolseley.

MR. WILSON: I'll just be a minute, Mr. Chairman. I felt that I only had twenty minutes, and I thought I would have to skip over the thing but I wanted to read into the minutes, the survey of the semi-institutional premises in the City of Winnipeg, it's dated March 3, 1976, and it's available at the City of Winnipeg, and what it points out is the massive concentration on government experiments in the downtown core and in my particular area, which we, if it was shared by the balance of the City of Winnipeg, would be more than welcome to . . . and do support, and I just wanted to read into the record regarding a situation called, "Palson, Charles Area Citizens Defeat Halfway House Bid. Councillor Joe Zuken, Labor Election Committee, sympathizes with the people but said the residents have some rights too. He said, if it's put in this area it will have and cause disturbances. Councillor Harry Lazarenko, New Democratic Party, suggested the Halfway House to be moved to northern Manitoba. Councillor William Chornopski, New Democratic Candidate, said he has to protect the residents and they don't want a halfway house." What I was suggesting merely is that group homes established as money making projects in home saturated areas, all these newspaper reports are factual, they're there. I think the Minister rather than accuse me of wanting to build a wall around my area, should examine some of my complaints.

However I wanted a crystal ball and talk about the lotteries because I felt that they shouldn't be tied in with Health, and this is one of the reasons I sat down, but I do feel . . . I had issued a press release on November 10th, in which I pleaded with the government to alter their decision because under the former program fresh new dollars were coming into the province and was increasing gross sales yearly. In 1972 there was 3.4 million; in 1973, 6.3 million; and in 1974 6.9 million. This encouraged the volunteer system; this was fresh new dollars again coming into the province. It was an industry unto itself which was a welcome relief by people of all political parties. It reduced potential government grants by allowing organizations to raise their own money. Now prepaying for the tickets and cutting commissions will discourage volunteer organizations and it's bound to reduce Manitobans benefits in the long run.

Now that was one of the things I was disturbed about, and because any particular industry that is bringing fresh new dollars into the province deserves a positive approach. However on National Television, they referred to "Manitoba's Lottery Mess." In the article, left out of the lottery, a pioneer of the Western Canada Lottery, said he was left nothing. He said that the Minister was responsible for the death of many of the fund raising organization situations in the past, and I couldn't help feel after looking at my very large file - but I don't want to take up all the time of the House, but these three particular financial annual reports are an indication that the program was healthy, now what went wrong? Well the Minister is very capable as through experience of being able to use words that he refers them off in the distance to a statue or to the air and doesn't accuse anybody. He says there was a rip-off, there was a lack of accountability, the agencies were running around, entrepreneurs are running around to agencies saying, let me use your name. And the Minister talked about closing his eyes for a great deal of time to this money, but all of this fresh money was coming into the province under that situation. Why didn't he strengthen the accountability? Instead of that, we've gone on a very expensive campaign, where we now have civil servants - no they're not civil servants, because it's autonomous from government - in fact they were complaining to me that they had lost many of the benefits they had when they were civil servants - but there they are off in the distance. There they are off in the distance, completely separate

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(MR. WILSON cont'd) . . . .from government, nothing to do with Dr. Wonderful, they are just off there, just wonderful. And I simply say that I will support anything that has a chance of making it, and I think that the Winsday Program is going to make it.

I'm not so sure about the other program, I think that because of the new setup and the cost involved, that slowly we're going to see that this thing fades into the distance. I hope I'm wrong, but I do think that things should have been left alone - the Minister says says he doesn't tamper with success - but there it was in black and white, the continuing growing program, of positive fresh dollars coming into the province, and now what's going to happen? These organizations are going to be coming to you people and asking for grants, and you will then choose them on their alleged merits, and so on and so forth.

So the only thing that I can say is that I'm very pleased that you did that, because like the Minister I also have been involved in sports all my life, and I have a lot of friends in the sporting community, and thank goodness they're free enterprisers at heart but they support Manitoba first, and when a particular government and the Minister takes a successful program and refuses to correct a few errors that were in that program, like the fact that there was no accountability - that could have been fixed up. We had the Irish Sweepstakes for years and if you didn't get a receipt you were looking around to find out if the person that sold it to you was honest or not. That's what it is, to advise the public that they demand a receipt for their ticket and we wouldn't have to be faced with all the loss in revenue that we had coming from other parts of Canada and the United States, and I'm sorry to see that the old program is gone. I wish the Manitoba Sports Federation every success, despite the Minister's interference.

MR. CHAIRMAN: Resolution 56(a)(1) - The Honourable Member for Pembina.

MR. GEORGE HENDERSON (Pembina): Thank you, Mr. Chairman, I want to comment on the words from the Member from Flin Flon. I'm not maybe all as good as he thinks I am because there's an awful lot of the programs that he tries to give me credit for, I'm not so sure I'd be so generous.

I think I'd like to comment in relation to the Manitou Hospital, and I wasn't going to do this but due to the remarks that were said when they were commenting on the Member for Rock Lake, I thought I should make known that Manitou Hospital did pass all these requirements it had the local town council pass it, it had the rural municipality, it had the district board, in connection with the care centre, and the provincial people who were out at that time said that according to the population of these requirements we should qualify. Later on they developed the care programs somewhat and they said, well, we've got to put you back into the background. But I must say that I'm sure the people of Manitou in that area are going to be very disappointed that we haven't got - at least I never heard anything mentioned, and I should have asked last night, I realize that now - they're going to be very disappointed because I know we came up to all the requirements, we said we'd raise our necessary part of the financing, we'd put it under one board and everything in it they felt that they required. We really thought that it was going to be going ahead, and nothing has been done. However, I realize the Minister does have a very difficult department. And by the way, the Member from Flin Flon was quoting about what a fine Minister we have. Well I believe he's doing a good job, but if he's the only man over there that you've got that can do that job, then you are in trouble too, because what happens if he dies, you know. I don't believe anybody's that good. I don't believe anybody's that good. --(Interjection)-- Yes, I suppose he could cross the floor. Well anyway, I don't think any group or any one party should get depending on one man, like as if he's the only person can run a department, because if that's the state you've got yourself into you're in bad shape right now.

Anyway, I just want to comment on the Manitou Hospital, stating that they came up to all the requirements and that they were shelved, and I noticed when the Minister quoted the different areas and the amount they were receiving, that Manitou wasn't mentioned. Maybe it's in the background in the years to come, but it wasn't quoted on at that time. I realize I should have asked but I wouldn't mind if the Minister would comment on that.

MR. CHAIRMAN: The Honourable Minister of Health and Social Development.

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MR. DESJARDINS: Mr. Chairman, I know that, well I hope that we will finish this department today, but I'll try to get the information for my honourable friend. I think he'll understand there is no way that I know off the top of my head all the details for every hospital. As I said, it's a question of priorities, this is the first program announced, but I'll find out the situation of Manitou Hospital for my honourable friend, if he will accept that.

MR. CHAIRMAN: The Honourable Member for Churchill.

MR. LES OSLAND (Churchill): Mr. Chairman, I wish to say a few words on the Minister's Salary here to do with the Department of Health and Social Development, and I would like to say I've kind of listened with great interest throughout the complete debate.

So often we seem to get down to the nickles and dimes and it goes on for hours of how all the dollars are being spent, and really we're not looking at the total overall picture. Now at the end of the Estimates we have a chance to do that, and I would like to say a few words on behalf of Churchill and the new health concept that we've got going up there and to reassure all members in this House of the very positive results that we are getting from the introduction of the new outreach type of medical base.

When we first talked about a hospital under the new redeveloped Churchill, we were talking about 24 beds, and then we kind of upgraded that a bit. But basically what the concept was that they were planning from Winnipeg, was rather a preventative medicine type of approach and not so much of the waiting till people got sick and then try and find a hospital bed in which to treat them. This has proved out in the long run and we've had this thing going now on a period of four years, because even under the old hospital building we started this program in effect at that time.

There is a feeling going with the staff that they're all in one battle, that they're all together in one harness and that they're all going in the same direction, which for the first time in Churchill has been a first. And I really mean that. Particularly with the Federal "Big Daddy" approach and then the Provincial Government coming in about 1970, we kind of got the feeling of long arm, long distance type of planning and development again. And now our Hospital Board has been reassured and they have got the overall picture and the overall thrust in their hands. And they have proven to be very responsible, and they are willing and able to account for the moneys that are going into that complex.

I'd like to say a few words in a positive manner supporting the Minister of Health. The Member for Flin Flon said he'd like to double his salary. Well by the size of the Estimates at \$395 million, I think he should be about tripled. And he's doing a good job. He and his previous Minister who --(Interjection)-- Two and a half times? All right, we'll go for that. I believe that the continuity of the program is ongoing and that there is certainly to me a light at the end of the alleyway. It is definitely in complete accord with the development of our local government under Municipal Affairs, the local economic development under Industry and Commerce, and Health and Social Development is following in the same line. Our School Board also is in this same thrust. And if this is any indication for what is to come for overall Manitoba, I can tell you that we are a long way down the road and it is starting to look excellent.

A MEMBER: Sounds like an election speech.

MR. OSLAND: Not yet. Two more years and then I'll give one.

I'd like to differentiate between the federal approach to Health and Welfare, which is what they call it, the Department of Health and Welfare and the Department of Health under the provincial thrust. Health and Welfare to me is absolutely - well I'll say that the health end of it I agree with, with the welfare I disagree. Under the provincial thrust we have what we call the Health and Social Development, and that leaves it on a positive approach. We will as a province take on the delivery of the health system for the people and instead of welfare we are looking more towards the social development. And this is an altogether different psychological approach to it, with which I agree.

One afternoon here last week - no, two weeks ago, the Member from Lakeside spoke quite at length philosophically on this department. And it was generally accepted on both sides of the House that the health and the welfare was something that was going

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(MR. OSLAND cont'd) . . . .to be - that welfare was going to get larger as time went on. I am sorry I didn't speak that night but I will say so now. My feelings on this is that that's garbage. That is taking a negative acceptance of the basic fact that welfare is ongoing. Welfare is only a result of the inability of this society of ours to organize itself and to take charge of itself in order to meet its needs.

MR. J. FRANK JOHNSTON (Sturgeon Creek): That's not what your leader said. Oh no.

MR. OSLAND: I'm afraid that is what our leader said. And I'll quote this right back into your teeth, my friend, that our leader also says that when the public purse can do it best, it will be done by the public purse, and when the private purse will do it best, it'll be done by the private purse. And I accept that degree of cooperation rather than confrontation which you seem to always want to be throwing at us from across this House.

So often we get this thing thrown at us, you know, the great arms of socialism. Well I have had a few little get-togethers with some of the boys from the other side and in the quiet evening when we're talking, we've all accepted one basic principle that we are in accord with. We disagree with the big government concept but also we disagree with the big corporate business concept. I absolutely back any small businessman in this province of ours. He works harder and he gets less per hour than anyone else. But there is something that goes along with it, that if you allow this corporate eating up of all our small businesses and taking it under, it's just as bad as the opposite point of view where we are going to have one Big Brother looking after us all.

I will only accept one thing to do with welfare, in my mind in the long run, and that is that we will give welfare to projects but we will never give it to people. Sooner or later we've got to cross that bridge. And when we start taking our money and investing it, I'm not saying just jobs for people per se, I'm talking about jobs that are worthwhile for all our people. So often in our health discussions here over the last two weeks with the Health Department, we have got down and we continually talk about the administration. I can tell you that I have been 25 years with the medical branch, and I served it under the Navy. And I can remember the first ship I went onto, which is the Old Ontario when we were going on a five-month cruise around South America. We had a chief that was in charge of us, and he told me and he told all our staff one thing right off to bat. He said: "Of everything else, the reason we exist is not for anything else but because there's people sick. And I can put up with anything that goes along the way as far as the sort of amenities for the staff and the kind of a coffee boat etc. he was referring to at the time, but" he said, "when it comes to the sick people within this sick bay, that is where we draw the line. You are last and the patient is first, and don't ever forget it." And I've tried to remember that right through the years.

My last year in the Navy, I was sent to North Bay, Ontario, in charge of the hospital there, and I was sent primarily to overhaul the thing I guess you'd say. Because when I went in it was basically the same hospital as it was in 1942. It was being administered the same way and nothing really had changed, you had a doctor, you had a nurse, and you had your medical assistants. Well with the years under the dry service, particularly under the Navy, we developed a para medical group and we relieved the doctor of all the administrative jobs. And when it came to suturing up minor abrasions and results of accidents, when it came to doing all the paper work as far as the administration was concerned, the doctor really was wasting his time in this effort. And when I went in at first, here were our three doctors, and for God's sake they were doing things that we'd been trained to do 10, 15 years before. So we started a process of changing it around.

At first the doctors kind of resisted because they felt that I was stepping on their toes taking away some of their - stealing their job - but in the final analysis when the chips were down and they saw where we were going, the doctors themselves were going, the doctors themselves were the biggest supporters of the plan and they got rid of all this garbage, and that they were there to treat people and to act as a physician and they were able to get to the real need of the problem. Our boys who were trained to do

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(MR. OSLAND cont'd) . . . .the suturing work in sterile fields and do all the work of a para medical, then they did their job. The nurses, they also in co-operation, did along with it.

Then I retired from the Service at the end of that year and went back up to Churchill and went into Churchill as an orderly in the hospital. And I can tell you how inefficient we are on the civilian side and that we've got to change some of the points. When I first applied for a job in the hospital I wrote a letter and just asked for some job where I could work for eight hours with no responsibility, and go home and just forget about it. Well six months after I'd been there I sat down and wrote an 18-page submission and sent it to the Minister of Health who is the Minister of Tourism now. I sent it to our Board, I went in front of the Board and I explained what I thought was wrong with the whole system. I wasn't too well received, I can tell you that right now. I took on too much too fast. But it was the beginning of the turnover to me. I had literally worked on the wards where we had patients with what is commonly diagnosed as a URI, an upper respiratory infection. And at 3:00 o'clock in the morning the patient would be plugged up, he'd be coughing, chesty, and he was feeling miserable, but the nurse could not give even a common aspirin. She couldn't institute steam inhalations, anything to give the patient any relief at that moment. And she didn't want to phone the doctor at 3:00 o'clock in the morning just to get an okay, so the patient was left lying in the bed miserable until we could get confirmation from the doctor to go ahead and change the treatment.

Well I ended up doing my own little bit. I didn't wait for the nurse or anyone else. I started going out and just doing what was common sense, that would be honest, just ordinary home nursing care that a parent would do for their child at any time. Well through it all, I think that we now under this new concept are changing this whole delivery system, and sooner or later the doctors, the physicians, will be able to be exactly that. The nurses who for a long time have asked that they be allowed to take on more responsibility but they want it backed up by some sort of authority, they will be able to do their job. And in the long run, each role within that hospital care will be a lot better for the patient, which is what we're all about in the long run.

In Churchill under this new development, the power of the local board has been enhanced. I would say that our objective in the long run, my own personal feeling about it is that we will eventually have elected hospital boards. We have not got them at this point in time, have not had them, but sooner or later we will get this change I feel because it's more democratic and in the long run I think it'll prove more practical.

Under the Health and the new Outreach Program we've got New Careers where we have got Native girls, and particularly boys and girls who have not had the education who can qualify with six, seven and eight grades and can now be put under training, and if they show interest they can develop from a Nurses Aide right up to a full-fledged nurse on the long haul - very similar to our BUNTEP Program which will be producing teachers within this system.

Somebody the other day mentioned a book that they had read called: "Small is beautiful". And I would just like to make a point that I've read some of the excerpts from this book and I really feel that there is something to be accepted here, the person really has a point to make. He is really downgrading large overall centralized development. He's trying to promote the local, the small setup, and to get a real firm base underneath all of our development. And I think this is where we're going to have to go, we should have learned by now through the years that this continual centralizing things is not proving out in the long run the answer to the problems that we're faced with.

In conclusion I'd like to say that on the overall I agree with where the government and particularly the Minister of Health is going with the Department of Health and Social Development. I certainly agree with the local control factor as I see it happening within my region. I would like to say a real vote of support of the Outreach Programs because I now see young people that never had a chance, never had a hope in hell of ever getting into what you'd call the semi-professional area. They are now taking their place within it, and the schooling is more practical than it is paper work. And this seems to agree with them and we're getting a real development process under way.

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(MR. OSLAND cont'd)

I would just like to close with those thoughts and hope that the Minister continues to have some success with the bureaucracy that he's got, because there's no doubt about it, with \$395 million this is some department, it's a huge one, and that I'm sure that if we, if he will - well, the Member from Wolseley has nipped in my estimation, I think that he could have put some real basic points to the whole program, I think, in more of a positive vein - instead of getting the Minister's back up, he might have been able to get a little more positive response and maybe there would have been a little more good. I don't agree with him, this feeling that he's got that everybody's picking on him, that everything that's bad in Winnipeg is ending up on Wolseley's doorstep. I think if he was to look at it from the overall provincial angle a little more - he's no longer on Winnipeg City Council now, you're a member at the provincial level and I think we've got to look at the overall development of our whole of the province. --(Interjection)-- And when that member over there starts making a point that the free enterprise doctors or dentists would have an answer to such places as Shamattawa, Granville Lake, Tudoule Lake, you want to come up in that area and ask a doctor to take that sort of thing on, impossible, it's got to be organized. The people of this province have got to take the responsibility of being the core, the base of development, we've got to take on that responsibility. We have left it to you for 100 years, and all you've ever done is exploited us, you never developed us, so we would like a change in the thrust. We're behind the government, what we've started in the four main centres up there in my riding, I hope and I pray that the Minister can keep on developing and I'm sure that every one with needs of my area are going to be answered in the long run, which are an awful lot of people living with no TV, no entertainment, no running water, none of the basics that you enjoy today in your riding. All we're asking for is some support, and I'm sure we're going to get it in the medical line, through this department.

MR. CHAIRMAN: The Honourable Member for Thompson.

MR. KEN DILLEN (Thompson): Thank you, Mr. Chairman. I want to join in this debate on the Minister's Salary. I'm quite intrigued by the presentation made by the Member for Wolseley, particularly in the sense that he somehow feels that through his manipulation he was able to save the City of Winnipeg money. You know, if I take two dollar bills out of my pocket and I'm a resident of the City of Winnipeg, can you tell me which one of those dollar bills goes to the city, or which one of those goes to the province? That the City of Winnipeg receives its funding from the same source as does the Province of Manitoba, it comes out of the same pockets of the same taxpayers. And how can you --(Interjection)-- well that is right, there is only one taxpayer, and whether it's saved at the provincial side or the city side, what is the difference? I just don't know, that is about the fourth time in this House that I've heard that expression used, that I saved the City of Winnipeg some money. But whether the provincial taxpayer or the city taxpayer paid the money, there is still only one taxpayer, the money was paid. And if that's all that he can take credit for, it seems such a minute thing to stand up in this House on three or four occasions and say, I saved the City of Winnipeg, I sucked the province in. What's the difference who paid the money, the money is paid, it came out of the same guy's pocket. If it was necessary and had to be done, the issue that he described with regard to the hospital, if it had to be done, what is the difference? And who pays for it? It had to be done.

And somehow he equates that with having this decision made because there was an election. That's exactly the kind of thinking that brought that government down, brought the Conservative Government down, that's the same kind of thinking that is going to keep them down. Because it's not a question of need that makes the members opposite respond, it is a question of what is politically expedient. And they spent money. They had a consulting firm spend more than a half a million dollars of taxpayers' money to find out and to point out clearly just exactly how that can be done. Anybody that has that kind of corrupt kind of thinking and attitude doesn't deserve to be government, they deserve to be exactly where they are, and that's exactly where you're going to stay with that kind of an attitude, because there isn't any thinking person in this province that will put that

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(MR. DILLEN cont'd) . . . . kind of government back into office.

MR. JAMES R. FERGUSON (Gladstone): Wait and see.

MR. DILLEN: I've been waiting since 1969.

MR. FERGUSON: One more year.

MR. DILLEN: I don't know if it was picked up by other members on this side of the House or members on that side of the House, but the Member for Wolseley made reference to the Minister, that the Minister should go out and buy some vitamin (I) pills. If the truth were known, I'll bet you that there isn't a vitamin (I) pill in this city, because the Member for Wolseley has purchased them all and used them. Because every second sentence that he says, every second sentence that he uses in this House is the great I am, I did, I will, I say, and me, 50 Bobs. It would be really interesting for people in his constituency to come down here and just listen to him for a while. He said this afternoon that he did a little thinking - you know, if they sold used brains in the same manner that they sell used cars, his brain would get the highest price because it gets very little use.

I want to describe for the benefit of members opposite, that when I first went up north, we had a kind of a system up there and everybody bragged about it, You know, the Chamber of Commerce when they were going out to their conventions would brag about the fact that there was no welfare in Thompson, when they were going to municipal meetings they would say we're very fortunate in our city that we don't have any welfare. They didn't tell anybody that they would not allow Canada Manpower to put a hiring office in Thompson. They had the hiring office at The Pas, so who was stuck with the high rates of welfare? The Pas. That when people were coming through looking for jobs in the mines in northern Manitoba, they ended up at The Pas, because that's where the medicals were given, that's where people were hired, and if a transient came to town in The Pas the local government had to pick up the costs of seeing to it that that transient who was in search of a job received meals and lodging. And if the municipality didn't pick it up, the Salvation Army did. But the people of the north could brag about the fact that there was no welfare.

In 1969, when I was fortunate enough, or unfortunate enough, to become president of the union there, during the transition between the outgoing president and my take-over I went through the entire accounts of the local union and I found that our welfare costs to that local union were somewhere in the order of \$30,000 up to that period of time in that year. So I phoned the Provincial Welfare Office and asked how much welfare they had paid out in that period of time, and it was just slightly in excess of \$1,000,00. I phoned City Welfare and I said, how much welfare have you paid out in that given period of time, and it was just in excess of \$600, while the local union had paid out more than \$29,000. So I immediately called a meeting together to find out what the case was, and not revealing my facts prior to the meeting, I asked the City Council first, why is it that you have such a horrendous amount of welfare being paid out in this town? And they said, well that's easy to explain, those are for train tickets. The solution to the welfare problem was to take somebody who had applied for welfare, give him a CN train ticket one-way to the nearest location and escort him to the train to make sure that they got there, and then they could run all over the country bragging about the fact that there was no welfare in that community. There hasn't been a significant change in the amounts of welfare paid, except that they are now accepting the responsibility that was accepted by local service clubs, accepted responsibility that was at that time accepted by churches, by the local union, and now it is put back into the area where it rightfully belongs, and that is with the local municipality and the Provincial Government.

And there has been an increase in instances where assistance for a short period of time is required, because we now have a hiring office in Thompson, the mining company. We now have a Canada Manpower Centre, and we are now just like any other city, where we have a migrant labour force in search of employment, they might be down on their luck at that time and may require a small amount of assistance until they get their first pay cheque or whatever. That has all been changed since 1968, but that was a system that existed at that time under the Conservative government. No matter



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(MR. DILLEN cont'd) . . . . how much objection we voiced at that system, it fell on deaf ears, nobody listened. I can't get over the Member for Wolseley's so-called concern for the expenditures by the Department of Health in regards to furniture, because the same thing applies in the occupation of being a bailiff. You know, the bailiffs in my constituency, when it comes to being concerned about furniture, if there is a bill and a guy gets sick and he can't meet his payments on his furniture, the bailiff comes in and seizes it and takes it away, so then the man has to find something. So in response to the activities of the bailiffs, the Department of Health has to respond by providing the necessities of life that have been seized by the same bailiff.

Mr. Chairman, the Department of Health is a huge department and this Minister has a tremendous responsibility, and I think that of all of the people that I know in the Province of Manitoba, the Department of Health and the people that it serves are being well served by this Minister.

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MR. CHAIRMAN: The Honourable Member for Fort Garry.

MR. SHERMAN: Mr. Chairman, as we move into the closing moments, or what are presumably the closing moments in consideration of this Minister's Estimates I would like to examine three subjects with him, all of which have been touched on before and none of which are related, but I think do require some further attention from the Minister and some explanation for this side of the House.

One of them has to do with lotteries, and the lottery situation, and I apologize to the Minister if he answered everything in that area late this morning. I was absent from the Chamber during the latter part of the morning, and if he answered everything satisfactorially then as I say, I will just leave my questions on the record with him and I'll examine his answers in Hansard.

But my concern is that this Minister has been preoccupied, and probably legitimately so with the question of accountability in the lottery field. He has opted very heavily for the bearer type ticket, for the kind of instrument in which he feels, or through which he feels there is full accountability where sales and records are concerned. That's all well and good, but alongside accountability in that area goes the other half of the equation, and that is the accountability for the lotteries operation by this Minister to this House and to the people of Manitoba. I know my colleague, the Member for Roblin, has expressed concern over the fact that there doesn't seem to be any method by which we in this House can get at the total story and the total picture on lotteries. --(Interjection)-- Beg your pardon?

MR. EDWARD SCHREYER (Premier) (Rossmere): I asked if you are aware of the criminal charges in Ontario?

A MEMBER: Yes we are. We talked about it this morning.

MR. SHERMAN: I am. I'm wondering Sir, whether there is a total kind of presentation from the Minister that we can look forward to, a total updating on the whole lotteries situation in Manitoba, and whether he has at any point felt it incumbent upon him to explain some of the criticisms that have been voiced, for example, by the Manitoba Sports Directorate, Mr. Guy Simonis, who has been critical in the past of the Western Canada Lottery and the performance of the lottery and the return to Manitoba, and in fact was quoted in newspaper stories some weeks ago now admittedly, but during the life of this session, to the effect that the blame for the difficulties and for the shortcomings of the Western Canada Lottery in Manitoba must belong with Manitoba politicians for decisions they have made. I wonder what politicians he's referring to, on which side of the House, and what decisions specifically Mr. Simonis is referring to, and whether the Minister agrees with Mr. Simonis that the situation is the result of incorrect decisions made by politicians on one side of the House or the other.

A second area that I wanted to pose for the Minister, and as I said, Mr. Chairman, the three areas are entirely unrelated, is in the area of the subject of child abuse, which we went into in some detail during the course of the Minister's Estimates, but there is a basic philosophical question that I didn't raise at that time and I thought was perhaps more valid under the Minister's Salary, and that is, the matter of the approach that this government is taking towards the whole subject of child abuse and child welfare, and whether or not those professions, those disciplines can be best exercised under the sort of a regional health delivery concept of a Provincial Government or by agencies already existing in the field.

I know, for example, that from personal experience that the Children's Aid Society of Winnipeg has laboured, has toiled in the field of child abuse, and the fields of attempting to cope with child abuse for many years and done so with less staff, fewer professional people than they need to meet the demand. I know that the Society, and I hold no brief for the Society I might say, Sir, I'm not connected in any way, but I know that they have made a number of presentations to the province, both to this administration and previous administrations, asking sufficient support to enable them to supply themselves with the necessary professional people to serve in this field and to meet this problem effectively. I think there is considerable concern among agencies like the Children's Aid Society that the thrust and the direction of this government in the child welfare field in particular, is to make the province the pre-eminent authority and the pre-eminent agency

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(MR. SHERMAN cont'd) . . . . in that field, and in effect to say to the Children's Aid Society, "You're no longer in the child abuse business. You're no longer in the child abuse business. We're in the child abuse business. If you see any instances of any situations of child abuse, you bring that business to us and we'll look after it." What is of concern to people in the societies and agencies of that sort is what I suggest is, an impression at any rate, that there is a centralization taking place that is not good for the people requiring the help and that is not good for the people in the field who are attempting to deliver the assistance and the help. There is great concern on their part that under this concept, which is sort of a regional health facilities concept, a centralized delivery concept, that welfare, and child welfare in particular, is going to suffer, that child welfare in particular will get the short end of the stick when it comes to the kind of attention, and to be practical the kind of funding that is required, and groups like the Children's Aid Society and other private groups would like to have the argument resolved, at least faced, that they can do this kind of job. They'd like to have it recognized that they can do this kind of job but they need proper government support to do it, they need enough money to hire sufficient professional people, and that that's what's required. What is not required in their view, and I submit until demonstrated otherwise to me I share that view; what is not required is a wider and wider involvement of government and a more centralized approach by government, and a more authoritarian approach by government in that field.

If these agencies and organizations exist and have the experience and the expertise, of course it's going to cost them money to enable them to hire the professional people they want, but it's going to cost for the government to deliver it under its philosophical terms, and why would the money not be better spent, and perhaps why in fact indeed would not less money even be required if the course to be followed were simply that of funding and supporting these agencies properly. I pose that as a question and which I'd much appreciate the Minister's response.

And thirdly, and finally, and once again an unrelated subject, Mr. Chairman, but something I have wanted to bring up during the course of these Estimates, and this is my last opportunity, is the question of nursing training and the structure of the nursing profession, and developments that might be expected in the nursing field, as a consequence of decisions made and resolutions adopted by the Manitoba Association of Registered Nurses during their recent annual meeting. The MARN proposes that the numbers and types of nurses being prepared in Manitoba be reduced, and rationalized.

At the present time there are four different types of nurses being prepared and the MARN suggests that there is considerable duplication in some areas of education, and they have suggested that the profession follow the lead of the Canadian Nurses Association recommendations that two types of practitioners only be prepared and recognized. One is the professional nurse who would be prepared in the university and the technical nurse - the professional nurse prepared in the university and the technical nurse prepared in the community college, and the other classifications like the licenced practical nurse and the registered practical nurse, which exist in the field now, be phased into that technical category as soon as possible, so that what we would wind up with would be the professional nurse prepared in the university and the technical nurse prepared in the community college. That's a recommendation from the Manitoba Association of Registered Nurses designed to rationalize educational opportunities and professional application of nurses in the field, designed to eliminate duplication and designed to conform to recommendations adopted by the Canadian Nurses Association. I'm wondering whether the Minister and his department are looking at that kind of direction for this province in the future.

MR. CHAIRMAN: The Honourable Minister of Health.

MR. DESJARDINS: Mr. Chairman, I'll try to answer the questions that have been left unanswered, and I'm sorry to see that the Member from Pembina is not here. I had someone make a phone call to the Manitoba Health Services Commission re the Manitou Hospital. It might be that I will have to look into the matter further, but it is pretty well as I suspected that it is a question of the priority, and it is felt that this is

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(MR. DESJARDINS cont'd) . . . . . not an area that is in dire need of personal care beds. They have a hospital and they had requested a 20 bed personal care hospital in Manitou, and the feeling that in this first phase - and I said before, we are announcing now this phase, that doesn't mean that that's all the construction there'll ever be, but in this next five years, this is what will be built and this is - it's a question as I say of priorities, and it doesn't qualify at this time as one of the priorities as we are looking around the province.

Now I have talked about mortar and bricks, and we're talking about buildings, but there is an ongoing discussion with the Manitou people to look at better ways to serve the people in the area, and there is an ongoing discussion as I said, re home care and day care, and so on, between - I don't know if it's the board of Manitou Hospital and the Manitoba Health Services Commission. So this is pretty well all I have to say on this subject. It is something that we will keep on discussing. Right now it is not the first priority. There will not be any building, mortars and bricks, and so on, during this term in the next five years. You know, that's not the only thing, institution is a very important thing, but it's not the only thing and there in ongoing discussion with this group to try to take advantage of all the other programs, and after all that's why we have home care, and day care, and so on, to help these.

Now, the Member from Fort Garry, he covered three points. Lotteries, he asked, if he thought that I answered satisfactorily and he'll answer that, and he apologized for not being in this morning. Well I cannot, I will not tell him that I answered satisfactorily. I can tell him that I tried to answer everything that he's covered. I answered to the best of my ability so he'll have to see if he finds it satisfactory.

There's one thing that I didn't cover. He said that the General Manager of the Western Canada Lottery Foundation had criticized the politicians here in Manitoba if it wasn't a success. All I can say, and he'll have to check with the gentleman, all I can say is that he showed me the article on the paper. He came running into my office and he told me that it was misquoted, or quoted out of context, and so on, and he assured me that this is not what he said, or meant to say, so I take his word or if my honourable friend, who knows him very well, can find out what he meant, I would have certainly no objection. But there's no way that I should comment on what somebody else means. I can only take his word that this was the case.

On the child services: Now if my honourable friend was only covering child abuse, that is one thing, but if he was covering the care of children, that's another thing. If he's looking at the overall thing of children's care, I don't think that anything that was said would indicate that the government is trying to take over and necessarily do this work. I think, as I said during the Estimates, that we've discussed this and we have a committee that is starting to discuss with the Winnipeg Children's Aid Society, which has the biggest problems and the toughest job, and so on, and I think that if there's anything, and eventually it might be that some of these agencies will be replaced, but if they're replaced it is when the people in the community and so on are ready to take it over. It is not something that the government wishes to do, if we're talking about the overall thing. There is no doubt that we have to improve, and I'll look at every way possible to improve it. This, as I stated during the Estimates is an area where the department is weak and we've got to improve; we're spending an awful lot of money, we don't know what we're getting in return, and I think we're spending too much money for what we're getting. We've got to reorganize, and that'll be an awful lot of work. This has been going on now with the Ryant Report, one of the studies that was commissioned by the department, and I hope that we could move and improve. It's going to take a while. We can't accomplish miracles but the government has never stated that they wish to take over from the agencies.

Now child abuse: Well that is something else, and it might be that my friend won't agree with me because he stated that he agrees with the agencies that they're in a better position to do it. Well they have been doing that for years and there's much - they've been doing the best they can but there's a lot of improvement

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(MR. DESJARDINS cont'd) . . . that we're looking for. Now we feel that it is a responsibility of government. They are asking for much more staff, costly staff, that we're ready to give them at this and it would be a duplication, you'd have to start that with all the agencies that are serving us in this area. Now the suggestion is this, and the government wishes to move in that direction, that the government will take that service over. It's not an ideology that the government wants to take over. I have no hangups - I've repeated that many times - I have no hangups on that at all, but we have the mechanism in place, we have social workers, we have nurses, we have the public health that are going in the seven or eight regions in Manitoba and there is not reason why we should have a duplication and allow all the staff. They want an awful lot of staff, high priced staff, to do this work and that would cover only part of Manitoba. So it is true and this might be an area - I want to be honest with my honourable friend, he disagreed with me, I disagree with him also - that we might fall flat on our face but we'll try. It is a responsibility that we must have. We must deal with doctors and so on and it's been a problem at the time in reporting all these things. So we feel that this is - it would be a lot easier for me I can assure you to say to the agencies, keep on, you do it, because, you know, we can always blame the agencies if they didn't do it. But we feel that this, we would have new staff to do something that in part can't be done with the staff that we already have, because who deals with this child abuse but social workers and public health nurses and doctors, and so on. So my honourable friend is right. He wants to know the direction the government is going, the government to take not the overall business of child care but the child abuse and have a registry and so on, right. So we might not agree, but I want to be honest with my honourable friend.

Now as far as number three, the nursing: I started taking notes, but I would be unfair if I commented at this time because I could prejudice this and I want to keep an open mind. Also, I received the report from MARN not too long ago, I think it was during the Estimates earlier, or just before, and there is a committee of staff looking at it, I want to be brief, I want to look at it myself, probably meet with them again. But also, there are people opposing that report or part of the report who have requested a chance to meet with me also and to give me their comments and I think it would be unwise and unfair to everyone, and mostly to the people of Manitoba, if I was, without having all the information in front of me and without having both sides explain what they wish, to make a comment that might prejudice the action of government. So I don't choose to comment on what we will do but I hope that my friend will be satisfied to know that we'll look at it very very seriously, and it's not the first time that some of these recommendations have been made. This is something that will have to be looked at very thoroughly, and I could assure my honourable friend that the next time if I'm asked to defend the Estimates of this department again we will have a clear cut policy in that direction.

MR. CHAIRMAN: Resolution 56(a)1--pass. The Honourable Member for Brandon West.

MR. EDWARD MCGILL (Brandon West): Mr. Chairman, just very briefly, I've been doing some arithmetic with the statement of lotteries here, and I really have been engaged in this because I was recalling the remarks of the Minister of Tourism when he was explaining some purposed changes in the tax on pari-mutuel, that kind of gambling provides for the provides for the people who put in and buy the winning tickets, a chance to get back a total of about 81.4 percent of the total money. --(Interjection)-- I beg your pardon - and I couldn't help but compare that with the lottery statement - if the Minister has it there he'll know from my remarks what I'm picking out here - that in 1975 the gross revenue from Lotteries was 6.6 million, and those people that were fortunate enough to have the lucky tickets, according to this statement got \$400,000 dollars back. So the total investment by the people who gamble on lotteries was 6.6 million, and the ones that had the winning tickets got back a total of 400,000, that works out to my calculation about 7 percent is the recovery by the winners. Now comparing with what the Minister of Tourism said about those who chose to buy tickets in pari-mutuels they get 81.4 percent of their money back. This is a rather astonishing

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(MR. MCGILL cont'd) . . . . difference in terms of the cost of administering a lottery. Now perhaps the Minister can point out to me where I'm making an error in my calculations here, but it does read here as I see it that the people put in 6.6 million and they got back 400,000; if they had put that through a pari-mutuel system they would have got back 81.6 percent of the 6.6 million.

MR. CHAIRMAN: The Honourable Minister of Health and Social Development.

MR. DESJARDINS: Mr. Chairman, I'm very thankful for the Honourable Member who made the last remarks, and I'm awfully glad that he took the trouble. I know that we're trying to finalize this department before 4:30 but I think it was well worth it because he is making exactly, and he is making exactly one of the points that I've made all along that this has been a rip-off, that we've worried about agencies because they were spending money wisely, and there were the middle man who was pushing, and so on, we forgot about these people. Now I'm not saying that 7 percent is right. I don't know about the calculation, I'm accepting that as an honest calculation, I was told that it's around the 10, 15 percent, and I don't know exactly when. I thought it was mostly . . . but this is exactly one of the things, and if we're going to just look at the revenue this is one of the reasons there will be less revenue, is that the first thing that we are going to do now is increase to 30, and it's still too low. When this thing is going it's got to be more. It's not as much - I don't think it'll ever be 81. I don't know if that is a correct calculation also. If you remember these tickets were \$2.00, 2.50, and they went up to \$3.00 but the whole 50 cents went for prizes. So that is one of the things that I've been trying to say in this House, that I had a responsibility, that it's all right that we could look at all the agencies and the political clout that they have, because they have, and this is something that has concerned many members of this House, but I felt that the first thing I owed as the Minister responsible, I had to make sure that it was a product that made sense, that there was no rip-off on the people, and I agree, I couldn't agree more, that 7 percent, if that is a correct thing, is an awful rip-off. And this is what I was talking about and saying that it was a mess when I was quoted as saying it was a mess, that was one of the things. And nobody talked about the person that was winning, that's providing that he had the second point, that's providing that his ticket was in the drum, and I was very much worried about that because I was afraid of unaccountability. The member from Fort Garry touched on that also and he is right, I'm very much worried about accountability and I felt, and I . . . in that, and I think the people that know my background know that if anybody is going to go all out for sports, it is the Member for St. Boniface. But as the responsibility that I have to clean up this lottery - and that's the right word to clean it up, because there was some abuse and so on - that I must be careful with the accountability and I say, and I repeat, that at times not only were they getting only 7 percent, if that's the correct figure, but we add up to 70 percent of the tickets that were not accounted for, and I think it's inconceivable that if all the members unanimously in this House would say, well, you know, there's nothing else that you could do, and if the government is going to be responsible you've got to make sure that there's accountability. It is fine, there is temptation, you know, to worry about these agencies who are getting this money, and have got fantastic programs, and I recognize that also. When I talked about greed I wasn't talking necessarily about individual greed but even as an organization - take for instance my Alma Mater of St. Pauls College, who needed that to keep the doors open, but are they going to sacrifice their principle, and does that mean that the ends justify the means, and are we going to say we don't want to talk about that. I don't think that's right, and I have no choice but to try to clean this up and this is what I've been trying to do, and again I thank the honourable member that helped me make my point.

MR. CHAIRMAN: The Honourable Member for Rhineland.

MR. ARNOID BROWN (Rhineland): Thank you, Mr. Chairman. We don't have very much time so we'd better be brief. We've done a rather extensive survey of the whole Department of Health and Social Development and I must say by and large that we do appreciate the Minister's comments that he has made. He has kept his cool most of the time and we do appreciate the answers that he has given us.

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(MR. DESJARDINS cont'd)

However, in going through Hansard, there was one particular item in which I was rather unhappy about, and this was in response to the questions that I asked of the Minister in regards to community clinics. We seem to be expanding this program at this particular time when other provinces - Ontario for instances tried this, they scrapped it; Saskatchewan had 23 community clinics at one time, they have three now, and I understand that they are close to scrapping at least one other one - and it makes one wonder why this province, when other communities are going out of this particular program, why we should be going into it. So I hope that the Minister is going to be able to give us some answers to this. I asked him at that time if he could give us any indication of what the cost was per care unit between a community clinic - and I named one specifically for him, I named the clinic on Broadway - and a private clinic. The reason I chose the one on Broadway was because it is the proximity of, oh I would say around \$1,000, when there are 1,000 yards of 1,000 doctors within the city and it seems to be rather ridiculous that we should have a community clinic in such close proximity to so many doctors. The Minister has not answered any of those questions and I hope that at some time he can tell us what the long-range programming is in this regard and what the reports are on the community clinics.

In addition to that, I would like the Minister to consider appointing some rural members to the Board of the Manitoba Health Services Commission. I feel that the rural area is inadequately represented. And I would just like to say that according to a study done a couple of years ago - and I don't have the study with me, I believe it was done by a Mr. Brown - it didn't show that Winnipeg utilizes Health Services 20 percent more than what they do in the rural area. I would like the Minister to take some of these things into consideration before he cuts budgets of the rural hospitals.

MR. CHAIRMAN: Resolution 56(a)1--pass. Resolution 56, resolved that there be granted to Her Majesty a sum not exceeding \$539,900 for Health and Social Development--pass. Committee rise and report. Call in the Speaker.

Mr. Speaker, your Committee of Supply has considered certain resolutions, requests me to report progress and begs leave to sit again.

IN SESSION

MR. SPEAKER: Order please. The Honourable Member for Logan.

MR. WILLIAM JENKINS (Logan): Mr. Speaker, I beg to move, seconded by the Honourable Member for Point Douglas that the report of the committee be received.

MOTION presented and carried.

MR. SPEAKER: The Honourable House Leader.

MR. GREEN: Mr. Speaker, the proceedings next week other than dealing with Capital Supply Estimates, I have dealt with as far as we are able to go - in other words we will be dealing with the Minister of Education and Colleges and Universities when he gets back, followed by Tourism in the House, the Attorney-General and Municipal Affairs outside of the House, and Capital Estimates will be brought on some time in the interim, I can't exactly say when, when the First Minister is readily available. The Committee on Economic Development is meeting Tuesday morning at 10 o'clock and I will try and have a meeting for Thursday morning as well. Other than that Mr. Speaker, I would move, seconded by the Minister of Health . . .

MR. SPEAKER: The Honourable Member for Morris.

MR. WARNER H. JORGENSON (Morris): The House Leader suggested that he would try and have a meeting on Thursday as well. Did he mean Economic Development as well on Thursday.

MR. SPEAKER: The Honourable House Leader.

MR. GREEN: Not necessarily. But there are as you know the final meeting of the Public Utilities Committee, the final meeting of Public Accounts, there are other meetings, and I will try and have them on Thursday morning. Mr. Speaker, I move, seconded by the Honourable the Minister of Health and Social Development, that the House do now adjourn.

MOTION presented and carried and the House adjourned until 2:30 Monday afternoon.