

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

*Published under the
authority of
The Honourable Myrna Driedger
Speaker*

MANITOBA LEGISLATIVE ASSEMBLY
Forty-Second Legislature

Member	Constituency	Political Affiliation
ADAMS, Danielle	Thompson	NDP
ALTOMARE, Nello	Transcona	NDP
ASAGWARA, Uzoma	Union Station	NDP
BRAR, Diljeet	Burrows	NDP
BUSHIE, Ian	Keewatinook	NDP
CLARKE, Eileen, Hon.	Agassiz	PC
COX, Cathy, Hon.	Kildonan-River East	PC
CULLEN, Cliff, Hon.	Spruce Woods	PC
DRIEDGER, Myrna, Hon.	Roblin	PC
EICHLER, Ralph, Hon.	Lakeside	PC
EWASKO, Wayne	Lac du Bonnet	PC
FIELDING, Scott, Hon.	Kirkfield Park	PC
FONTAINE, Nahanni	St. Johns	NDP
FRIESEN, Cameron, Hon.	Morden-Winkler	PC
GERRARD, Jon, Hon.	River Heights	Lib.
GOERTZEN, Kelvin, Hon.	Steinbach	PC
GORDON, Audrey	Southdale	PC
GUENTER, Josh	Borderland	PC
GUILLEMARD, Sarah	Fort Richmond	PC
HELWER, Reg	Brandon West	PC
ISLEIFSON, Len	Brandon East	PC
JOHNSON, Derek	Interlake-Gimli	PC
JOHNSTON, Scott	Assiniboia	PC
KINEW, Wab	Fort Rouge	NDP
LAGASSÉ, Bob	Dawson Trail	PC
LAGIMODIERE, Alan	Selkirk	PC
LAMONT, Dougald	St. Boniface	Lib.
LAMOUREUX, Cindy	Tyndall Park	Lib.
LATHLIN, Amanda	The Pas-Kameesak	NDP
LINDSEY, Tom	Flin Flon	NDP
MALOWAY, Jim	Elmwood	NDP
MARCELINO, Malaya	Notre Dame	NDP
MARTIN, Shannon	McPhillips	PC
MOSES, Jamie	St. Vital	NDP
MICHALESKI, Brad	Dauphin	PC
MICKLEFIELD, Andrew	Rossmere	PC
MORLEY-LECOMTE, Janice	Seine River	PC
NAYLOR, Lisa	Woleseley	NDP
NESBITT, Greg	Riding Mountain	PC
PALLISTER, Brian, Hon.	Fort Whyte	PC
PEDERSEN, Blaine, Hon.	Midland	PC
PIWNIUK, Doyle	Turtle Mountain	PC
REYES, Jon	Waverley	PC
SALA, Adrien	St. James	NDP
SANDHU, Mintu	The Maples	NDP
SCHULER, Ron, Hon.	Springfield-Ritchot	PC
SMITH, Andrew	Lagimodière	PC
SMITH, Bernadette	Point Douglas	NDP
SMOOK, Dennis	La Vérendrye	PC
SQUIRES, Rochelle, Hon.	Riel	PC
STEFANSON, Heather, Hon.	Tuxedo	PC
TEITSMA, James	Radisson	PC
WASYLIW, Mark	Fort Garry	NDP
WHARTON, Jeff, Hon.	Red River North	PC
WIEBE, Matt	Concordia	NDP
WISHART, Ian	Portage la Prairie	PC
WOWCHUK, Rick	Swan River	PC

LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, October 1, 2019

The House met at 1:30 p.m.

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

Please be seated.

ROUTINE PROCEEDINGS

Madam Speaker: Introduction of bills? Committee reports?

TABLING OF REPORTS

Hon. Kelvin Goertzen (Minister of Education and Training): Madam Speaker, I am pleased to table Manitoba Education and Training's annual report for 2018 and 2019.

Hon. Cliff Cullen (Minister of Justice and Attorney General): Madam Speaker, I am pleased to table the annual report for Manitoba Justice for the fiscal year 2018-19.

Hon. Heather Stefanson (Minister of Families): Madam Speaker, I am pleased the Department of Families 2018-2019 annual report.

Hon. Cameron Friesen (Minister of Health, Seniors and Active Living): Madam Speaker, I am pleased to table the annual report for 2018-2019 for Manitoba Health, Seniors and Active Living.

Hon. Scott Fielding (Minister of Finance): Madam Speaker, it's my pleasure to rise today in Assembly to table the employee pensions and other costs 2018-2019 annual report.

It's my pleasure rise today in Assembly to table the Manitoba Finance Annual Report 2018-19.

It's my pleasure to rise in Assembly to table the Manitoba Civil Service Commission Annual Report.

Finally, it's my pleasure to rise today in Assembly to table the Manitoba Finance Supplementary Information for Legislative Review 2019-20, department information for legislative review.

Hon. Rochelle Squires (Minister of Sustainable Development): Madam Speaker, I am pleased to table the annual report for 2018-2019 for Manitoba Sustainable Development.

Hon. Ralph Eichler (Minister of Agriculture): Madam Speaker, I am pleased to table the 2018-2019 annual report for Manitoba Agriculture.

Hon. Cathy Cox (Minister of Sport, Culture and Heritage): Madam Speaker, I am pleased to table the annual report for Sport, Culture and Heritage for the fiscal year 2018-2019.

Hon. Blaine Pedersen (Minister of Growth, Enterprise and Trade): Madam Speaker, I am pleased to table the Manitoba Growth, Enterprise and Trade 2018-19 annual report.

Hon. Eileen Clarke (Minister of Indigenous and Northern Relations): Good afternoon, Madam Speaker, I am pleased to table the 2018-2019 annual report for the Department of Indigenous and Northern Relations.

Hon. Jeff Wharton (Minister of Municipal Relations): I'm pleased to table the 2018-2019 annual report for the Department of Municipal Relations.

Hon. Ron Schuler (Minister of Infrastructure): Madam Speaker, I'm pleased to table the Department of Manitoba Infrastructure's annual report for 2018-2019. Thank you.

Madam Speaker: And I also have some reports to table.

In accordance with section 4 of the Members' Salaries, Allowances and Retirement Plans Disclosure Regulation, I'm tabling the members' annual report of amounts claimed and paid for the fiscal year ending May 17th, 2019.

I'm also pleased to table—in accordance with section 28(1) of The Auditor General Act, I'm tabling the Auditor General special report titled Understanding my Audit Opinion on Manitoba's March 31st, 2019, Summary Financial Statements, dated September, 2019.

And, finally, I'm also tabling—in accordance with section 32(1) of The Elections Act and subsection 107(1) of The Elections Financing Act, I'm tabling the Elections Manitoba 2018 Annual Report,

including the conduct of the St. Boniface by-election, dated July 17th, 2018.

MINISTERIAL STATEMENTS

Disability Employment Awareness Month

Madam Speaker: I would indicate that the required 90 minutes notice prior to routine proceedings was provided in accordance with rule 26(2).

Hon. Heather Stefanson (Minister of Families): Madam Speaker, it is my pleasure to rise in the House today to recognize October as Disability Employment Awareness Month, also known as DEAM.

Disability Employment Awareness Month is an opportunity to celebrate the contributions of Manitobans with disabilities to our economy and to our communities. It is also a chance to pay tribute to the rich network of non-profit organizations, employment agencies, educators, individuals with disabilities and their families who are committed to strengthening employment opportunities for persons with disabilities in Manitoba.

One in four Manitoba adults has a disability. Despite the advantages—despite the advances in technology that facilitate inclusive workplaces, and although half of the job-ready Canadians with disabilities have post-secondary education, almost one-third remain unemployed.

That is why on May 1st, 2019, the Manitoba government enacted the Accessibility Standard for Employment. With the assistance of free guides, policy templates, checklists and training, this new regulation under The Accessibility for Manitobans Act will guide Manitoba employers on how to provide reasonable accommodations at minimal cost.

All employers, big and small, have a May 1st, 2020 deadline to keep employees with disabilities safe during an emergency by identifying who requires what assistance and asking permission to share this information with individuals who agree to help.

Our government is working in partnership with agencies that help job seekers and business in its employment-first approach to creating an inclusive society.

We will continue to work towards the goal and unleashing the employment potential of persons with disabilities through a new advisory group that we will establish to collaborate with advocates and employers.

As part of the celebration of DEAM, we invite you to join the Manitoba government at the October 9th employABILITY EXPO, where employers will share the business case for hiring Manitobans with disabilities, including strategic investments in talent, reliability and reputation.

I would like to conclude by acknowledging the many Manitoba employers who have shown leadership in hiring individuals with disabilities.

By removing barriers to employment we all contribute to and benefit from a more inclusive and accessible Manitoba. Thank you.

Ms. Danielle Adams (Thompson): Today marks Disability Employment Awareness Month, the month proclaimed by the previous NDP government just seven years ago to raise awareness about the employment needs, barriers, contributions of people with different abilities, needs in the labour market.

All Manitobans have relations with folks who have varying degrees of accessibility needs. It's important for everyone in our province to take the time to reflect on how challenging it can be for people in our communities to find employment; compared to those who do not find themselves disabled by social or environmental barriers.

* (13:40)

In January last year the government rejected a core application funding for the Manitoba League of Persons with Disabilities in the 2018-19 fiscal year. Groups like the LMPD rely on provincial funding to assist those with accessibility needs to find employment. When they cannot expand their services to meet the demand it hurts people with accessibility needs.

It is important that organizations responsible for supporting employment initiatives are well funded and supported by the government. As the month goes on, I encourage you all to continue to promote respect and advocate for inclusion for all people in the work environment.

Thank you, Madam Speaker.

Mr. Dougald Lamont (St. Boniface): I request leave to respond to the ministerial statement.

Madam Speaker: Does the honourable member for St. Boniface have leave to respond to the ministerial statement? *[Agreed]*

Mr. Lamont: It's an honour to stand to recognize Disability Employment Awareness Month. Disability Employment Awareness Month recognizes the

contributions of individuals with disabilities within the workforce while heightening awareness of equality and diversity in our workplace.

Last year it was a joy to be part of bring your MLA to work week, where I met with a worker who worked in a local child-care facility, and her work was truly exceptional.

In Canada approximately 14 per cent of people aged 15 or older report having a disability which limits them every day, and here at home in Manitoba more than 35,000 people between the ages of 15 and 64 living with disabilities are often either unemployed or underemployed. This inevitably leads to many individuals not fulfilling their goals, oftentimes giving up on their search for meaningful work entirely.

The Department of Families Community Living disABILITY Services found that only 5 per cent of CLDS clients in Manitoba earn at least minimum wage and work at least 20 hours per week. It has been demonstrated that people with disabilities are rated as average or better on job performance and attendance. The myth that hiring employees with disabilities is bad for results in the workplace is discriminatory.

Raising awareness of the opportunity that exists within the disability community should be a government priority. Unfortunately, funding for disability support programs that promote employability has stalled and vacancy rates have risen steadily under the PC government.

We need to ensure that the Province is an active partner in developing awareness and programs supporting employment of people with disabilities and breaking down barriers.

Thank you, Madam Speaker.

MEMBERS' STATEMENTS

Conservation Officer Recognition Day

Mr. Alan Lagimodiere (Selkirk): Madam Speaker, October 1st is now officially known as Conservation Officers Recognition Day in Manitoba. Today, it is my sincere privilege to stand in the Legislature to honour the Manitoba conservation officers.

The legacy of conservation officers in our province began some 140 years ago. From the onset, conservation officers, game guardians, natural resource officers have dedicated themselves to conservation law enforcement and management in Manitoba.

Today's officers are an elite, highly trained group of men and women. Often working alone, they are prepared to tackle a diverse work environment. Whether on our communities, our forests, our fields, our provincial parks or on our waters, conservation officers dedicate themselves to the protection of our natural resources for us and future generations to enjoy.

The Conservation Officers Recognition Day affirms the uniqueness of the conservation officer profession and the commitment to their vocation. Since 1999 conservation officers have been the third largest Manitoba law enforcement agency—after the RCMP, Winnipeg Police Service—to carry sidearms as part of their duty uniform. Conservation officers protect the fish, wildlife and forests that make Manitoba unique. They often serve as first responders in communities and work closely with local, provincial and federal agencies.

Manitoba is a stronger, safer province thanks to our conservation officers. I want to give a big thank you to all my caucus colleagues for getting this bill before the House and supporting its passing.

And I ask members of the Legislative Assembly and all Manitobans to please join me in recognizing and thanking all officers out on the Manitoba landscape today, their retired colleagues who blazed the trails and their colleagues who are no longer with us, for their service and for dedicating your lives to conservation law enforcement.

North End Women's Centre Anniversary

Ms. Nahanni Fontaine (St. Johns): A week and a half ago the members for Point Douglas (Mrs. Smith), Union Station (MLA Asagwara) and myself had the absolute pleasure of attending the North End Women's Centre AGM celebrating 35 years of community service. It was a celebration of excellence in community social development, women-centred leadership and expertise; all informed by compassion, understanding, equity and love.

NEWC has a variety of services and programming including addictions and recovery, children's programs, drop-in, health and wellness. NEWC established Up Shoppe as a social enterprise endeavour offering new and gently used items at low cost while building women's employment skills and financially contributing to programming.

The range of NEWC programming and activities is beyond impressive, but is also a testament to the

commitment, dedication and determination of staff, the board and volunteers.

Executive Director Cynthia Drebot is not only an example of excellence in management, but also as a Manitoban who creates community family while demanding social justice on behalf of some of the most marginalized, but resilient, members of our communities.

We were honoured to hear from Kaylee, who shared her journey of trauma, healing and reclamation. Kaylee's story illustrates that when there are organizations like the North End Women's Centre, women get services that are literally life-changing, offering an opportunity for a new, healthy life path.

Effecting change and healing and empowerment in the lives of women requires that people show up. This is the transformative work of NEWC.

Miigwech to everyone on the board, the staff and to Cynthia. I ask my—members joining me today to honour these amazing women.

Madam Speaker: Members—further members' statements?

Inez Stevenson

Mr. Jamie Moses (St. Vital): Madam Speaker, I stand before you and my fellow MLAs today to recognize Inez Stevenson. In the 2016 Year of Women Trustees proclamation, she was recognized as the first Afro-Caribbean person elected to serve as school board trustee and hold political office in Manitoba.

Inez Stevenson was born in Montreal in 1929, and she was known as a friendly, selfless and respectable person. As a young adult, she was highly involved in various community organizations, including the Brownies. Later in life, she was—avidly became part of organizations such as Daughter of Elks, Canadian Order of Foresters, Cari-Cana organization.

Mrs. Stevenson strived earnestly to make the school system better for younger generations. She advocated for social justice, equality for all children. She was elected as a school board trustee in 1974. As a vice-chair of Winnipeg School Board, she worked hard towards implementing various school supports within that school division.

She was—promoted also the sanction of multiculturalism as an official policy in the province of Manitoba.

In tribute to Mrs. Stevenson, Harold Marshall said: In trustee Inez Stevenson, the Winnipeg School Division No. 1 and this community had a person whose devotion and dedication to the improvement of her condition was unquestioned.

I stand here today as one of the first three black members elected to this Assembly. I recognize Mrs. Stevenson's contributions as a pioneer in our community, and an example of how leaders can make a positive impact in service to public.

Thank you, Madam Speaker.

Madam Speaker: The honourable member for St. Boniface—oh, pardon me.

The honourable member for St. Vital.

Mr. Moses: May I ask for leave to include the names of her family who are here today as guests in Hansard?

Madam Speaker: Is there leave to include those names in Hansard? [*Agreed*]

Family of Inez Stevenson: Bruce Stevenson, Darryl Stevenson, Gary Stevenson, Jim Stevenson and Sandy Stevenson

French Language in Manitoba

Mr. Dougald Lamont (St. Boniface): Je veux d'abord remercier tout le monde à Saint-Boniface pour leur appui dans l'élection. C'est une communauté exceptionnelle, non seulement le quartier français à Winnipeg, parce qu'il y a des francophones tout partout au Manitoba.

Cette année, on célèbre le 50^e anniversaire de loi des langues officielles au Canada. C'est important d'être reconnaissant de notre histoire au Canada et aussi au Manitoba.

Le Canada et le Manitoba ont été fondés avec le but de respecter la diversité, de protéger et de promouvoir une culture qui est en danger. On voit et on entend l'histoire de français au Manitoba : les noms des endroits, comme les villes et les rues, et les noms des familles.

Il fallait lutter pour gagner les droits, surtout ici au l'ouest du Canada. Au Manitoba, le français a été supprimé pour les décennies. Comme un jardin, la diversité et la différence sont quelque chose qu'il faut favoriser, protéger et cultiver, parce qu'ils ont une valeur. Les droits humains ne sont pas une luxe.

Il va falloir renouveler notre lutte pour la langue française au Manitoba et à travers le Canada pour les

services en français, en éducation, en santé, et en entreprise.

Merci.

* (13:50)

Translation

I would first like to thank everyone in St. Boniface for their support during this election. It is an exceptional community, and not only the French quarter in Winnipeg, because there are francophones everywhere in Manitoba.

This year we celebrate the 50th anniversary of the Official Languages Act in Canada. It is important to appreciate our history in Canada and in Manitoba as well.

Both Canada and Manitoba were founded with the goal of respecting diversity, of protecting and promoting a culture that is in danger. We see and we hear the history of the French language in Manitoba: in the names of cities and streets, and in family names.

People had to fight to gain rights, especially here in western Canada. In Manitoba, French was suppressed for decades. Like a garden, diversity and difference are things we have to foster, protect and cultivate because they are valuable. Human rights are not a luxury.

We will have to keep fighting for the French language in Manitoba and throughout Canada, for French services in education, in health and in business.

Thank you.

Turtle Mountain Constituency

Mr. Doyle Piwniuk (Turtle Mountain): Madam Speaker, as I did in the close of last session, once again I wanted to rise to acknowledge my constituency.

I rise in the Chamber today as the representative of the newly formed constituency of Turtle Mountain. From the result of the 2018 boundary commission, the southern half of the former Arthur-Virden constituency combined with the southern regions of Spruce Woods and Midland constituencies were combined along the US-Canada border to form Turtle Mountain. From the eastern boundary of the constituency to the Manitoba-Saskatchewan border to the west, the constituency stretches nearly 300 kilometres. Turtle Mountain straddles two trading regions of the Westman and south-central Manitoba.

In my opinion, I have to say that Turtle Mountain is one of the most scenic constituencies in Manitoba with the rolling hills of the Turtle Mountains, western prairies, the beautiful Pembina Valley, the Cypress Hills and the Notre Dame escarpment.

Agriculture and oil and gas, manufacturing, wind power and tourism are the most—are the main economic drivers of the region which generates a significant revenue for the province's economy.

There are many lakes throughout the constituency which provide a source of recreation for many to enjoy. One of our hidden jewels is the International Peace Gardens. Situated in the middle of the—Turtle Mountain, over the past 85 years the gardens have brought tens of thousands of visitors to the region each year.

However, despite the beauty of the constituencies, the best part of the—is the people who call Turtle Mountain home. I was so delighted to meet so many new constituents, also, reconnect with many of my existing constituents both during the election and after the election.

The 'constituety' of Turtle Mountain are among the most—has the most genuine people who you will ever meet in Manitoba. I would like to thank the good people of the—Turtle Mountain for putting their trust in me during this recent provincial election. I am looking so forward to represent the constituency of Turtle Mountain in this Manitoba Legislature.

Thank you, Madam Speaker.

Introduction of Guests

Madam Speaker: 'Prial' to—prior to oral questions, we have some very special guests that I would like to introduce to all of you.

I am pleased to introduce to the House the 10 students who have been selected to serve as pages for this session, and I particularly also want to welcome their families and guests that have joined them here today.

I would ask members to hold their applause until I have completed the introductions.

Beginning at my extreme right—I didn't think that was working. Beginning at my extreme right, this year's pages are: Michayla Carlson, Westwood Collegiate; Chinemerem Chigbo, Miles Macdonell Collegiate; Meghan Fustey, St. Mary's Academy; Annlise Guillemard, Fort Richmond Collegiate; Chris Japit, Grant Park High School; Hayley Johnson,

River East Collegiate; Jazzy Narozniak, Fort Richmond Collegiate; Amelia Otvari, St. Boniface Diocesan High School; Victoria Romero, St. Maurice School; and Anna Volotovska, Seven Oaks Met School.

On behalf of all of us, we welcome all of you to the Manitoba Legislature.

ORAL QUESTIONS

Global Climate Strike Government Attendance

Mr. Wab Kinew (Leader of the Official Opposition): Madam Speaker, congratulations on your re-election.

Manitobans are seeing the impacts of climate change today. Whether it's wildfires ravaging our communities, whether it's ag producers seeing both drought and flood conditions within the same year, or whether it's kids in our communities who are suffering from asthma when smoke blankets the skies, the impacts of climate change are here now.

Just this past Friday more than 10,000 young people gathered at the foot—the feet of our Manitoba Legislature to protest and to demand action on solving the great issue of our time: climate crisis. We were there. We stood with them to demonstrate our solidarity.

However, the Premier and his Cabinet were conspicuously absent. Perhaps they didn't get an event invite.

I'd like to know, however, Madam Speaker, why wasn't the Premier and his Minister for Sustainable Development on the steps of the Legislature with the young people from across our province?

Hon. Brian Pallister (Premier): I would like to welcome all the new members as well as the pages and, also, if I could, Madam Speaker, add to my colleagues comments in respect of congratulating you on your re-election as Speaker.

Perhaps because, Madam Speaker, we were working so diligently as a government on the issue of climate change, because we are taking action where the previous government failed to and because we were engaging in real change to engage a made-in-Manitoba climate change strategy which will work so that Manitoba can continue to do its part and more than its part in the battle against climate change.

Madam Speaker: The honourable Leader of the Official Opposition, on a supplementary question.

Action on Climate Change Request for Government Plan

Mr. Wab Kinew (Leader of the Official Opposition): Madam Speaker, young people from across the province came here because they want this government to take real action on climate change.

That action has been absent from the Premier's first term in government, and based on what we saw in the Throne Speech yesterday it will be absent from this term in government at all. They didn't include the words climate change or even a mention to the environment on the Throne Speech that they brought here yesterday.

In terms of new initiatives, the Premier's only idea on this topic seems to be to launch a lawsuit against the federal government, yet I have not met a single Manitoban who thinks that a lawsuit is going to help do anything to fight climate change.

What we need is real action now that brings jobs to communities to help us solve the climate crisis.

Will the Premier reverse course, abandon the lawsuit against the federal government and instead bring forward real concrete action that young people across Manitobans can believe in to help solve the climate crisis?

Hon. Brian Pallister (Premier): The member seems confused, Madam Speaker, as is the federal Liberal government in respect of addressing climate change. He seems to think that a carbon tax is the answer when we don't believe so, nor do Manitobans.

They want us to address the real issues of climate change in a real way and that is exactly what we've been doing, what we will continue to do, Madam Speaker, as we erase the blemished NDP record of inaction against environmental challenges and replace it with a record of acting.

Madam Speaker: The honourable Leader of the Official Opposition, on a final supplementary.

Mr. Kinew: Well, the problem with the Premier's statement is that under his leadership CO₂ emissions have risen in Manitoba by more than 5 per cent.

The only idea that he seems to have is to bring forward a lawsuit against the federal government, Madam Speaker, and, again, I have yet to meet a Manitoban who thinks that this lawsuit is going to

accomplish anything in terms of helping us solve the climate crisis.

The young people on the steps of the Legislature had some good ideas. They want an intersectional approach to climate justice. Translated, what that means is they want a solution to the climate crisis that brings everybody in our province along.

Whether you live in the suburbs, whether you live in the North or whether you live in downtown Winnipeg, these young people are asking for everybody to be brought forward with good jobs and an economy that reduces climate emissions.

Will the Premier stand in his place today and commit to abandoning the frivolous notion of a lawsuit and instead to reducing CO₂ emissions in line with science-based targets?

Mr. Pallister: As I referenced earlier for my honourable colleague, the Auditor General has reported that the previous NDP government in 17 years failed to meet each and every greenhouse gas reduction target over a 17-year period.

* (14:00)

We're replacing that record of embarrassing inaction, Madam Speaker, with policies that will work to assist Manitoba in doing more than its part in respect of addressing climate change: reforming recyclable waste regulatory frameworks; developing provincial water management strategies; reversing damage done to Lake Winnipeg; renewing our provincial park strategies; a provincial trail network; a stronger green retrofit program; reducing transportation emissions; the new enviro team program; better stewardship for fish and wildlife.

Madam Speaker, the NDP just let a policy go on for years where people went out with spotlights and shot innocent animals, endangering the animals and the people in the area as well. The NDP has an embarrassing record of inaction.

We have developed a record of action and we will continue to pursue that as we make sure that Manitoba's a cleaner and better place for those who come after us.

Madam Speaker: The honourable Leader of the Official Opposition, on a new question.

Health-Care Reform Wait Times and Staffing

Mr. Wab Kinew (Leader of the Official Opposition): Madam Speaker, what the Premier has

developed is a reputation for cutting health care, and now we know the impact on emergency rooms in Winnipeg is that emergency room wait times—*[interjection]*

Madam Speaker: Order.

Mr. Kinew: —have increased. They've gone up month over month and also year over year.

The particular situation at St. Boniface ER is definitely acute. There we see that the ER wait times have gone up by more than 25 per cent, and now we know part of the reason why. The Minister of Health has revealed that the vacancy rate in the St. Boniface emergency room is 26 per cent.

So we know that wait times are getting worse because this government cannot staff emergency rooms in Winnipeg or across the province.

Will the Premier simply reverse course and stop the cuts to health care?

Hon. Brian Pallister (Premier): Well, Madam Speaker, there you go again. The member ran on a policy of fear and going backward and he got soundly defeated on that very campaign.

We're going to move forward to make Manitoba's health care better and available sooner for Manitobans, and the fact is the member likes to go after one month's stats, but he doesn't pay attention to the long-term progress that's been made. In fact, just compared to the wait times that existed when the NDP was in power after 17 years of having a chance to address these issues and not seizing that opportunity, we've seen improvements across the board in the city of Winnipeg on emergency waits.

Just one example would be St. Boniface Hospital: a 29 per cent improvement in terms of reducing wait times, Madam Speaker, and more to come.

Madam Speaker: The honourable Leader of the Official Opposition, on a supplementary question.

Mr. Kinew: That's simply incorrect, Madam Speaker. Wait times are up at St. Boniface emergency room by 25 per cent.

Here's a tidbit that is particularly galling about the situation at St. Boniface: this government spent tens of millions of dollars to build a new ER at St. Boniface Hospital, and yet what is the status of that emergency room today, Madam Speaker? It sits empty. There are beds upon beds that are sitting empty right now because this government is not able to staff our health-care system properly.

The 26 per cent vacancy rate at the St. Boniface emergency room is manifested in many ways: in the vacant emergency room that cannot be used by staff there; in the increasing wait times, but perhaps most acutely by the declining quality of patient care for patients across our province.

The Premier needs to face facts that this health-care experiment he is conducting has failed, and will he commit today to stopping his cuts to health care?

Mr. Pallister: It's a new session, but it's the same old material. It's NDP redux, Madam Speaker.

The fact of the matter is wait times have improved more in Manitoba than in nine other provinces across Canada. Madam Speaker, \$414 million more this year alone in health-care investments than the NDP ever made, and a \$2-billion health-care guarantee to Manitobans that we'll be continuing to increase investments in health care. But not just so we can say we've invested more, so we can get better results, better outcomes for the patients of this province. That's the goal.

That's what other provinces had the courage to address when the NDP sat back and was afraid and did nothing.

We're not afraid, Madam Speaker, and we're certainly doing everything we can to improve health care for Manitobans. Because our patients in this province deserve the best possible health care, and sooner.

Madam Speaker: The honourable Leader of the Official Opposition, on a final supplementary.

Mr. Kinew: The only guarantee with this Premier is that there will be more health-care cuts to come, Madam Speaker.

I'll table the documents—*[interjection]*

Madam Speaker: Order.

Mr. Kinew: I'll table the documents, Madam Speaker. I do not take any pleasure in seeing the Premier read false information into the record. So there are the stats on the increasing wait times. There are the stats on the empty positions at emergency rooms. Perhaps he can share them with his staff and they can update his talking points.

In the meantime, on this side of the House we'll be standing up for patients. We'll be standing up for health care and we'll be standing up against the cuts, Madam Speaker.

When it comes to the empty emergency room that cannot be staffed at St. Boniface Hospital, when it comes to the fact that one in four positions at that hospital are vacant, when it comes to the shortage of more than 1,300 empty jobs across the health region, we know that this is all evidence that the Premier's plan is failing.

The simple question is: Will he now commit to stopping the cuts to health care?

Mr. Pallister: Stop, go back, says the member opposite. Stop, go back. Go back to what, Madam Speaker? The worst wait times in Canada and getting further behind ninth. And the member says stop, go back. Stop, go back. Rhetoric and fear won't reform health care, won't make it better for Manitobans, nor will \$2 for parking at St. Boniface Hospital.

The fact of the matter is significant and strategic investments must be made. This government is committed to making them. We are committed to getting better care sooner for the people of Manitoba.

Health-Care System Provincial Funding

MLA Uzoma Asagwara (Union Station): Madam Speaker, the Minister for Health isn't providing the necessary resources to support our health-care system. He's not helping to sustain the nurses and front-line service workers who are keeping our system moving and serving Manitoba families.

The Pallister government underspent its own budget for health care by \$215 million last year with funding levels that fell well before—below, rather, the rate of inflation. It's not keeping up with the growing population.

Why has the Pallister government taken hundreds of millions of dollars away from where it's needed: in our health-care system?

Hon. Cameron Friesen (Minister of Health, Seniors and Active Living): I welcome the member for Union Station to their new role in the Manitoba Legislature.

The question is sadly repetitive of the same tactics of the NDP in the past.

It was the NDP that warned of an orange wave coming to the northeast part of Winnipeg. We are very proud to welcome and welcome back to this Chamber the members for Kildonan-River East (Mrs. Cox), Rossmere (Mr. Micklefield), Radisson (Mr. Teitsma),

McPhillips (Mr. Martin). Manitobans know that we're investing in health care.

Madam Speaker: The honourable member for Union Station, on a supplementary question.

MLA Asagwara: Madam Speaker, the minister told me just yesterday in Estimates that vacancy rates at emergency departments in Winnipeg have ballooned in the past year. The Grace emergency room vacancy rates are up to 16.4 per cent. As mentioned, St. Boniface are now at 26 per cent. That's one out of every four positions are vacant.

The minister has said he can remove hundreds of millions dollars from the budget in health care without hurting our health-care system. That's not true. Nurses are saying it's not true. Health-care aides are saying it's not true. Manitoban families are saying it's not true.

An overworked health-care system is not a system we can rely on to provide the best care for Manitoba families. It's not sustainable.

Why did the minister underspend health care by \$215 million last year?

Mr. Friesen: Madam Speaker, what is true is that this government three years ago inherited a tremendous mess from the NDP after 17 years of disarray in the health-care system. What is true is that we have spent this time to undertake significant changes that will strengthen our health-care system. What is true is that now we can stabilize that system and focus on things like nurse recruitment in order to fill those vacancies, and what is true is that the spending on health care is up \$100 million more than just last year and over \$350 million over the time of the NDP's last year of office.

Madam Speaker: The honourable member for Union Station, on a final supplementary.

*(14:10)

MLA Asagwara: Madam Speaker, as nurses continue to work mandated overtime, the minister and the Pallister government could have made different choices.

They could have slowed their rushed plans for consolidation, and they didn't. They could have waited until the resources were in place before they went ahead with their plans, and they didn't and they haven't. Instead they drove vacancy rates at emergency rooms to higher levels. They're rolling the dice on the severity of what the upcoming flu

season will look like and they're taking chances on everybody's health care.

Why did the minister underspend the Health budget by \$215 million when those funds could have helped address the significant vacancies in our emergency room departments?

Mr. Friesen: Madam Speaker, last week's recent changes and the—and this—stabilization changes at Seven Oaks mark the end of a dramatic transformation of the WRHA health-care system.

In opposition to that, the biggest idea out of the NDP in the last provincial campaign was a scheme on parking that the Leader of the Opposition said you could actually trick the system on.

We have introduced significant changes to get better health care sooner for all Manitobans. We are investing more in the system, but we care more about the better results which we are also getting.

Methamphetamine Addiction Crisis Request for Government Plan

Mrs. Bernadette Smith (Point Douglas): Under this government's inaction the problem with meth in this province has become full blown. Manitoba's families are losing loved ones. Families are crying out for support, police are asking for support, the mayor has even asked this government's support, and what has this government done? Nothing to address the meth crisis here in Manitoba.

Manitobans are losing their life, and what is this government's plan? Well, they gave their Premier (Mr. Pallister)—mandate—100-day mandate that didn't even include addressing the meth crisis here in Manitoba.

So could the minister please explain why not taking action on the meth crisis in Manitoba in the first 100 days is not something that they're willing to do?

Hon. Cameron Friesen (Minister of Health, Seniors and Active Living): Madam Speaker, I was pleased to have the opportunity for hours yesterday in the Committee of Supply to share with that member and with all the members of this House the very significant, the very robust, the whole-of-government approach that our government announced in August and is implementing now through our safer streets, safer life action plan, which includes whole new dynamics in mental health and addictions like an acute medical sobering unit, like the expansion of our RAAM clinic model, like the expansion of flexible withdrawal management.

That member says nothing. She must be pointing to the NDP plan, which is no plan, is nothing.

We are offering more 'capass' in the system. We're proud to do it.

Madam Speaker: The honourable member for Point Douglas, on a supplementary question.

Mrs. Smith: Well, that's hard to believe. It's hard to believe that since seven of the new mandates provided to the minister by our Premier (Mr. Pallister), not one of them appeared to mention tackling the meth crisis here in Manitoba.

Families deserve the support that they need to help their loved ones who are struggling with meth. Communities deserve to be safe. We've had deaths in this province, under this government, at the hands of people who are dealing with meth, and this government has done nothing.

So will the minister just admit today that the meth crisis here in Manitoba is not a priority of his government?

Mr. Friesen: Madam Speaker, again, Manitobans must compare and contrast: on one hand, the NDP, who had no new ideas after years in opposition to actually respond to the increase in mental health and addictions; and on the other hand, a PC party that has made very good investments, tripling the number of beds for women at AFM, adding the beds in the system at the Behavioural Health Foundation, introducing the RAAM model, talking now about redoubling those efforts and moving very quickly to provide a capacity that for years and years did not exist under the NDP.

We're making good investments in mental health and addictions. Just stay tuned.

Madam Speaker: The honourable member for Point Douglas, on a final supplementary.

Mrs. Smith: Well, Madam Speaker, as—Manitobans have been staying tuned for the last three years while this government has done nothing to address the meth crisis that has only got bigger in this province.

What have they done in the last 100 days in their plan? Zero. Nothing. Zilch.

Yesterday in Estimates the Premier said that our leader had some good ideas to tackle the meth crisis, so maybe he can speak to his minister and maybe they can take a look at what our leader's plan had in terms of addressing the meth crisis in Manitoba.

So I'll ask the minister again: Will the minister admit that he has failed to address the meth crisis here in Manitoba and tell us what he's prepared to do to address it?

Mr. Friesen: Well, Madam Speaker, on June the 10th—maybe that member remembers when our government announced at that time \$2.7 million to expand the Rapid Access to Addictions Medicine model. Maybe the member remembers from the same day an additional investment to add 16 treatment beds for women in the province of Manitoba, or maybe she remembers from that day a half a million dollars to expand our Strongest Families Institute approach to make addictions services available to youth across the province—500 families—and those are only some of the ideas that we're bringing into practice to help all of Manitoba.

She may not understand it, she may not listen to it, but Manitobans are seeing the difference that our investments are making in mental health and addictions.

Northern Manitoba Health Care Obstetric Services in Flin Flon

Ms. Malaya Marcelino (Notre Dame): It has been almost a year since this government suspended obstetric services in Flin Flon. This forces expectant mothers to travel further and leave their communities to access the care that they need. The NRHA's recently released annual report cites gaps and service delivery challenges for the suspension of services. Government documents have noted that this was not a challenge until January 2018.

What has the minister done to fix the gaps in service delivery challenges to restore birth delivery services in Flin Flon?

Hon. Cameron Friesen (Minister of Health, Seniors and Active Living): I welcome the member to the Chamber and as she takes her seat here and asks that question, I would want to, first of all, correct the record. She is wrong.

The issues that pertain to Flin Flon and the sustaining of the obstetrics program there were, actually, for years and years a challenge according to the northern health authority. For years it has been a challenge to get anesthesiologists there. For years it has been a challenge to get that obstetrician specialty into that community, and what we can say is that the decision to temporarily suspend those services was one that was clinically made and not clinically made.

Is she suggesting anything to the contrary? She should go on the record and say that she would like to overrule the opinion of the health experts who are making those decisions.

Madam Speaker: The honourable member for Notre Dame, on a supplementary question.

Ms. Marcelino: Hundreds of mothers in Flin Flon, surrounding towns and First Nations relied on Flin Flon obstetrics to deliver their babies safely, close to home. The northern regional health authority's recently released annual report outlines that the NRHA is awaiting government directive on whether to return obstetric services.

Will the minister commit to reopening Flin Flon's obstetrics unit today to ensure expectant mothers can access the care that they need?

Mr. Friesen: Madam Speaker, Manitobans remember when the former NDP government closed 25 obstetric units across this province. Manitobans remember when the NDP government closed 17 emergency departments across this province and Manitobans know that this is the first government and the only government in Manitoba that has taken on the challenge of building a provincial clinical and preventative services plan.

So as we co-ordinate our health-care system to get better results for all Manitobans, those decisions about where and how to offer services will be made in order to create a better system with more access than was ever the case in the past.

Madam Speaker: The honourable member for Notre Dame, on a final supplementary.

Ms. Marcelino: Coupled with the closure of Flin Flon's obstetric unit, expectant mothers cannot access C-sections in Thompson because of the closure of Thompson operating rooms.

* (14:20)

Kassandra McKay was recently left scrambling to figure out a solution for finding child care for her two children, beginning her maternity leave early and taking a financial hit in order to travel to Winnipeg for her C-section. This was an unplanned trip that kept her away from her children and community for two to three weeks.

The minister is failing to provide northern expectant mothers with the access to services that they need.

Will the minister please inform us when Thompson operating rooms will reopen? Will the minister restore obstetric services in Flin Flon?

Mr. Friesen: Madam Speaker, surely the member is not suggesting that obstetric services be delivered in a room that is under construction. In all of these decisions patient safety comes first. We will never apologize for that.

But when it comes to making good investments in the North, I thank the member for the question about Flin Flon. It was only a few weeks ago that the Premier (Mr. Pallister), myself and others were present to officially open a \$27-million brand new state-of-the-art emergency department in Flin Flon that will be there for years and years serving the needs of that community and the region. Just another of the excellent examples of the investments we are making to get better health care sooner for all Manitobans.

Education System Provincial Funding

Mr. Nello Altomare (Transcona): For the first time in decades education funding was cut on a year over year basis—that's on page 42 of the first volume of Public Accounts—and once again, the minister is underfunding his budget commitments to our schools by millions of dollars.

As the minister well knows, Manitoba's student population is growing. There are thousands more students in our classrooms, more than when the Pallister government took office.

Why has he cut Education and why is he not providing the necessary resources for our schools?

Hon. Kelvin Goertzen (Minister of Education and Training): I welcome the member to the Chamber and to his new role.

Of course, I was fond of the former member for Transcona as well. Former member for Transcona had a tradition of the night before Christmas soliloquy in the Legislature, and I would now leave that to this member to take on that tradition.

We are, in fact, building 20 new schools. That was announced during the election campaign. That is a record investment when it comes to new schools in Manitoba, Madam Speaker. We have already announced that one of those schools would be a DFSM school in Transcona. The member should be happy about that and I hope he doesn't vote against it when he has the opportunity.

Madam Speaker: The honourable member for Transcona, on a supplementary question.

Mr. Altomare: I'll refer the minister again to page 42 of the first volume of Public Accounts. Education was cut last year, and a deep concern to us is the minister's only getting warmed up.

We know that the Pallister government has used reviews and reorganization to mask what is really going on: cuts, underfunding to essential social services.

And again, I'll ask the minister: Why did he cut Education last year and why is he underfunding our schools?

Mr. Goertzen: Well, the member had one thing right, was this government is only getting warmed up when it comes to building new schools, Madam Speaker.

Of course, we had seven that were announced previous to the election in the Winkler, in Niverville, in Brandon, in Templeton, Jefferson. Waverley West has two on the way, Madam Speaker, and now there's a-13 additional that are coming. Twenty new schools, that's a record investment here in the province of Manitoba.

For too long under the NDP—and this member will know because he was in the education system—there were students who were in inappropriate places, inappropriate places when it comes to learning.

I hope he'll join with us in celebrating a record investment in schools, and I hope he'll actually show that he supports that by voting for those schools, Madam Speaker.

Madam Speaker: The honourable member for Transcona, on a final supplementary.

Mr. Altomare: The minister chose to cut Education last year, chose to underfund his support to our schools as well. Those were choices he didn't have to make, but he did and in doing so the minister is showing his priorities.

When it came to decide between inclusion support for students or his bottom line, the minister chose the bottom line, cutting important curriculum supports to students and teachers across the province. It doesn't have to be this way. The minister can make different choices.

Will he stop cutting Education and will he meet the needs of the growing student population in our province?

Mr. Goertzen: I will give the member credit, the new member. He did again have one thing right. It doesn't have to be this way. It doesn't have to be the way that our students are last when it comes to science when they're compared to every other province in Canada.

It doesn't have to be that our students are last in math compared to every other province in Canada. It doesn't have to be that our students are last when it comes to literacy compared to every other province in Canada.

Our students are great students. They can achieve. They want to achieve. They should be able to achieve through the highest potential. But it hasn't happened under the system of education that we have now.

There is change coming to the system. It'll be positive change. It'll be change that ensures that our students can be all that they can be when they come through the K-to-12 system.

I hope that member will embrace that change and won't take on his leader's approach of just being fearful of change and trying to fear monger his way into election, Madam Speaker.

Crime in Downtown Winnipeg Public Safety Concerns

Mr. Dougald Lamont (St. Boniface): There's been a dramatic increase in crime in downtown Winnipeg, often related to meth and addiction.

Of the hundred commitments in 100 days this government made there was no reference to public safety. But come up with five ideas was repeated at least 10 times, one for each department.

The mental health budget has been underspent. The guns and gangs fund has been left 80 per cent untouched.

Why is leadership on downtown safety being led by the owner of the Jets instead of this government?

Hon. Brian Pallister (Premier): I would like to congratulate the member on the last election campaign, but can't, Madam Speaker.

Instead, I will say this. The member should remember that we made announcements about public safety within days of coming back to the Legislative Assembly. We are serious about making sure that we do everything in our power to create a safer environment for citizens not just in downtown Winnipeg, but across the province.

And we will continue to take the issues of public safety seriously as we work in partnership with—whether it's the owner of the Jets or just a person who wants to go to a Jets game, whether it's a person who wants to shop for their family at Christmas downtown, whether it's just someone who lives downtown and wants to enjoy a quality of life that is enhanced and secure. Madam Speaker, regardless of who it is, we're ready to do everything in our power to make a safer downtown Winnipeg.

Madam Speaker: The honourable member for St. Boniface, on a supplementary question.

Public Intoxication in Downtown Winnipeg Request to Close Liquor Mart Location

Mr. Dougald Lamont (St. Boniface): One of the major reasons for people feeling unsafe downtown is public intoxication not just from meth, but from alcohol. But all the references to alcohol in the 100 days commitments of this government are about making it easier to buy and sell. There's a Liquor Mart downtown which sells huge quantities of low-cost, high-alcohol sherry.

Does the Premier recognize the MLLC's role in fuelling problems downtown and will he consider asking MLLC to close the problem outlet?

Hon. Brian Pallister (Premier): Yes. We're investing \$2.3 million more in provincial policing to target drug-related crime, including the spread of methamphetamine in our communities. We've increased the RCMP staffing complement by 29 positions and we've invested \$3.3 million more in 16 capital projects, including new body scanner technology to keep drugs out of our correctional facilities.

We're taking public safety seriously, and the advancement around the issues of public safety is critical and important, Madam Speaker. There've been increases in police calls for service. There've been increases in violent crime. Everyone here knows that, and the fact of the matter is when the NDP ran for election this last time, in their whole platform they didn't mention the words public safety.

Madam Speaker, that puzzles me and I think it puzzles Manitobans as well who care about making sure they and their family are safe in this province and in this beautiful city. *[interjection]*

Madam Speaker: Order. Order.

The honourable member for St. Boniface, on a final supplementary.

Crime in Downtown Winnipeg Public Safety Concerns

Mr. Dougald Lamont (St. Boniface): Boy, you move offices—

Madam Speaker, I cannot understand this government's decision to task the Manitoba police board and David Asper with coming up with a private sector solution to public safety downtown. Even the police will tell you—*[interjection]*

Madam Speaker: Order.

* (14:30)

Mr. Lamont: —that you can't arrest your way out of an addictions and mental health crisis. And with respect to Mr. Asper, the job of the Manitoba police board is oversight, not policy development.

Why is this government abdicating its responsibility for public health and public safety and dumping it on the private sector instead?

Hon. Brian Pallister (Premier): Well, Madam Speaker, it's—apparently, it's harder to get organized with three than it was with four.

We're taking a balanced approach on this issue, Madam Speaker. It's not just meth. As the Opposition Leader and I spoke about in Estimates yesterday, it's addictions and it's a larger problem of crime, enhanced, in fact, by the prevalence of meth in our streets right now.

We can't police it away, but we can make sure there are police and we can make sure that they're doing their job in terms of protecting the security of citizens who aren't on meth and who want to shop downtown or go to a Jets game or a Moose game or just walk around.

Madam Speaker, the member seems to be confused here. We can have a complex approach to a complex problem, and that's the approach we have. We're addressing preventative educational aspects. We're going to address and have continued to address treatment. But we're also not going to ignore the fact that people deserve to feel safe when they live in this province, and we're going to focus on making sure that law-abiding people in our province feel safe and secure in this beautiful province.

Fiscal Stabilization Fund Government Investment

Ms. Audrey Gordon (Southdale): Balanced budgets are an important part of responsible fiscal

management. Less money spent on debt-servicing costs means more can be invested in front-line services. Responsible fiscal management also means ensuring that government has access to the funds it needs in the event of an emergency. After years of depletion under the former government, our PC government has been steadily reinvesting in Manitoba's rainy day fund.

Can the Minister of Finance please tell the House about the most recent investment in the fiscal stabilization fund?

Hon. Scott Fielding (Minister of Finance): I want to congratulate the member for Southdale on her election victory.

Our Manitoba PC team has made the historic investment in the rainy day fund, over \$407 million, Madam Speaker. This is the single largest investment in the rainy day fund in the history of the fund. We know Manitobans know that the NDP drained the fund from over \$800 million to just over \$100 million. This investment represents the most important investment in Manitoba history in terms of providing supports and protecting Manitobans.

Taking this year's savings and putting them in the rainy day fund is responsible fiscal management, Madam Speaker. That's something the NDP know nothing about and that's where our government—

Madam Speaker: The member's time has expired.

MPI Online Services Rate Affordability

Mr. Mintu Sandhu (The Maples): Madam Speaker, MPI had a plan to put its service online. They spent millions of dollars and their plan would have saved Manitobans tens of millions of dollars, but the Pallister government interfered. The Pallister government was more concerned about PC donors than affordable rate for Manitobans.

Why won't the minister allow MPI to do its job and ensure affordable rates for all Manitobans?

Hon. Brian Pallister (Premier): I'd like to congratulate this member on his first question in the House, also all the members who asked their first question today. I think they did a tremendous job.

The issue of online availability of insurance products is one that has been around for a long time, Madam Speaker. It's been successfully addressed through partnership agreements in provinces like Saskatchewan and British Columbia. Under the NDP

nothing happened on this issue for 17 years. There are many reasons, I suppose. One could speculate on why not.

Perhaps one of them is that the NDP caucus has within it an active, involved insurance broker who may have influenced the NDP not to take any action to make these services available. I'm not sure why, Madam Speaker, but the fact remains that no progress was made under the NDP for 17 years and now we're making progress.

Madam Speaker: The time for oral questions has expired.

Petitions? Grievances?

ORDERS OF THE DAY GOVERNMENT BUSINESS

Hon. Kelvin Goertzen (Government House Leader): Madam Speaker, could you please resolve into Committee of Supply.

Madam Speaker: It has been announced that the House will consider Estimates this afternoon. The House will now resolve itself into Committee of Supply.

Mr. Deputy Speaker, please take the Chair.

COMMITTEE OF SUPPLY (Concurrent Sections)

EXECUTIVE COUNCIL

* (14:50)

Mr. Chairperson (Dennis Smook): Good afternoon, everyone. Will the Committee of Supply please come to order.

This section of the Committee of Supply will now resume consideration of the Estimates for Executive Council. As previously mentioned, questioning for this department will proceed in a global manner.

The floor is now open for questions.

Mr. Wab Kinew (Leader of the Official Opposition): So we received the annual report for the Civil Service Commission and upon review, there's a couple of numbers that jump out in terms of the number of jobs that have been cut by this government.

One is that year-over-year, this government has cut about 900 jobs from the civil service, but since taking office, they've cut 2,000 jobs—some 2,000 jobs—just to be clear that that's an approximation. And the reason why the 2,000 jobs-being-cut number is

significant, is because it goes beyond even what this government's own consultant recommended. So KPMG was retained and KPMG recommended something in the neighbourhood of 1,500 jobs to be cut. Yet it appears that the government has gone much further than that.

So at this point it looks like it's going beyond just looking at balancing the books. Now, it's job cuts and it's into harming the economy. It's into that sort of territory now. So I want to begin on this subject by asking the Premier what was the rationale and why go above and beyond just what the consultant recommended? Why cut so many more jobs that Manitobans rely on?

Hon. Brian Pallister (Premier): Well, first of all, I'd have to say to the member that as far as his reference to dangers to the economy is concerned, that the economy of Manitoba depends on many more things than the size of the civil service to influence its voracity and its sustainability. So I don't know if I would agree with his linkage that he apparently is implying that it would be the job of government to hire more people so the economy did better.

But, ultimately, that's not how it would work. That's how it would not work. And that's how it didn't work for years under the previous administration. So the concerns I would expect the member would want to raise would be about the efficacy of various departments of government and how they are delivering services, not about the size of them.

That being said, however, it's his choice to raise the issue if he wants, of course. But I would think that would be the major issue that, you know, that people would want to see addressed in the province. How effectively are we doing at delivering services? We're doing what we said we'd do. We said we would trim at the top and that's where the bulk of these lay—these changes are. Not through lay-offs or firings but rather through attrition.

We have a significant number of older government employees that have served the people of Manitoba a long time who are deciding to retire, and we don't believe that it's necessary to hire every—hire two people for every one that leaves, or to increase the size of the government at the top to deliver better services to the front line.

So that's what's been guiding these changes. As far as the numbers the member references, we've kept our word, and we continue to, and, of course, we're excited to see a vibrant civil service where we can

attract more new entrants and hire more people and we're doing that as well.

* (15:00)

Mr. Kinew: Well, the numbers show that there's far fewer people working, and it does impact the economy when you cut jobs too aggressively. It pulls money out of circulation and, again, for every job position that's cut, there's a family attached to that who bears the brunt of that. So, again, you know, not accepting the premise that hiring KPMG was a good idea, but just putting forward that that was the yardstick that the Premier himself decided to use. His cuts to jobs in the public sector are much more aggressive than even his own accounting consultants recommended.

So the concern is when those job are cut, when those incomes are removed from the Manitoba economy at a rate even above what the accounting firm recommended, is that there is an adverse economic impact and, you know, even without knowing all the specific job classifications, you do get an order of magnitude, when we're talking about this many jobs, that you're talking tens of millions and, in some cases, hundreds of millions of dollars, being pulled out of the economy. And that does have an impact. It's a negative impact.

So again, the question is, you know, on what basis did the Premier decide to cut more than KPMG told them to?

Mr. Pallister: So, the member continues to cling to the thesis that if we have a bigger government, we can have a stronger economy. And he's equating two things that don't go together very well, especially one considers the structural deficit we inherited, close to a billion dollars. Under the NDP, we had the largest civil service in Canada for our size, and we didn't have competitive outcomes in our front line. So service levels were not compatible with the highest level of investment per capita in most government departments, and so we made necessary changes to improve service delivery while reducing at the top through attrition, not through lay-offs.

The member says families bear the brunt. Well, actually, the vast majority of these people who the member is referencing, the vast majority of them chose to retire. And so I don't know if bears the brunt is a fair descriptive. I think people make the choice to retire, certainly not just people in our occupation, but in every occupation, make the choice to retire. And although it doesn't always work out well for a family

when someone comes back into the household after retirement, hopefully, it is—something that does work out quite often. And it is something that many families plan for. So, in fact, we have a baby boom civil service at this point of aging people, who at the rate of approximately 8 per cent per year decided they want to leave work and retire. And so that's their choice, and I don't bear—I know the member threw that phrase out there, intending to create the impression that somehow there's a massive hardship to be endured by these folks, but these are people who want to retire. And so it's their choice and we're accepting of their choice and thank them for their service.

Mr. Kinew: Can the First Minister share the document that he's referring to that has the information on how many departures were voluntary, retirement or terminations?

Mr. Pallister: I wasn't referring to a document; I'm referring to the reality that we're trimming at the top and that we set a mandate of 15 per cent reduction in management. We have inherited a very top-heavy civil service according to comparatives that we've seen from the early days of our coming into government. And the fact of the matter is what the member is trying to link now is a reduced size in civil service at the top with hardships to the economy when, in fact, Manitoba's economy is chugging along pretty well with reduced-size civil service at the top and a lower deficit with lower taxes.

Manitoba's economy is growing compatible to Canada's economy. We have led in many, many categories. We're on track, in terms of building permits, to have a 48 per cent increase this year over 2015. Housing starts 22.5 per cent increase through the first half of this year. This is the most recent stats we have. That's the second strongest increase of all Canadian provinces. And private sector capital investments, StatsCan estimates will grow four and a half per cent this year. That is the third year in a row that Manitoba will lead the country in private sector capital investment growth. So we are growing as an economy. We're growing in many categories better than other provinces and, of course, it would be our hope that we can continue to do so.

So to attempt to link the size of the civil service, in particular at the top, with a struggling economy is futile in the face of actual facts. The facts are our economy is doing very well and that I would suggest that it's doing well for a number of reasons.

I would not suggest that because our government has approached reducing deficits seriously and has

achieved significant reductions in deficits that that is the only reason that Manitoba's economy's done well, nor can I accept the thesis that the member's advancing, that somehow our economy's struggling because there aren't enough people hired and paid for by taxpayers in the civil service of the provincial government.

Mr. Kinew: The First Minister knows that the Conference Board of Canada has downgraded its economic outlook for Manitoba in the next year and that there's a number of other looming indicators of possible downturn, even maybe recession, on the horizon. One of the key factors is, again, you know, some of the large infrastructure projects in northern Manitoba are winding down next year, and that will have an impact on Manitoba's economy.

At the same time, the premise of the Premier's (Mr. Pallister) first election campaign in 2016 I think laid on the foundation that the cuts that he was going to make would not be done too aggressively. And I think that that was based on both probably public opinion research that showed that Manitobans, politically speaking, don't have an appetite for a government that cuts public sector jobs too aggressively, but also based on an economic insight that overly aggressive cuts to jobs in the public sector does have a negative economic impact. And so the question has more to do with the pace and the scale with which jobs are being shed in the public sector.

Again, I don't agree with KPMG's recommendations, but KPMG was presented by this First Minister as the source of his rationale for reducing public sector jobs. Their recommendation was in the neighbourhood of 1,500 jobs. We now see that there's about 2,000 jobs that have been eliminated by this First Minister.

And, while he may not like to share the information, I do believe that he ought to table the documents that he's referring to that show the breakdown for these positions, because it is a legitimate question to ask whether the scale and the scope of the job cuts being made by this First Minister are having an unduly adverse impact on our economy and on families. These are regular and legitimate questions to ask, and the sort that I think are rightly asked in this Estimates committee setting.

So I'd ask the Premier if he can table the documents, or share even the title if they're already publicly available, the documents that he's referring to, that illustrate the breakdown of how many of these positions are in fact retirements, how many are

straight cuts to existing positions, perhaps others are voluntary departures. But I would like the Premier to share this information.

Mr. Pallister: First of all, I think the member may forget that the NDP administration that was in office prior to the 2016 election, in a desperate attempt to build up support from its public sector devotees, gave the largest labour provider to the Province of Manitoba an unasked-for no-layoff clause just prior to the '16 election. And so when he wants a breakdown he can be sure that the number of layoffs was minimal because there was absolutely no possible way, shape or form of actually laying anybody off.

We immediately adopted a strategy, rather than laying people off, of simply allowing those who wish to retire to retire and didn't rush willy-nilly as the previous administration had done to hire two people every time one retired.

The size of the public sector, particularly the top, when we came in was to all comparatives very, very high in Manitoba. Taxpayers paid for that but they didn't receive benefits and services. They paid more and got less. They paid higher taxes with every passing year of the—in the latter days of the NDP administration, not so much under Gary Doer but under Greg Selinger most certainly. They paid higher taxes every passing year because the government got bigger. But the government didn't get better at what it did, so they paid more and they got less.

What we decided to do based on good research, prudent research, some of which the member is always questioning until today and now cites as a rationale for his questions, those research works recommended that we look at improving the efficiencies in our service delivery, and to do that one of the things we could do was to reduce the size of senior management. That was a significant focus of our government's actions over the last few years, and that is where we've achieved better outcomes, frankly, in a structure that is much more responsive to the front line now than it ever was in the last years of the NDP's previous regime. So many people up top, said one nurse to me, that nobody gets hurt up there.

* (15:10)

We'll continue and we will focus very much on making sure we streamline management, that we return the structure of government more to the days, early days of Gary Doer's time in office in terms of spans and layers. In terms of middle and upper management ratios versus front-line, the NDP had it

in the shape of the water tower at Selkirk. It was too big up top and it wasn't responsive enough to the front-line worker.

So we're endeavouring to make sure that through these and other mechanisms we improve the quality of front-line civil service by making sure that they're not overburdened by too much weight up top in the structure. That's been the focus of our reforms and that's what we'll continue to focus on.

Mr. Kinew: Well, you know, it's always nice to be joined in the Gary Doer appreciation society as seems to be like a cross-partisan, trans-partisan exercise in Manitoba these days.

But, again, if the Premier doesn't want to answer the question about the constitution of these, you know, job cuts, perhaps he can talk about the areas that they came from.

Again, it seems to me that, like, given the constitution of the civil service, what constitutes a civil service to be clear? Likely, a very good number of these jobs are infrastructure jobs. People who fix roads, paint lines on highways, things like that. Likely, there's probably positions in corrections, possibly conservation officers. Just anecdotally, I've spoken to COs who've been talking, particularly in Westman, about shortages of staffing in their areas, and in addition to positions being cut, you know, at least one CO that I was speaking to at Countryfest was telling me that, you know, the wage freeze was certainly making it difficult to attract new colleagues to serve as COs in Manitoba.

So, again, I'm wondering if the Premier can share with the committee the breakdown where these positions came from so that we could see if, in fact, these are front-line service type positions that are being cut.

Mr. Pallister: So member might have missed that we just hired eight new conservation officers this very day, and as far as their recruitment exercises they seem to be going very well; not running out of people who want to work in the government of Manitoba.

As far as conservation office is concerned, we did change one aspect of their work. They are no longer told to turn a blind eye to night hunting as they were in the NDP regime. Told to look the other way when people go out with high-powered rifles and shoot animals; that stopped and that's a good thing.

As far as the issues around Gary Doer, I wouldn't want the member to be confused in any way, shape or

form. I think Gary Doer missed a tremendous number of opportunities to make this province stronger in his time in office, in particular his mid-term period. When he had massive restorations in transfer payments from Ottawa he failed to proceed to lower significantly the tax burden on Manitoba families. When he had opportunities presented to him because of declining interest rates and lower debt-service charges—and by the way, we've inherited the opposite problem he inherited. He inherited a balanced budget with debt being paid down; we inherited a billion-dollar deficit with debt rising enormously and so fast that credit rating agencies were increasingly concerned that they'd have to start charging us more, and did, and punished us with lower credit ratings. That's what we inherited. Gary Doer didn't inherit that. So he was the beneficiary of some lovely—some would call it silver- spoon circumstances and missed the opportunity to build on those over a long period of time, sadly.

So the reality is that he had the opportunity to do a lot of things he chose not to do, and we have the obligation to do a lot of things we're choosing to do.

Mr. Kinew: Again, just curious as to, you know, why the Premier (Mr. Pallister) has cut, you know, these jobs at the rate that he did. Again, you know, KPMG—actually, you know, just want to correct my earlier remark where I said KPMG recommended 1,500; apparently, it was only 1,200. So, actually, the scale of job deletions and job cuts is actually much more aggressive than even previously I alluded to.

So I'm just curious as to what the rationale was for that. There's been the perception by many in the business community in Winnipeg that the Premier cuts without having a strategic basis for making those decisions. For instance, it's an arbitrary 15 per cent target that may not recognize strategic priorities in certain areas.

I guess, similarly, there's a legitimate question to be asked here as to whether these job cuts and the reductions in the positions in the civil servants achieved any sort of strategic goal, or whether this was just purely an exercise in cutting jobs. So what specific insight or rationale were these jobs based on? Again, recognizing that this is much more aggressive than even the targets for cutting job positions that the Premier himself set out.

So what was the rationale or the basis for that?

Mr. Pallister: Well, two credit rating downgrades. That should be a wake-up call for any thinking person, but obviously the member missed that.

The fact is we inherited a \$1-billion deficit and that, of course, is not a healthy thing in a province of this size. That added to the debt load that we had that Manitobans have to endure and service. Plus, it raised our interest payments last year for the first time to the area of \$1 billion as well. A billion dollars not available for education or for front-line investments in a variety of services, rather gone to money lenders happy to take it out of Manitoba.

This was a function of the mismanagement of the previous NDP government which was unparalleled, unprecedented and, in fact, indefensible.

So when a member asks me why this government would take steps to address this situation, I would say it's self-explanatory to any common sense person.

Mr. Kinew: I speak to many business leaders in the city, and they don't understand a lot of the basis for the decisions that the Premier makes in terms of the cuts that we've seen. And then I think there is a concern that, you know, pursuing this path more aggressively than a more strategic approach might dictate is, in fact, hurting the economy. So I think I've made that point already.

The Premier seems clear that he doesn't want to answer the previous questions, but perhaps he might share with the committee as to whether his government conducts exit interviews with the people who are leaving these positions.

We've heard quite a few times from people who are leaving, you know, jobs that have been cut, like health care for an example, that what is leading to an influx of resignations is not just the baby boomer generation getting older, it's the very difficult conditions in health care for the people who work in those positions today. You know, we've heard many stories of nurses who retired early or who left the province because, you know, health care is in crisis. There is an ongoing issue at many emergency rooms and hospitals and other health-care centres, particularly acute in the Winnipeg health region but also present in other health-care regions as well.

So I guess the question that I'm wondering about that has to do with whether this government has a picture for the rationale behind people leaving these positions. You know, when people are exiting from employment and, you know, this is not in any way treading into specific HR conversations, but is there a survey or some other technique that is being used to ascertain whether the government's cuts in certain departments are leading to exits from those positions.

As a specific example, much has been made by heavy construction and by other actors about the government's cuts to infrastructure.

So is the government asking questions of people exiting infrastructure, people who repair roads, people who paint lines on highways, things like that, people who do grading, in the public sector, if they're leaving due to cuts in infrastructure? So I'm curious to know what sort of, you know, management techniques the government is using to get an accurate read for this large turnover amongst their employee base.

Mr. Pallister: Well, I'm not going to accept the preamble. The member has referenced infrastructure—investments and strategic infrastructure are better focused, get better value for money, are tendered more fully, and will be tendered more openly without the obligation for the vast majority of private sector, non-unionized construction companies that have to pay union dues so they can participate in bidding.

We're getting better value for the money in terms of our infrastructure investments. But, in terms of the gross amount invested, we've exceeded \$1 billion in strategic infrastructure investment every year and our average investment in strategic infrastructure is higher than 15 of 17 years under the previous NDP government.

So as far as the member's referencing to cuts, we've actually moved our investments in infrastructure to a strategic level that makes sense sustainably.

* (15:20)

The NDP, in the last two years they were in power, were so desperate to hang onto power that they did every project they could think of and put up a billboard that said steady growth at every job site. Well, they even put up city growth signs where there was no work going on.

This was an advertising campaign that cost millions of dollars for taxpayers and got no value whatsoever for anybody, in some areas even endangered the flow of traffic, and the signs were eventually taken down.

That being said, there was no measurable improvement in the level of service available to people as a consequence; rather, excessive debt was incurred which had to be serviced and has to be serviced for decades to come.

This is how they ran the East Side Road Authority as well, a duplicative operation that duplicated what

the Infrastructure Department was already doing and skilled to do. They created a second bureaucracy around the East Side Road Authority. And I would encourage the member to read the Auditor General's report on that, one of the harshest condemnations of waste I've read from an auditor's office.

And in this report they spoke about unsupervised work, dangerous work being done, machinery equipment ill repaired, endangering workers, and no value-for-money monitoring or training follow-up being done. And this, all in the name of creating jobs.

You know, the fact of the matter, Mr. Chair, is that just throwing money at a problem doesn't make it go away, and this seemed to be the approach of the previous administration: just throw money at a problem, whether for political motivations, I shouldn't say. I do think, though, that untendered purchases repetitively done by Steve Ashton, when he was in Infrastructure, from a friend was pretty indefensible, and so did the Auditor General in their examination of that particular issue. So we have waste, upon waste, upon waste.

Example I could give the member, what we've endeavoured to do is reduce the overlap, reduce the duplication, reduce the unnecessary encumbrances that have been put in the way of the private sector, and the results are beginning to show. And they are pretty impressive: reduced deficits, moving to balance, reduced taxes, lower tax burden on families, on small businesses, on seniors struggling to live on fixed incomes. These are considerable achievements and they are not easy to achieve.

The member is criticizing how we've gone about doing these things, but surely, he can't question that the outcomes are better for the long-term sustenance of Manitoba families than doubling our debt in just six years, raising taxes on virtually everything to the point of an additional \$500 million-a-year tax burden on Manitoba families. This was the record that we came in and had to clean up after. It was not an enviable record, to put it mildly.

And I would say to the member that, yes, the work is challenging, and there is no doubt about that, but people who are wanting to retire are being—given the opportunity to retire in a province that is much more financially sustainable, where services are improving and where the scenario for their children and grandchildren is better than it was just four years ago.

So these are fair questions the member is asking. I hope he would agree that my response is also fair.

Mr. Kinew: So, again, you know, I shared Infrastructure as an example; certainly, there's other areas that we could posit as examples.

But just to be clear, when I was talking about cut, I was talking about the amount of money cut year over year, but also the amount of money cut when the Premier (Mr. Pallister) broke his 2016 election promise around Infrastructure investment. And, of course, that is the cut that Manitoba heavy construction and others have been making, you know, a fair bit of noise about. So that's what I meant by cut.

The reason why I'm asking the questions surrounding surveys and, you know, measurement for people who are leaving the civil service is because not only is there potential impact on the economy that might be borne by overly aggressive cuts to jobs in the public sector, but there's also potentially a danger, and we have seen this with the government in health care where they failed to keep an adequate eye on what was happening in emergency rooms once they started to close them in the city of Winnipeg, so much so that the consultant, Dr. Peachey, came back and said that, essentially, it was a failure of oversight that situations at Concordia ER before it was closed, and Seven Oaks ER before it was closed, were exacerbated because nobody in government was actually keeping on eye on what was happening in the health-care system.

And so, I guess, the reason why I raise that in this context is the earlier explanation that I tried to raise was, why did they cut 2,000 jobs when their advice and previous commitments was to cut 1,200 jobs. And I asked, you know, is that because the First Minister is proceeding more aggressively than he might?

The other option is just that this government simply doesn't know what's happening in the public sector, and this government doesn't know why people are leaving these jobs.

So that's why I'm asking the question of the First Minister, as to whether they are conducting surveys, whether they are measuring and comparing information on the people leaving these jobs so that they can say, for instance, on—in a department like Infrastructure, people are leaving or retiring early because of the cuts that we've made to Infrastructure. Or, they can say with confidence, no, that's not happening.

Can they look in a department like Health or Education and say the cuts that have been happening

there in Education, cuts to like, you know, some of the services that are provided in Education, is that leading to people leave early or not?

So these are the sorts of questions that I'm asking. And again, I think a reasonable person in Manitoba could look at the Province's finances, the size of the civil service, still ask for change while still insist that such change be managed in a responsible and an appropriate way.

So again, does the First Minister or his government conduct these sorts of exit interviews or surveys of people who are departing the public sector, you know, jobs so that they know what's happening?

Mr. Pallister: The member has his repetitive tactic, continues to misrepresent the changes we've made to our civil service. In terms of its numbers as cuts, they are nothing of the kind; they are retirements.

I will continue to clarify for the member in the hopes that the—I guess, perhaps, to be dashed, that he would ever understand that people leaving the workforce of their own accord is not a cut. Rather, it's a person's choice that people have made.

In terms of his reference to cuts, again, in the Infrastructure department, I will tell him again, we're not going back to Sillyland, 2015-16, when the NDP desperately beefed up the capital investments in Infrastructure so that they could hang on to power. That was the only defensible reason they ever gave or could anyone give to the ridiculous exponential increase in investment.

And I will tell the member that there is no defence for the tactics used by the former Selinger government in those two years at all.

The fact is, if you understand the construction industry, you'd understand they're up to capacity well before the last 35 to 40 per cent of the investment was made. So what that means is that when that job goes up on the market and is tendered, people bid high. They bid high because they've already got other work and that work is occupying their workforce.

So they throw a bid in—this is what several companies have told me. The member talks about speaking to business people. I talk to business people, too. I have lots business people tell me they're really proud of what we've done, tell me that they really appreciate the courage we're showing in addressing a problem that wasn't addressed for 20 years by the NDP.

They tell me that they're really happy that we've held the line on tax hikes and, in fact, reduced them. They tell me that they're really pleased that we're moving the Province back to sustainable levels. They're telling me that they're really pleased that we recognize that higher interest burdens on their children or grandchildren is a bad thing. It's intergenerational theft.

And the people in the construction industry are telling me they appreciate the fact that they don't have to waste money and time bidding on jobs that are unnecessarily put—being put out there for political reasons, rather than for the good of the province.

So that's what they're telling me in the construction industry. Maybe they're telling the member something different, but I'll tell you one thing: throwing a bunch of jobs at people just before an election to make it look like you're creating jobs is not the way to create real, long-term sustainable growth in a province.

It's expensive and it's advertising and it should—it can only be described as that. It's government political propaganda at the expense of long-term fiscal sustainability. So I don't support it. We don't do it that way but the NDP did it that way four times, beefed up their investments in Infrastructure just before elections, and they underspent their budget every year before that. That's not the way to do investments in infrastructure.

So we got a healthier climate now because we're getting better value for money for the taxpayer. Certainly, Chris Lorenc, who I know well and have known for many, many years as an advocate for the heavy construction industry—and so Chris is always going to say that you should spend more money on bridges and roads. That's what he's paid to say.

But he understands that we weren't getting value for money under the NDP approach. He gets that as well, or better than anybody in this room. And I understand it, too, and we're not going back to that kind of crazy waste of money just to show off.

* (15:30)

So, when we invest in infrastructure, we do it because it's a good idea, because the project makes sense, and that's where we're going to continue to invest in infrastructure. And the member misrepresents the strategies that we're using on infrastructure investment. He doesn't demonstrate that he understands the strategic value of well-managed infrastructure investments that are prioritized for the

good of the province, not for a political party's purposes.

Mr. Kinew: Thanks, Mr. Chair. And, you know, I'll just put on the record, I'm asking reasonable questions. And the Premier (Mr. Pallister) sees fit to tort these, because I guess he doesn't want to answer very reasonable questions to do with management of a large workforce.

You know, we know that there is a survey conducted of people who work in the public sector, and that satisfaction of, you know, those workers has been declining over a number of years since the Premier took office. So I think it is reasonable and legitimate to ask whether this is contributing to departures in the public sector.

Again, you know, after hearing the Premier's inability to respond to some pretty reasonable questions, having to do with why were these cuts made? Was there a rationale provided? Can you explain where these cuts are coming from? What was the composition of these cuts made?

Because he's not able to answer those questions it does make it seem more likely that probably the answer is he doesn't know what's actually happening with these departures. Combined with the fact that there's survey evidence, it says that job satisfaction in the public sector is declining, suggests that probably the government should undertake to conduct exit interviews or exit surveys, so that when people do retire en masse, do resign en masse, do leave the public sector en masse that there is an accurate read on what's taken place.

So this seems like pretty reasonable management stuff, you know, techniques that reasonably might be expected to be deployed. Because again, this is something that impacts the economy, but it's also something that impacts the quality of services that people in Manitoba rely on.

You might be in the constituency of Riding Mountain and be thinking about you know, grading in your area, or you know, up-keep of highways, things like that. You might be in Assiniboia and wondering about your family members who work in the department of education. You know, you could be in a constituency like St. Vital and be wondering about your friend who's a seal you know? And what's happening with their jobs, and are we actually getting not only efficient but also effective governance?

And so I do think, based on what we've seen from the government today, which is a willingness to cut

without necessarily attention paid to oversight and, particularly, acutely demonstrated in the health-care system, I do think that these are all legitimate points to ask.

So, it seems unlikely that the sort of management technique is being deployed right now. Would the Premier (Mr. Pallister) commit to starting to engage in these sort of surveys with departing civil servants and public sector employees, so that perhaps next year, when we're at Estimates, he might have more accurate answers as to what's happening with people who are leaving?

Mr. Pallister: Interesting that the last 30 minutes the member's failed to ask a question about the level of services being provided by the civil service or the service level to the customer in terms of value-for-money proposition. He doesn't seem to be concerned about that.

But certainly we are, as a government, concerned about those things. The level of turnover of staff is—
[interjection]

Mr. Chairperson: Order.

Mr. Pallister: I didn't mean to interrupt the member. If you would like to—[interjection]

Mr. Chairperson: Would the honourable Leader of the Opposition like to continue with the question?

Mr. Kinew: Sure. I just want to point out for the record that again, the last answer that I gave, just to repeat for the benefit of the First Minister, was about services being rendered in constituencies for some of my colleagues on the government side of the table, as well as for constituencies on our side of the table as well. So I do have a commitment to ensuring that Manitobans do get these sort of services, whether it's from infrastructure, from health, from education.

And so I do appreciate, Mr. Chair, the opportunity to reiterate that commitment, and then again to ask the First Minister whether he'd commit to using, you know, whether it's a survey or some other kind of management technique, to be able to ascertain what is happening with these departures from the public sector?

Mr. Pallister: Well, thank you. I appreciate the Leader of the Opposition clarifying his magnanimous position in respect of services in Riding Mountain. I do think, though, that it's important to understand the level of turnover of staff's been consistent over the last decade in this province, that in fact we do have growing number of retirements because of an aging

workforce, and that is a reality in most public sector companies right now and public sector service operations around the country—in fact, in the Western world. That is a baby-boom fact.

And he should know that we're regularly replacing and hiring people in our civil service because we believe very strongly in a civil service that is non-partisan in nature and one that can offer the highest level of service possible. And we also understand, as I believe the member on reflection might, that what we inherited was not a sustainable proposition but rather a billion dollar—approaching billion-dollar deficit and rising annually and that 'circumstanal'—that that circumstance could not be allowed to continue.

So, if the member could put that on the record that he agrees with the approach we're taking and he maybe disagrees with the time frame, thinks we should go slower, but he sure doesn't want to put on the record, I'm sure, that he wants us to go back to those days when we ran billion-dollar deficits and they were rising, or that we—he would want us to go back to those days when taxes were being raised on an annual basis making life harder and less affordable for families in our province.

Surely, he would put on the record that he's supportive of our strategy of reducing tax burden on middle- and low-income families in the province. And certainly he would want to go on the record of supporting the concept of reduced deficit finance spending and adding to a debt burden when we have already, as a consequence of the previous mismanagement of the other NDP regime that preceded us, we have already seen credit rating downgrades on two occasions and going on another.

This—to go back to those times would be to endanger the future of Manitobans' financial security and of their service delivery as well. So I would hope, you know, the member in his line of questioning would acknowledge that we've made significant progress in restoring the financial security that Manitobans would want to have in this first four years of governing and, to be fair, recognize the degree of the challenge was magnified by the mismanagement of the preceding NDP government in respect of its inability to focus, as the member appears now willing to do, on service outcomes for Manitobans as a priority rather than simply spending more to get less.

Mr. Kinew: You know, I think I made clear in the recent election campaign what I support. Again, I do support moving a—you know, Manitoba to a situation

of a balanced budget, but I support doing so in a way that is different from the one proposed by the First Minister, one that would see reasonable investments in health care, that would see us make important investments in infrastructure like, for instance, building the North End Sewage Treatment Plant that's needed to help save Lake Winnipeg.

And, of course, that would see us also have a strategy on jobs that would face some of the challenges of our changing economy rooted in technology change. So I think that that's all very clear and, you know, the political philosophy is pretty reasonable.

So, when it comes, however, to the decisions that this government is making, though, I think the point stands that there is declining, you know, satisfaction, morale, what have you, combined with cuts to the actual delivery of services to the average person in Manitoba, and it may be the case that some of these departures are happening because of those forms of cuts and in some cases mismanagement by this government.

So I do think it's a legitimate technique for a responsible manager to try and ascertain what actually is happening when people are leaving in much higher numbers than even you planned for. If you set out to get rid of 1,200 jobs and you actually had 2,000 people fleeing, then that may suggest that there are other issues that require attention in the government that you are managing.

So again, that's common, that's a piece of advice that I'm offering by way of a question. And the question is would the Premier (Mr. Pallister) undertake to ensure that this sort of management oversight will happen in the future so that next year, if there is another number that's far larger than what the government set out to do, that they'll actually be able to explain why this is happening, they would be able to account for the choices that they made, that they would be able to credibly, and without just re-*resorting*-resorting to talking points, explain how services are being guaranteed to Manitobans.

* (15:40)

Again, I don't think any of the stuff that I'm laying out here is controversial. I think most of us Manitobans would agree that a government should be able to answer questions like that.

And so, I guess, the question is: Will the Premier commit to being able to answer those sorts of questions, and to do the work over the next year, on

the management side, to gather the data, to be able to provide that sort of reassurance to Manitoba?

Mr. Pallister: Well, the member talks about non-controversial. During the election campaign which he references, he made a commitment he wouldn't raise taxes, which was very reminiscent of a previous commitment made by a previous NDP leader. He also made a commitment that he was in favour of balanced budgets.

So, if he's planning on being believable, he'd have to outline a more detailed plan than that he believes in balanced budgets and is going to balance the budget while not raising taxes, because Manitobans heard that before and they knew what happened, and it was higher deficits.

Was the member trying to advance, or is he trying to advance the idea that running larger deficits year over year is not a tax hike? Because, ultimately, it's just a deferred tax that people have to pay back later, plus the interest on it.

If he wants to be believable on financial management issues, and he's saying that he is going to balance the books without tax hikes, how can he be believed on that? How does he expect Manitobans to believe him on that when he put out a platform which didn't cost over two billion dollars of proposed additional spending? How would that be believable, when he would make a promise to David Chartrand to pay him \$70 million to get out of the way on a Hydro project? How does he expect to be taken seriously if he's making these vague statements about believing in lower taxes and balanced books on the one hand, while on the other hand, using the word "cuts" every other sentence, inappropriately; honestly, it's [*inaudible*] to be credible. He is not credible; he's incredible in these assertions.

It gets worse when he, you know, promises not only to give Mr. Chartrand \$70 million, but he also promises, as part of his third carbon tax proposal in three months, he promises that he's—and this is a different one each month. If you don't like this one, don't worry; there'll be another one in two weeks. He promises—he—

An Honourable Member: You guys think this guy has credibility on carbon taxes?

Mr. Pallister: No, but this is serious. I mean, if you want to be credible on money management issues and financial management issues and public management issues, there's an opportunity here for the Opposition Leader to develop that credibility by advancing some

ideas. Rather than simply saying he doesn't like the pace of change, or you know, suggesting that somehow by letting people retire and not replacing them with two other people, that somehow this is harming the economy when nothing—there's nothing that supports that thesis.

If the member wants to be taken seriously, explain how \$630 million for uncoded Hydro rebates, a chicken in every pot, is a carbon tax strategy. Because that's what he promised during the election campaign, that he'd dip into Hydro, which is in desperate financial situation—deeply, deeply in debt—how is that, that he proposed that Hydro should incur an additional \$630 million cost so he can buy favour with the people of Manitoba. How is that prudent management? How is that respectful to Manitoba Hydro, that's owned by all of us, not owned by the NDP. It's not the NDP's personal ATM to use to cut cheques to people on.

If the member wants to be serious, taken seriously, he needs to advance some ideas rather than just simply being critical of the ideas we're implementing. And I think he has that opportunity now, in his next preamble.

Mr. Kinew: I turned to my colleague from Concordia during question period, and I was amazed. I said they're already out of ideas, right? Like first day in question period. And we see again, the Premier (Mr. Pallister) has an opportunity in Estimates to engage with some pretty reasonable questions, and instead, all he wants to talk about is my election platform. And I think it was a pretty good platform. It was more modest, but it really worked.

Some Honourable Members: Oh, oh.

Mr. Chairperson: Order. Order. Order, please.

Mr. Kinew: No, it was a pretty good platform because it was, you know, modest in some areas, I guess you would say. We weren't planning to change the world overnight, but we were planning to make some progress. And I think that, you know, the member's former colleagues from St. Vital, from Transcona, from other areas know that a lot of this plan we put forward did resonate with many people in the province.

But, again, you know, we can talk about my ideas all day, but this really is about asking questions of the government. And we know that the Premier is not able to answer some pretty simple questions about what's happening to the people he manages, right?

So I'm not sure if it's an inability born out of not knowing what is taking place under his purview, or if it's simply just a political tactic to stonewall the Estimates committee and not provide any useful information and just try and ride the clock out here until, again, you know, perhaps the various deadlines kick in on the sessional order.

So, you know, those are a few options in terms of the Civil Service Commission annual report that we saw tabled here recently.

So I'd like to return to the issue of Manitoba Public Insurance, which we talked about a bit yesterday. And some of the issues that we touched upon do have to do with bringing forward online services. It was an undertaking that the First Minister took to—or, committed to, rather, to explore and provide the background for a rationale on reserve requirements. But I'm also interested in the engagement between his government and the public insurer.

So there's a briefing note dated April 18th, 2019, that, you know, MPI had that they'd received direction from the Treasury Board Secretariat the previous fall. And the direction was that the Treasury Board supports MPI's efforts—and this is—I'm just reading from a quote here, so that's why I'm using language of the government here—TBS supports MPI's efforts to modernize service delivery. TBS directs MPI to continue business planning and proceed to implement improvements in consultation with the broker community and other service providers. TBS directs MPI to develop a comprehensive proposal for improving service delivery, including the future of online services, and return to TBS.

So there was supposed to be this return portion suggested by this briefing note. Just to summarize for the benefit of anyone maybe didn't pay attention to the whole quote that was provided in that briefing note—it's a briefing note from MPI that says Treasury Board had come to MPI and said, go and do these things and then report back to us.

The question that I'm curious to know the answer to, that I put to the First Minister, is: Did MPI come back to the Treasury Board Secretariat with that proposal?

Mr. Pallister: I just—I have to say to the member, he referred to his platform, which would have costed out, if they'd done the work, at \$2.8 billion, as modest. I wouldn't refer to that as modest. I'd say that's a significant risk to the people of Manitoba. And

Manitobans reacted quite rightly to the proposal that we should go backwards to a time of higher deficits, higher debt and higher taxes with the response that the member deserved.

And I would remind the member when he references seats he's captured, that I have previously congratulated him on doing so, but I will not fail to mention to him that it—you know, he should not take too much time to polish the outcome of the election. It was the third worst outcome in the history of the New Democratic Party in its entire history in the province. Only on two other occasions was there less public support for the party.

* (15:50)

So I wouldn't think he should wave around the election outcome as an endorsement of his ill-defined and dangerous strategies. They're incredibly risky. Those were the ones he outlined during the election campaign; one can only wonder at what would have happened if he was given an opportunity to actually make decisions that were not ones he would speak about during the election campaign. That, one could wonder about.

Most certainly I noticed, with interest, when it came to the attention of Manitobans, that he had promised David Chartrand \$70 million, that the New Democratic political machine did not issue a press release on that. I gather that it wasn't something he thought his focus groups would have liked or his polls would have supported, and I agree with them on that. But the fact remains it demonstrates a willingness to throw other people's money around for political purposes, which is something we've gotten away from with this government, not a moment too soon.

Now he's asked me some questions about Manitoba Public Insurance, and I'm looking for some additional information in respect of that. Okay. Well, I would say again to the member that in respect of the online services Manitobans deserve to get, there was nothing happening under the NDP for 17 years, and now we have some progress being made between MPI and the insurance brokers in discussion that is now advanced well beyond the stages that it never got to in 17 years of NDP time of government, and so it would be our considered hope that, as has happened in Saskatchewan and has happened in British Columbia, that agreement can be reached to improve those online services, make them available at low cost to the people of Manitoba.

Mr. Kinew: So, again, the Treasury Board Secretariat provided a direction to Manitoba Public Insurance, and part of that was for MPI to go out and come up with a new model, and then to come back with a proposal to government.

So, again, the question that I'd like to know the answer to, is whether MPI has come back to government at this point with this new proposal. So, again, the government directed MPI to develop a new comprehensive proposal for improving service delivery, including online services but also including other matters as well, and they were supposed to return to the Treasury Board Secretariat what *[inaudible]*.

So has that been received by the government, this proposal from MPI?

Mr. Pallister: I think we tilled this field a fair bit yesterday, but I'm happy to do it again. The—our government wanted to make sure there was progress made in an area where there was none made in 17 years that the NDP were in power, and so we wanted to make sure that there was a dialogue that moved this issue forward. That's why we issued a directive, which I outlined in some detail but I'm happy to review it for the member.

In July of this year, which said that—instructed MPI to engage in a conciliation process with IBAM, as has happened as I mentioned earlier in other provinces, where they've kept the relationship going because it's necessary, because it's a partnership. The insurance auto monopoly that exists in our province isn't unique. Other provinces have similar structures—not identical in every respect, but similar—and they have arrived at agreements with their insurance distributors that result—have resulted in better availability of online options for customers. That's what we wanted to see happen here.

It wasn't—it didn't appear to be either a concern or certainly a goal to have an outcome that would favour the customer with the NDP for 17 years. In fact, that administration, they actually made no progress at all. They actually entered into an agreement with the insurance brokers to pay them *[inaudible]* \$250,000 in exchange for silence around the issue. An agreement was signed; I shared this with the member yesterday, but I'll say it again. I've said that no communications would be done unless the government agreed to it by IBAM. In exchange they were paid \$250,000 each year, some of which has been reported was used to bring in *[inaudible]* high-priced entertainment. Tom Cochrane was one—very

talented artist; k.d. lang another; Burton Cummings on a third occasion. There were others as well. Highly expensive videos were produced featuring David Schioler, who was the past head of the Insurance Brokers Association, parachuting down to the Parliament buildings in London. I don't think he really did. I think it was—there was some computer magic involved in that, but it did cost quite a bit for that computer magic, and the taxpayers and ratepayers of the province had to pay for it—\$250,000 a year.

So that was the deal. The trouble with that whole deal was there was zero progress made on, you know, online availability of insurance products for 17 years. So that's what we're trying to change. We're trying to make sure that we have IBAM people meeting with the MPI people with a conciliator there so they can work it out and then make services available without IBAM being paid for silence a quarter of a million dollars a year, which isn't a—wasn't a good defensible thing to do then and we're not going to do that now.

Mr. Kinew: If the Premier (Mr. Pallister) is confident in what he is saying, he should be able to answer this question directly.

Did Manitoba Public Insurance come back to the Treasury Board Secretariat with a proposal?

Mr. Pallister: Well, I'll have to clarify for the member that it's not up to the government of Manitoba to negotiate with MPI over the provision of insurance products. It's up to MPI to negotiate with the insurance brokers for the provision of insurance products, and that's the negotiation and that's the conciliation that we're focused on having happen. So the NDP entered into this dialogue by agreeing that they would pay IBAM \$250,000 every single year so there would be no communications coming—David Schioler and IBAM—that the government didn't agree to. That's right in the contract they signed in 2011.

Secondarily, during the last few years of the Selinger government, the commissions to the insurance brokers tripled versus the cost-of-living index.

In one of my first discussions with the Insurance Brokers Association, I was told in no uncertain terms by a senior member of their executive that the NDP had treated them really, really well, and I had a tough act to follow if I became Premier. That was what they told me.

Now we have no online insurance services available to people in Manitoba thanks to 17 years of NDP inaction on the—on this initiative, which is

important. None, no progress at all, and the member takes exception to the fact that we're trying to make progress happen by having a conciliator come in and get MPI and the insurance brokers talk to each other, when they wouldn't do it for years under the NDP because they didn't have to. And they didn't have to because they had an agreement to get paid to not agree. That's what the NDP did. That's how they ran the show and Manitoba Autopac customers are the worst for it.

So we're trying to address the situation, and the reality of the situation is that under a conciliation strategy we have a far better chance to do that than under a strategy of paying IBAM \$250,000 a year, which was the strategy that the NDP seemed consumed by while they were in office.

Mr. Chairperson: I would just like to inform the committee that as part of ongoing efforts to update the Legislative Assembly's educational video series, the proceedings of this Committee of Supply are being filmed from the gallery this afternoon. Thank you.

Mr. Kinew: Do I have to speak in old English and with an English accent now too? The—show the Westminster parliamentary system. How dost thou justify their cuts to the health care, whereas?

Maybe we'll stay away from Health. We'll stay on MPI for the time being.

But want to remind the First Minister that I wasn't talking about the conciliation yet, though I assume we will touch on that. But this had to do with a directive from the Treasury Board Secretariat, which says that, again, this is not about their negotiations and what's now become a conciliation with the insurance brokers. This is specifically about how MPI runs its own shop, and the direction was for MPI to develop—and the language I'm just reading here is from the order here—to develop a comprehensive proposal for improving service delivery, including online services and then to return to the Treasury Board.

* (16:00)

So the First Minister has made a number of elucidations and comments, but he hasn't actually answered the question as to whether that proposal came back, whether the proposal came back to the government.

So again, I would like to ask the Premier (Mr. Pallister), again, whether the Treasury Board Secretariat has received this proposal from Manitoba Public Insurance.

Mr. Pallister: Well, again, I'll repeat to the—for the member's benefit, I hope, finally, that the ultimate result of this, which I hope we could all agree with, is that Manitobans had the chance to do more of their Autopac business online, which they haven't had the chance to do.

They haven't had the chance to do it because over the years of the previous administration there was no progress made to make sure that they could do it. There was no progress made, at least in part, because IBAM was paid \$250,000 a year not to have progress made, and they were quite satisfied to see their commissions triple over the final years of the NDP government, triple above the rate of inflation.

That was the structure in the previous government. Brokers paid more, plus some hush money to be quiet, and the government didn't get any complaints from IBAM at all. This was the deal. It didn't result in any services available at all for Manitobans online for Autopac. What we're doing now is we're addressing the problem. We're addressing it by creating a situation where the two parties that need to work together to reach resolution are at the table, and the conciliator is involved because we want to see progress made.

And we believe that the relationship's important in its long-term benefits to Manitobans because there is a partnership existing in every other province that has an auto insurance monopoly between private sector delivery of the service and availability of it, not just in remote communities, but that would be a good example I think, a practical example, where people are able to access services, and to have questions answered by human beings in their community, but in urban communities as well like Brandon and the city of Winnipeg where many people count on Autopac services but don't necessarily get satisfactory services doing a transaction online if there's a problem.

If there's a problem, they want a person to help them. If there isn't a problem, they should be able to do it online, and that isn't the case now. We want to change that so that people are able to get those services at a good price available to them conveniently. That's not happened under 17 years of NDP government with the conciliation process. And we issued a directive for that process to be undertaken with clear principles in place, with a goal of improving future service delivery and modernizing service delivery options.

That, I would hope we'd all agree, is an important thing for Manitobans to benefit from as Saskatchewan

autopac, or not autopac in their case, but auto insurance, customers get the benefit from—same thing in British Columbia.

The terms of reference we laid out are clear. The objective: reach agreement or written letters of understanding to address the development and introduction of online services relating to motor vehicle licencing and insurance in Manitoba. Principles to be applied: there are a number of them; I'll outline in more detail the next opportunity what those principles are.

Mr. Kinew: So I often, you know, in public settings like this one, I like to follow the rule of three. In this instance I've asked the First Minister three times a direct question: did the Treasury Board Secretariat receive this proposal back from Manitoba Public Insurance that they'd asked for? And three times, the Premier has refused to answer the question.

And so I suspect that the reason why he doesn't want to answer the question is because, in fact, the Treasury Board Secretariat did receive a proposal from MPI about modernizing the way they deliver services.

And here, for the benefit of the member for Brandon West (Mr. Helwer), is a rationale for why I'm arriving at that conclusion. If MPI had not returned to the Treasury Board Secretariat with a proposal, then the Premier would share that information with the committee today because it would perhaps lend some credibility to his position.

However, it seems likely that that's not what took place. In fact, what seems likely based on the Premier's nonanswers, is that they did in fact receive a proposal and either the proposal was rejected or it was ignored.

So I'd like to ask the Premier, did he reject a proposal from Manitoba Public Insurance that was received by Treasury Board about modernizing the way they deliver services?

Mr. Pallister: Well, again, the member's got that black helicopter hovering over his head and he's ready to make some kind of innuendo case as to something that hasn't happened. The fact of the matter is what didn't happen that matters to Manitobans is that we didn't, under the NDP for 17 years, see any progress on online availability of auto insurance products, which we are now going to see progress in.

And, again, if the member wants to get into innuendo, I could ask him, why is it that he has an

active licensed insurance broker in his caucus that has not declared a conflict of interest? And how is it that over 17 years of NDP government, the vast majority of the time, he had a member in caucus who's actively engaged in the insurance industry in Autopac dealing who was there and, presumably, was influential in the caucus as a long-time serving member, when the government made zero progress in developing online Autopac availability? Isn't there an apparent conflict of interest here that the member should now address, I mean, if he—and this isn't innuendo, this is a fact. You know, the member's speculating and creating imaginary hypotheses, I'm asking him to take action and address a real potential conflict of interest for his own caucus today that was there for most of 17 years when the NDP was making no progress on this issue at all.

This is not—it's not a good appearance; it's not a good reality. They have an active insurance broker engaged in the business of selling Autopac who, potentially, could have been arguing against MPI entering into the fray and competing with him at a cost to his business potentially. I hope the member would agree with me that this is a dangerous situation to leave your caucus vulnerable to, and I would hope that he would take some actions to address it.

Mr. Kinew: So, again, the Premier (Mr. Pallister) may not be familiar with it, but it's called logic, it's called deductive reasoning where you look at facts and then you make, you know, certain judgements about those facts and you conclude what the likelihood of a given scenario is.

So again, it does seem like there's a high probability that there is a proposal that the government has received. Premier's not interested answering the questions about that, so here's the reason why the question is important to answer, though: if the government received a proposal and rejected it, and then went so far as to order conciliation between the public insurer and the Insurance Brokers Association of Manitoba, Manitobans have a right to know what was in that proposal and perhaps evaluate for themselves whether that would have provided a better outcome than the one that the government is currently steering this process towards.

So I do think it is a legitimate question to ask and it's one that, you know, the public has a reasonable right to know. So again, I would ask whether there was a proposal and, if so, did the government reject the proposal for Manitoba Public Insurance on modernizing the way they deliver services?

Mr. Pallister: The member references the public's right to know—the public has a right to know why the NDP made zero progress for 17 years, while they had an active insurance broker in their caucus, on getting online availability of insurance products. The public has a right to know that. They don't know. That's a fact. The public has a right to know—I agree with the member.

The public has a right to know why the NDP promised they wouldn't raise taxes and then did so thereafter. The public has a right to know that, too. The public has a right to know why the NDP said they wouldn't raise taxes and jacked up car registration fees by hundreds of dollars in every family. The public has a right to know. The member, though, makes a false assertion about steering towards; he alludes to somehow a predisposed outcome—that we're predisposed to an outcome when, in fact, if he would simply read the terms of reference of the appointment of the conciliator, he would know firsthand that there is absolutely no predetermined outcome whatsoever for a conciliatory-led discussion. A conciliatory process that will arrive at a conclusion can only be arrived at by the partners in the discussion under the leadership, we would hope, of an experienced conciliator. That's what we're trying to do and that's what we're trying to achieve.

* (16:10)

So this is how we enable the better availability of online services. Not by doing nothing about it for 17 years while you have an active insurance broker sitting in there, influencing your colleagues. That's not the way to do it. Public has a right to know, and the public will know when we have better online services available as a result of this process, that we're serious as a government about accomplishing something the NDP never did in 17 years.

Mr. Kinew: I didn't use the term predetermined outcome, but I'm glad the First Minister characterized his actions as such. I'm sure that'll be useful for us to return to at a later date.

Again, what I was saying in the previous question is that they—meaning the government—steered this process towards conciliation. The question that I would like to know: In an attempt to ascertain whether the best interests of the average motorist out there, paying for Autopac is being served, is whether an alternative course of action was available to the government? And I think the best way for us to be able to ascertain whether there was a better alternative to the current situation that we're in, is to know whether

or not the Treasury Board did receive a proposal from MPI, and whether the Treasury Board Secretariat rejected that proposal, or quashed it, or whatever term of art you want to use.

So, again, I would like to know whether the Treasury Board received this proposal from MPI and, if so, did they reject that proposal?

Mr. Pallister: Well, the best interests of the public is what the member referenced in his preamble, but the NDP has never taken the best interests of the public into account on their decision-making processes, or they wouldn't have seen, for example, \$15 million in a series of six different untendered contracts result in awards to a personal friend of Steve Ashton; wouldn't have seen a non-tendered purchase of a STARS helicopter that, according to the Auditor General, cost three times as much as Saskatchewan paid.

The interests of the taxpayer—the member refers to it loosely and lightly in his rhetoric, but the fact of the matter is that's obviously not the concern the member feels in his heart, or he would take serious action already to eliminate the conflict of interest situation that is in his caucus today which was there for most of 17 years under the previous administration when they failed to any action, when they failed to address the issue of online availability of insurance products.

We are addressing the issue. We are addressing it through conciliation, because the partnership between the distributors, the private insurance brokers and the producers of the products has to continue, and it has to remain and go forward because there are other things that we will need to do to make sure in this province that Autopac services continue and are at a reasonable and an affordable cost to Manitobans.

And those things will be better served through a partnership approach and a conciliatory approach than they will by ignoring the problem which is what, again, he did for 17 years while in government.

Mr. Kinew: So it seems pretty clear, the Premier's (Mr. Pallister) not interested in answering some pretty reasonable questions about this alternative proposal that he asked for from MPI, and it seems likely that MPI provided it to his government.

So there's another point related to MPI, I guess, and other Crown corporations as well. We could perhaps changed tact a little bit. During the recent election campaign, the Premier announced finding \$200 million worth of properties and assets to sell off. Just wondering whether that \$200 million figure, that

extends to Crown corporations like Manitoba Public Insurance?

I'll just repeat because I think I'm still recognized by the Chair. Just having overheard, maybe, a request for clarification.

Just—there was a commitment during the campaign made around selling off assets and properties. The dollar value assigned to that was \$200 million, so I'm just wondering whether that applies to Crown corporations like MPI, or is that strictly within government proper, excluding Crown corps?

Mr. Pallister: We're talking about core government in that reference, but I wouldn't dismiss out of hand the work that is already ongoing in various Crown corporations to better manage their assets. I would think that that would be—we'd expect to see all of our Crowns undertake. That being said, *[inaudible]* foreign government.

That's it. Do we need a signal? Do we need a signal?

Mr. Kinew: Okay, thanks, Mr. Chair, and I thank the Premier for his answer.

Okay, so, there's some possibility then, I guess, of divesting properties from MPI, so I guess we could perhaps return to that at a later date.

One of the things that I have noticed over the past few years, and then just to signal a broader change in topic here, would like to ask about Manitoba Hydro for a little while.

So Manitoba Hydro—there's a number of reviews under way and they have been announced, some of which have been reported back, others, I guess, are still kind of open. I'm wondering if the Premier can just perhaps begin by just providing a status update on listing the various reviews of Manitoba Hydro that are currently under way.

Mr. Pallister: I'll undertake because I think the member raises a very important question in respect of Hydro review, but I don't know that we have the document right here that I would like to refer to, not in sufficient detail anyway. I'd like to give the member a better sense of the work that would be undertaken and so on, so I'll undertake to get a more fulsome background to be able to give him a full and complete understanding of the nature of the review of Hydro and what it entails. I have some overview points, but I don't think it would be adequate to respond sufficiently to what the member's raised, nor to the degree of importance of the review itself. So, I'll

undertake to get more information to the member. If it can be done today, I'd certainly look for that.

Mr. Kinew: Okay, so, you know, I guess we can move on if that's sort of what the Premier (Mr. Pallister) is hinting at there. But just before we do so, could we just clarify what the undertaking is?

The question was: Could you provide a list of all the various reviews and inquiries and commissions that are examining Manitoba's Hydro? Seems to be quite a few. So, is that the undertaking, just to provide that list of all those various reviews in operation?

Mr. Pallister: I guess I'll try to—the member will have to offer me better clarification on what he's asking me for. I can give him clarification on what I'm providing. I—there's a review which was previously announced which had tentatively had Gordon Campbell leading it, who will not be leading it, which I am attempting to get more detail on the nature of the review, so that I can share with members of the committee what the work is that's going to be undertaken.

But, essentially, I'll just say this is to take a look at the major projects of the last few years which were the Keeyask Generating Station, the Bipole line, just to ascertain how we can do a better job in future when we undertake such projects going forward. So there's that.

I think the only other review I'm aware of right now that the member might be referring to that's being done in addition is a Hydro internal review by the new chair of—or CEO, if I'm using the right term, CEO of Hydro on a 20-year strategy. And that's—that one would be best, I think, shared by the CEO of Hydro, rather than me, but the internal review is the one I would undertake to get more detail for the member on.

* (16:20)

Mr. Kinew: Sure, that sounds good, and I think we are on the same page in terms of understanding what each other's talking about.

So, just returning to the first point there, which I think the government referred to as the economic review of Hydro, so who is in charge of that right now?

Mr. Pallister: The appointment of the new lead on that is being finalized and I'll share with the member at the earliest possible opportunity, but I—just to, maybe for the—possibly for the benefit of all members, just a bit of an overview before we get the—more of the greater detail on what's involved here.

This is, as I mention, an economic review of Bipole III and Keeyask generating station, and the idea here was to take a look at and examine in detail the planning processes, the decision-making processes, the determined strategies that were used because, as we all know, these projects were massively over-budget, right? So we've got to learn from the process through a review.

Also, the management—the project management aspects, as well, that led to the development of these two projects. They're major projects and we need to learn from the exercise that was engaged in so that when we go forward we aren't making the same mistakes, but if we—if there are things that were done well, we need to do those again. So, frankly, it's important. It's—the idea here is to make forward-thinking recommendations on how to strengthen these processes in the future.

I would mention there are—have obviously been questions asked on both projects that need to be part of this review in a time of low market prices. What led to, you know, the declining demand for electricity climate with higher alternative availability of power elsewhere? Why—how did the decision-making process arrive at this as being an investment that Manitobans should make?

Bipole III—well-publicized concerns about the route, where it should have gone, the process about how it was determined—all of this needs to be reviewed so we have a better understanding going forward.

And I referenced earlier the cost overruns which were significant in terms of the economic expectations for projects. You know, you're doing the work, you're doing a projection on what might make sense based on certain estimates of investment. Those investment expectations were significantly different in reality from what was anticipated. So what would the rate of return on this project have been in theory? X—in reality, X-minus.

The impact on Manitobans of these significant investments, well, would be that, of course, because we're all the owners of Manitoba Hydro, that this is cost overruns on a project, for example, are going to lead to higher rates for Manitobans.

So it's important that we develop clear and well-informed energy policy going forward and objectively assess how we can meet our energy needs here in Manitoba as a top priority. That's what Manitoba Hydro was built for and built for us, but its mandate

has grown and eroded somewhat in terms of its focus on Manitoba Hydro being Manitoba's hydro source for lower rate hydro, and it's gotten into now international marketplace pursuits, which need to be evaluated in the context of these projects.

So this is not going back beyond these two. It's not—I want to be clear: it's not going back to Churchill Falls or Seven Sisters. This is not what we're talking about here. We're talking about these two projects specifically, and the idea here is to make sure we learn from our past strategies and that we don't repeat the mistakes of the past through this review.

So there had been other reviews. The member is aware, certainly, of some commissioned by previous board chair. There have been—there's been considerable debate around these projects in the run-up to them being done and so on, but that's, again, beyond the scope of this review. This review is there to look at how we did the projects, not how we decided to do them in terms of general public debate or that type of thing.

So, this will be an independent review, and I—that's a starting point that I've undertaken to get the member better—a better answer to his questions than that, and that's just an attempt to kind of give an overview for members who may not have been aware of the background position.

Mr. Kinew: So, this economic review, Manitoba Hydro, it was announced a while ago, and you know, some time has passed. Premier's (Mr. Pallister) shed a bit of light onto the terms of reference. One thing that wasn't clear to me in terms of the announcement or the terms, though, is whether they've produced an interim report.

So I'd like to ask the Premier whether the economic review has produced an interim report, and if so, whether he can share that.

Mr. Pallister: Yes, Mr. Chair, and thank the—and I thank the member for Fort Rouge (Mr. Kinew) as well, because this is a—this is massively important for us to discuss and learn about. Manitoba Hydro's debt will pass the debt of the Province, you know, in the next four or five years. It's really a significant asset for us, as a people, and continue to be for decades to come. So it's been very, very important, we've learned, how better to manage it, and that means review.

I did—I've been given a copy of the terms of reference, so I can elaborate a little bit more. On the member's question, though, about preliminary work, there's no interim report, but there was some

preliminary work done to set the stage for the beginning of the project, so that work was done, I think, largely by Manitoba Hydro research? Partnership. So who else was involved besides Manitoba Hydro? Well, co-ordinating government records. So there was some work already—preliminary work done to set the stage for the research project to hit the ground running, so just, really, start-up background information to start their work.

As far as the commissioner's terms of reference, I can share some of that with the committee. And this is all on the government website, so you're—you'd be able to get this off the orders and council piece of your website. You'd be able to review it yourselves, but—heck, we're here, may as well share some of this with you.

The commissioner is asked to inquire into the following matters, and then the document outlines a number—not for the rest of the day, but there's some that I think are important to understand.

With reference to the actual or proposed in-service dates of Keeyask and Bipole III, to what extent did Manitoba Hydro pursue these two projects when they were not necessary, or not necessary at the time to meet the province's then-anticipated electrical needs in a timely and cost-effective manner? Number 1.

2 With reference to Keeyask and Bipole III, to what extent did the directions that the government gave to Manitoba Hydro: (i) promote economy and efficiency in the generation, transmission, distribution and supply of power in the province; (ii) result in Manitoba Hydro having to address matters beyond its statutory mandate?

3 To what extent were the estimated net benefits projected at the planning stage for Keeyask and Bipole III: (i) determined in accordance with best practices then applicable for such projects; (ii) demonstrably superior to the estimated net benefits of proceeding with other options then available for addressing the province's then-anticipated electrical needs in a timely and cost-effective manner; and (iii) based on sound export market forecasts?

4 What extent did the Keeyask and Bipole III planning and approval processes of Manitoba Hydro and the government, and any other applicable approval or review processes, appropriately: (i) evaluate the commercial risk associated with each project and the risks of the two projects

proceeding concurrently; (ii) assess the allocation of the risks among those involved in the construction of the projects; and (iii) consider the immediate and long-term fiscal implications of the projects for the province and Manitoba taxpayers and Manitoba Hydro and its ratepayers?

5 Given the magnitude of Keeyask and Bipole III and the timelines necessary to complete them, to what did the oversight process that was followed after these projects were approved: (i) reflect best practices then applicable for such projects; and (ii) mitigate the associated commercial risk and accommodate changing circumstances as they occurred? This is all in terms of the inquire aspect of the study.

* (16:30)

Secondly, the rest—the terms of reference asked for recommendations to be made about the following matters: 1 How should Manitoba Hydro's and the government's oversight of any similar project proposed in the future, including the planning, approval, procurement and construction processes for the project, be strengthened to ensure that (i) there is appropriate transparency and accountability for decisions; and (ii) the commercial risk associated with the project is appropriately evaluated and allocated both on an individual project and on a systemic basis; and (iii) the financial and fiscal implications in the project for Manitoba Hydro and the Province are assessed in an appropriate and timely manner?

There are just a couple of other items, Mr. Chair, but I see you're going to cut me off. So I'll just delay those for a second.

Mr. Kinew: So I'm guessing, then, that there's not going to be an interim report. It's just going to have this commission take place and then they'll report back with their final report.

Not a hundred per cent sure, but I think I recall correctly, isn't it supposed to report back later this year in terms of the timeline? So I guess that the Premier (Mr. Pallister) could just confirm the timeline—first part of the question—and then the other part is just, when will we have an opportunity to see this? Will the Premier—if the report is returned before the end of the year, can the Premier tell us whether he'll release it publicly, by year's end, also?

Mr. Pallister: That was—great questions. The—I would anticipate there'd be a delay because there's been a delay in appointing the commissioners doing the work. So the original order-in-council called for a completion of the inquiry and a final report on the

assumption of earlier start. But because of the—and the member knows the issues around former Premier Campbell, so I won't elaborate on those. Just to say, because we're replacing the person who is going to lead the work, these timelines will have to be re-established.

On the issue of a public release of a report: absolutely.

Just maybe, if I could, I'll just finish up. Knowing the members are deeply interested in the final items on the description of the work, here, I'd best proceed with those. Should Manitoba Hydro's statutory—and these are, again, on the recommendations category—should Manitoba Hydro's statutory mandate be clarified to ensure that decisions concerning any such future project are in the best interests of Manitobans? 3 Should the planning and approval processes for such a future project include additional regulatory approvals or an external review, and, if so, what form and manner should regulatory approvals or external review take? 4 If such a future project is approved to proceed, how should the project oversight processes be improved so that: (i) changes in circumstances are accommodated in a timely and cost-effective manner; and (ii) verification is carried out at appropriate junctures to ensure that the project continues to be in the best interests of Manitobans? And, finally, 5 Are there prudent steps for the government and its Crown corporation Manitoba Hydro to take to restore the corporation's financial health, given the government's ongoing obligation to ensure that provincial finances are managed responsibly and that Manitoba has an attractive investment environment?

So that is—there's an overview for the member and, again, this information is on oic.gov.mb.ca/oic, Orders in Council website, October 10, 2018.

Mr. Kinew: Oh I see.

An Honourable Member: O-i-c.

Mr. Kinew: Bad joke and pun.

So I guess that gives us a rough timeline for new year, I'm guessing, since the end of year was in the timeline.

In terms of the economic review, there's the internal review that the Premier (Mr. Pallister) mentioned during the undertaking. I'm curious to know, like, is that going to be something that the government gets briefed on? Will that come to government once it's completed? What's the process there? If the Premier could spell that out a bit to—and

let us know what that internal review will look like and whether we might have access to that as well.

Mr. Pallister: Yes, I—it's a good question. I would expect the minister to be briefed, and I would also expect that Ms. Grewal will be presenting at the Public Accounts. It would be a good opportunity for members to question her about the nature of her study. And it seems on the surface of it at least there'd be some synergistic advantages to have—to be derived by reviewing the work that is being done with the study I've outlined in advance or in—as part of preparation of the 20-year plan which is what Ms. Grewal has undertaken.

Mr. Kinew: Can the Premier tell us, you know, there's a process to bring on this new CEO. Can the Premier talk about when he met with the CEO and sort of what the discussions have been like at a high level, without getting into any sort of confidentiality, just tell us what's the nature of the relationship there?

Mr. Pallister: Yes, I won't reveal the nature of personal meetings, but I will say that there's a process. There's a competitive process, a fair way to put it, yes, a competitive process of recruitment. There was an interview process that was led by the board, and I would suggest that their work there was—I guess I would have to say well done. I certainly have in my interactions with the new hire, I would say a very impressive person. And again, I wish her well in her undertakings, and we will certainly endeavour to make sure she's available to members—all members of the House for questioning on a regular basis on issues of interest to members.

Mr. Kinew: As I guess we both alluded to is, like, one of the actions that the CEO has taken is to launch this 20-year review. And certainly we've already touched on the reporting back part of that and, you know, I do take seriously the fact that the Hydro CEO does come to committees of the Legislature and we—and, you know, at some point in the future we'll get a chance to ask some questions and to hopefully be able to review the 20-year plan before we do so. I know my colleague from Fort Garry will definitely have a keen interest as our Finance critic.

But I'm curious to know, since the Premier has reviewed and, you know, set out some of the interactions that are to take place between his government and Hydro, the utility, both in terms of, like, legislating some rules around the interaction and then also setting out some Cabinet orders. I'm wondering whether any of that applies to this report. I'm wondering whether any of that replies to—whether

any of that applies, rather, to this 20-year plan that the CEO is undertaking.

So, specifically, I guess what I'm getting at is Hydro will conduct this review. They'll develop their 20-year plan. Can the Premier then explain does that come to government for approval, or will those briefings with the minister be for information only?

If the Premier can just sort of spell out the interaction there in terms of the plan. Does it get approved at Hydro only? Does it come to the government for approval? Can the First Minister explain that process?

Mr. Pallister: I would say not entirely exclusively. I'm trying to explain in relationships that are not as simple as this, but generally speaking, the president would interact with the deputy minister of the Crowns department. The minister interacts with the board. But there—that doesn't preclude other dialogue or other discussion happening as well, so that—in answer to the member's question, I guess I would say it's an exchange of information, and there would be an ongoing dialogue among all parties in respect of these issues.

* (16:40)

As the member knows, who passed two years ago now, the Crown governance act which gives clarity to the relationship in terms of the ability of the government to ask questions and to be—to demonstrate its accountability. Ultimately, the people of Manitoba will hold to account its elected representatives on decisions made in its Crowns, and so this is to give clarity. In part, the purpose of that legislation was to give clarity to that relationship so that basically the buck stops with the elected officials.

Mr. Kinew: So based on that answer, just for greater clarity, so because the buck will stop with the public officials, the public officials will have the final say on approving the plan. Is that a fair characterization of what the Premier's just said?

Mr. Pallister: So you can go to—you have to enter h-t-t-p-s, or no, does that just happen? www.web2.gov.mb.ca-law statutes, whatever, and you'll find the Crown Corporations Governance and Accountability Act, and it outlines in—gives clarity to what was unclear before.

So, for example, under the previous NDP government, it's hard to find the culprit. Nobody knows who actually ordered the bipole line to go down the west side of the province. All we know is

that there isn't a senior executive of Manitoba Hydro who thought it was a good idea. So, you know, that's what we know for sure. Nobody in Manitoba—we don't know is who the culprit was that actually made that decision which is costing Manitobans now, and will cost them for decades to come. We don't know.

So the idea of this is to make sure we knew who is accountable, and we are accountable as the government for the decisions around Manitoba Hydro. But I've assured the member there's a process of interaction that we would continue to pursue that I believe fairly and genuinely shows respect for all, and that's the intent of the relationship, is to give structure to it. So the Crown Corporations Governance and Accountability Act—it's on the website, you can read it. I won't read it to you; I'll spare you the pain of listening to it.

Mr. Kinew: Alright, well that's welcome, I guess. Sure.

During the campaign, the Premier (Mr. Pallister) announced, I guess, reductions for Crown corporations—targets, at least, you know, I don't know the exact word that he used. So I just want to know specifically with Manitoba Hydro, where that came from.

What was the basis of making a decision around making reductions at Manitoba Hydro? The reason why it stands out, I guess, is, you know, Hydro has said, even, you know, with the new leadership in place, has said that they have reached previous reduction targets and then they say that to go beyond that will lead to compromising safety and the quality of the grid, essentially.

Specific quote has to do with increasing the risk of public and employee safety, system reliability and reasonable levels of service to customers. So it seems as though Hydro is saying they've already made cuts and to cut further will compromise those things that I just mentioned.

So I'm curious to know where the Premier is coming from when he's setting out further reductions for Hydro?

Mr. Pallister: Hydro's—I could use the analogy of a water tower again. It's Selkirk's water tower. It's still very big at the top relative to comparable Crown corporations elsewhere that deliver public—or power utilities or public utilities elsewhere. The resistance was there before; it will continue to be there to make changes.

That being said, as far as compromising safety, there's no evidence to support that thesis. I've already made some measures happen where Crown corporations, which were sadly resisted initially by most, to have them trim the tops of their organizations. But front-line service is not impacted by these trims. And so I'd suggest to the member we're going to continue to trim at the top of the organizations.

This will include—when I say top, I include middle management in this, not exclusively the senior executive level, and that may have been the confusion on the part of some at the Hydro communication shop with their initial press release.

Mr. Kinew: So, like, and this is according to Hydro, right?

An Honourable Member: Hydro's communications.

Mr. Kinew: It says: We believe that further staff reductions would significantly increase the risk of public and employee safety, of system reliability and as well as our ability to provide reasonable levels of service to our customers. That's a quote. That's why I said our. Not my words, Hydro's words.

So does the Premier believe that statement? Does the Premier believe that statement is accurate?

Mr. Pallister: No, absolutely not. Hardest weight to lose in any business organization, and the public sector is even worse, is around the middle—hardest weight to lose, around the middle. And Manitoba Hydro is too big around the middle. And we're going to get at their middle management and they'll reduce the size of it.

And they'll get to a smoother organization—not at the front line, front line's fine—in the middle management area. And that's where we're going to go. We'll go there, and we'll go there not just in Hydro; we'll go there at MPI; we'll go there at Liquor & Lotteries; we'll go there with our Crown corporations. Because they need to be trimmed off the front line up the top. They're too big. They cost the ratepayers too much money and they're not delivering additional services. So, no, I don't believe the press release from Manitoba Hydro on the issue you just raised.

An Honourable Member: It's not parliamentary to say you, by the way.

Mr. Pallister: I apologize. I don't believe the press release from Manitoba Hydro which the member just referenced.

An Honourable Member: That's more parliamentary.

Mr. Chairperson: The honourable Leader of the Official Opposition.

Mr. Kinew: As always, I welcome your interjection there, Mr. Chair. And thanks again for recognizing me.

So what is that based on, you know, the Premier's (Mr. Pallister) previous assertion there and folksy analogy around losing weight around the middle? I understand the analogy of losing weight around the middle, but the basis in terms of Hydro's current operations that would lead him to not believe what Hydro as an organization itself has said.

Mr. Chairperson: Before we continue on, I apologize that I didn't catch that, that it should—all comments should be through the Chair rather than directed at each other.

Mr. Pallister: The spans of control is a review process that's done in every organization. What we're doing is getting back to management-to-front-line ratios that are more in keeping with other jurisdictions and more in keeping with where Hydro was during the time of Gary Doer's leadership in the early 2000s.

The growth at Hydro has occurred not in front line but rather at the top. And that is where their organization has gone. We've made some progress in bringing those layers of management back to levels that are more conducive to respecting the front line, where the front line should get heard. And more needs to be done in the area, not exclusively but principally of the middle management structure at Hydro and at other Crown corporations.

So that's the undertaking. So I want to be clear that by returning to appropriate span of control, the layers of management structures within the Hydro operation that were there during the time of a significant number of years under both Premiers Filmon and Doer, that the thesis that somehow by Hydro returning to those levels of ratios, if you will, just to assist in the thinking about the structure, you know, of X front-line workers to one manager, middle manager above in the structure, the structure evolved under Hydro to be heavier at the top in terms of those ratios—in other words, fewer people at the front line reporting to more managers.

And this structure is shifting back, as it does in the private sector by necessity and is done in other jurisdictions we are told around the world in these

types of services. So the—what we're endeavouring to do here is get back to a level of communication in the organization where the front line can be heard by managers and where also the ability to provide services is enhanced.

* (16:50)

As—so the assertion that somehow that's dangerous isn't supported by the actual operation of Manitoba Hydro at the time Gary Doer was premier, and I wouldn't suggest that there's any ability to support the assertion of the press [*inaudible*] communications [*inaudible*] Manitoba Hydro in fact.

Mr. Kinew: I think the evidence to support it is the internal expertise of the organization.

So I am curious about the spans of control the Premier is talking about. It's an idea that makes sense on its surface, but I think in order to understand it better it would be useful to know who is conducting that review.

So can the Premier tell the committee this—analysis of the spans of control within the organization—who is reviewing that?

Mr. Pallister: Well, the member will be very pleased to know we didn't engage any expert consultant from outside government. We actually had a spans-and-controls exercise led internally by our own experts in the civil service.

But the member's implied somehow that this exercise in improving communications within Hydro and other Crown corporations is somehow disrespectful to experts, and he's putting the experts at the communications department of Hydro up against the experts inside core government. And I don't think that's helpful. I think the reality is that we are—we're simply addressing the organizational restructuring that goes on on an ongoing basis in most governments, and certainly should have gone on for a number of years in the latter—especially the latter half of the NDP's mandate—did not.

So what happened was the organization at Hydro grew up top, got bigger and bigger—more managers, more middle managers, lots of managers. Not more front-line people, more top-heavy structure. What we're trying to do is get it back to a more reasonable structure so that, frankly, the emphasis should be where it should be, which is on the front-line service delivery functions of Manitoba Hydro and other Crown corporations as well.

It would seem to be a philosophy that—which the member demonstrated he believes in earlier in this discussion—that if you create more jobs in a public utility, somehow you're going to build the economy that way. And I think what's forgotten in that thesis is that somebody has to pay for that. And that would be the ratepayers of Manitoba Hydro with higher hydro rates.

Mr. Kinew: Can the First Minister share that review conducted by the civil service on the spans of control within Manitoba Hydro?

Mr. Pallister: Well, I'd say it's a pretty far-reaching exercise and it's under way, so it's not a conclusive report I could offer the member. But I can offer him comparative data, which I would undertake to get to him. That would be a starting point. There isn't really a report per se at this time that I could share with members, but I can provide more data if that's helpful.

Mr. Kinew: Sure. Yes. In the absence of a formal report as such, if there's a document that exists or that could be compiled without too onerous a workload on the civil service that just spells out some of these figures. I assume that it's a series of ratios comparing our utility with other utilities in other jurisdictions. So if that is the undertaking that the First Minister is committing to, yes, I would appreciate that.

Mr. Pallister: And I want to assure the member that I'm positive that it won't take longer to get the information because there are so few managers in government.

Mr. Kinew: Just—there's more work, perhaps, for the clerk, I guess. Not any comment on the calibre of work, but just getting the workload having been increased by one other to-do item. Yes, these are the questions Manitobans want answered. What's the clerk up to?

Mr. Chairperson: Just to interrupt for a second here. My understanding—*[interjection]*

We need to move the mic a little closer. The Premier's (Mr. Pallister) been away from it and they are having a hard time hearing upstairs, so.

Mr. Kinew: Staying on the topic of Hydro, but, again changing the focus a little bit, there was a order brought forward about a differential rate for customers living on reserve and then that's been challenged a bit by Hydro. I'm wondering what the Premier's view is on the matter for the differential rate order on reserve. Is that something that the Premier supports or is the

Premier—support Hydro's objections to it? I'm curious to know.

Mr. Pallister: I would respectfully suggest to the Chair that if he wishes me to get closer to the mic, he should do a better job of getting leg room here. It's pretty tough to fit under it, under this table. I don't know if the members have—*[interjection]* Yes, if they have any trouble or not, but I know I do.

It's really—given the process for resolving these types of issues and my respect for it, which I maintain is appropriate to do so, my personal views on this issue are of less relevance than the actual respect for the process itself, and the process is one that allows Manitoba Hydro to appeal and they are, I understand, appealing to the Public Utilities Board. I don't know the dates when that appeal might be heard and maybe you could find out for me, but there is a process there and it should be respected, so I do.

Mr. Kinew: Thanks, and so, I guess, maybe we'll return to that after the PUB process to see what the outcome is there.

I'm curious, does the First Minister intend to send new mandate letters to the Crowns now that the election has passed? Is there going to be a new series or are we to assume the previous ones apply? Or, I guess, just to clarify, the other scenario is maybe this is just an annual exercise of issuing mandate letters. So will there be new mandate letters this year or are we just to assume that the previous ones apply?

Mr. Pallister: Actually, on the issue of mandate letters, they generally—I think most provinces, most premiers, do issue mandate letters. But I would clarify the two ministers, and then the minister would be responsible for the mandate letter he or she might prepare for a Crown. I—I'm not aware that—if every province—I think most provinces do. The premiers do now issue mandate letters and it's a practice I agree with. I think it's—it increases transparency. It increases the ability—abilities the opposition to observe what the, you know, the intent of the government is. I think that's good and healthy. I think also by sharing these mandate letters with the general public, that also is good and constructive to—for interested members of the public to have more information available to them. So that's a practice I introduced in '16 that I plan to continue.

On the issue of—however, the minister in this structure presently, the minister in charge of Crown Services, issuing the mandate letters to each Crown corporation, I would—this would be a ministerial

prerogative. I would describe it that way. I wouldn't suggest that needs to be an annual exercise. That might be something that's done on occasion, you know, for the purposes of offering clarity, in respect of an agenda; and, again would suggest, though, that those letters should be available to the opposition members and available to the public, as well.

Mr. Kinew: So, I guess, fair to say maybe no new mandate letters for the time being, but maybe in the future. I guess that's a fair characterization.

So maybe we can move off Hydro for a bit and turn our attention to health care. Again, very important and—not this important, but also a large part of the government operation. So, curious to know about the clinical and preventive—preventative, rather, services plan that's been developed.

* (17:00)

I'm wondering if, to begin, the Premier (Mr. Pallister) can talk about the scope of this plan and what we can expect when this returns. I guess, in particular—there's numerous things happening in health care right now. You have phase 2 being implemented in terms of some of the previous plans that this government has announced that included consolidation and other activities there. You have, sort of, issues that we discussed yesterday around VIRGO and implementation thereof, and now we have this clinical and preventative services plan, which is being developed. I'm wondering if the Premier, he can sort of clarify first for the committee, perhaps, by just explaining the plan and what the scope is. Is this going to be kind of like a new all-enveloping plan for health care, or is this something that's replacing a specific aspect of what was previously done under health?

So just looking for some clarity from the Premier in terms of what this clinical preventative services plan will contain once it's, you know, implemented.

Mr. Pallister: I'm going to suggest to the member that the Health Minister's about 172 feet away here, at most, and that probably is the best place to ask for detail on the clinical services plan.

So, the greatest of respect, all I could possibly offer would be an overview comment and you'd want the detail, it's for your Health critic to get. Out of respect for my Health Minister, I think that's the right way to handle that.

Mr. Kinew: So I'm—I am interested in that overview comment, then, if there is some advice that the Premier can provide the committee, as to what we can

expect from this clinical preventative services plan. Again, it's my understanding that the plan's with government right now. We did see some documents which were made public during the campaign, and they said that this is with government right now.

So I'm wondering if the Premier can outline what's contained therein, even if it's an overview, as he put it.

Mr. Pallister: Well, as I said earlier, what we have to do there is we'll have to get somebody to run over to the Health Estimates and get a copy of the document from the Health Minister, and he can bring it back here and I can answer the question, but it's just as easy for the Health critic for the official opposition to ask the Health Minister answers to specific questions.

I mean, I think I could probably share with the member some information for the purposes of review that I think is important.

You know, during and prior to the recent election campaign, we made a significant commitment to invest over \$2 billion of incremental increase in funding in health care over our next term. We also made a commitment to—and there's already been, as the member knows, extensive renovation at St. Boniface, but this is to build a new emergency department at St. Boniface Hospital, hire 200 nurses, 80 more rural paramedics.

Our fingers crossed, our recruitment exercises on finding physicians have been very successful, and we just achieved last year—got the numbers—second highest recruitment of physicians in a decade in Manitoba, and we'll continue to work on that, and rather than unrecruit them with a surcharge for high-income earners like doctors, which the NDP proposed in the election, which would've created difficulty for us in terms of retaining physicians, let alone recruiting them. So we're not proceeding with that plan; we're proceeding with a plan to recruit, not unrecruit our physicians.

We're, in terms of the Idea Fund that we've proposed here and that we'll initiate, this is a \$40-million fund to generate ideas from front-line workers on how we can do a better job on improving services across the system.

Got increased hip, knee and cataract surgery commitments; I'd point out this is essential, not just because of the pain suffered by those waiting, though that is obviously the motivating factor, but because of the increased incidents of need. As the population ages, the need for these types of services grows, and

it's absolutely essential that we increase the number of surgeries.

This—other provinces are dealing with this challenge as well. Wait times, for most—in most provinces are getting longer and this is as a consequence, in part, at least, of the ageing populations across Canada, because of the Baby Boom reality. So there are more knees to repair. There are more knees that need repairing. I'm not suggesting there are more knees. There are more knees that need repair, to be clear, and more hips that need to be replaced, more cataracts that need to be removed. And so, as that demand increases, the need for additional investment also grows. And then also, the commitments that we made in respect of echo-cardiogram and ultrasound treatments—an increasing need for those as well.

In fact, it would be difficult to name a medical procedure where there is not a growing need in our province and in most provinces. This is a growing demand and this is why we are motivated to urge whoever forms the federal government to embark on a commitment to restore funding levels from the federal government to a 75-25 ratio as was committed to by Paul Martin a number of years ago and has been departed from. And this was—this is, to me, at a time of an ageing population, so critical, so that we have all provinces, all Canadians know that there is a partnership in terms of the funding levels that we can count on and trust to secure our services as best we possibly can.

So—and a diabetes prevention strategy and a stroke unit that's been needed for so long—there are many other aspects to the overarching health-care investments that are made. It's—we used to talk about, you know, in the old days, if I can call them the old days, of various provincial governments when health services as a portion of the budget were, you know, 32 per cent, 34 per cent. We knew 20 years ago that these percentages were going to escalate and they are, and so it's critical that we invest more in health care, but it's critical we do a better job of investing in health care.

That's why we're working with other provinces on procurement strategies so we can do a better job of buying equipment, drugs, various and other inputs, because we need to save money through bulk purchasing strategies that up 'til now, many provinces have resisted participating in, and it's—yes, thanks, Mr. Chair.

Mr. Kinew: So it's my understanding that this clinical and preventative services plan is currently with government right now, so I guess that means government's reviewing it. The Premier (Mr. Pallister) and his Cabinet are assessing it.

So I'm just wondering if the Premier can shed some light on what that process is going to be? Is the government going to approve this plan in whole, in relatively short order, and then it'll be a new blueprint for what they do on health care, or is this something that will be approved in parts? And are we going to see, you know, phase 1, phase 2, et cetera, roll out, as we've seen with previous plans?

Just having been equipped with the knowledge that the report is currently with government, I'm wondering if the Premier can provide guidance to the commission—or the committee here today as to what we can expect and when we can expect, you know, approval from government on this?

*(17:10)

Mr. Pallister: Mr. Chair, I have—I want to respect all parliamentary traditions here, so I'm on the edge right here, sharing some cutting-edge information with my colleagues, but if they'll swear themselves to secrecy, we can share. Okay? Pledge to secrecy.

So this public process has been—there's been a lot of consultation and Shared Health's been leading this process. And it's—the idea here is phased implementation of a variety of improvements in our system. The idea is to improve the quality of health-care services, to improve the accessibility of health-care services and the efficiency too.

So the creation—when we created the Shared Health model, the idea was to better co-ordinate among the regional health authorities their activities and to put in to Shared Health management those things that were being duplicated by the various RHAs unnecessarily. To some degree, that was an efficiency improvement, but it's also a planning improvement because we had silos, to some degree, according to expert analysis that were creating a disparity or differences in the way in which services were being delivered in various parts of the province. We don't want that.

As much we recognize that people live in different areas with different challenges around the province, we also recognize that there are some commonalities there, and it's a better organization—was the goal. So this was—the Shared Health creation was an early step in that model, and I'm looking at the

legislative assistant to health—to help me here with any additional background.

Oh, I guess he's not allowed to answer my questions for me, is he? That's where I'm at? Okay.

Anyway, the idea to use evidence-based—to guide your decision making, looking at the new member for Fort Garry (Mr. Wasyliv) who, I know, pursues that—pursued that as a trustee. You try to get the evidence and then make your decisions based on the best possible evidence you can find. That's exactly the goal here, to use the best possible evidence to make decisions.

So Shared Health had brought together nearly 300 clinical experts from all over the province. This included leaders from various professional backgrounds and specialities who have experience in delivering care in rural and northern environments, as well as in Winnipeg, and there was also consult—extensive consultation, I am told, done with indigenous communities as well.

So, again, the goal being, in a province that is—where there's a dispersed population, this is an additional challenge, but to recognize that we have better planning; that we achieve consistent availability of services throughout our province so that there be consistent quality of care throughout our province as well. These are the overall goals of this exercise.

So they set up 11 provincial clinical teams with clinical experts from various backgrounds and specialties. They had, as I referenced earlier, experience in broad range in their teams of health-care delivery. These clinical leaders on these teams are asked to apply their expertise and knowledge of our health-care system, and also to reference where they see the areas of greatest need existing. And to then, through the process, review our Manitoba data and evidence also in other jurisdictions to see if we can learn from them, and then to develop a plan that will work for Manitobans.

So this is an over—I'm giving you an overview, as I said, if you want more you just have go to the member for Riding Mountain (Mr. Nesbitt), he'll tell you in much more detail than I can exercise. But the idea here is patient-focused planning, considering needs to improve access, understanding that we can learn from best practices and other jurisdictions, and this is what the nature of this exercise is, and it's ongoing as we speak. But the idea being to deliver primary health care, understanding that that is the

primary focus of our health-care system, and it's the foundation of an effective health system.

We've continued with the planning and we'll continue to move forward with it with these teams as a structure just in time.

Mr. Kinew: Okay, well then, perhaps I can ask about some of the stuff that's in the document that the Premier's (Mr. Pallister) referring thereto, since it is public and we got the okay from the clerk also to discuss that, as it not being too privileged or advice to Cabinet.

Document refers to developing a business plan for Cadham lab. So, can the First Minister—so just as background to Cadham lab, not—maybe not everybody knows what it is. Cadham lab is, like, a—is a public lab testing facility.

The importance of it to our health-care system is that it conducts not just routine medical testing, but it also does testing for more obscure conditions, including STBBIs, of which there's a great demand, given the outbreaks related to intravenous drug use right now.

It also tests from, perhaps, more obscure conditions, perhaps, like, you know, things like blasto that people pick up from the environment, things like that. It's valuable to the public health system in terms of what it represents.

And I guess what I'm curious about knowing is that the business plan is referred there to—but I'm just curious to know, like, what is the business plan about, now that that advice is before the government? Is this a business plan or a proposal to bring Cadham lab under Shared Health, or is there some other kind of change regarding management of Cadham lab that's currently being considered?

Mr. Pallister: Well, respectfully, I'll again suggest for more detail, you can go to the member for Riding Mountain or you can go the Health Minister in the other room. That'd be the easiest way to get detailed answers to these questions.

But on—a good way to get further background would be to go on the sharedhealthmb.ca website, and it outlines the background, the plan, by subcategory; why a plan is required; how a plan could improve outcomes; how is it being developed; references some of the exercises that have been ongoing. I referenced earlier the data analysis, the consultative processes, in respect of teams, expertise and so on.

Goes into detail; you can actually, on their website, you could go into any specific area you wish and see what the next steps are. There are clinical planning workshops that are under way.

Again, I would have—I would respectfully suggest, for more qualified answers to these questions, I would use the Health Minister as my source for additional detail, rather than me duplicating what's happening in the other room as we speak.

Mr. Kinew: The reason why I ask is because the information on the new business plan for Cadham lab is not contained within the publicly available documents. So it's a reasonable question to ask for some insight at this table.

So can the Premier (Mr. Pallister) provide, at a high level, maybe without reading from the business plan itself, what is the business plan about? Is the business plan a proposal to bring Cadham lab under Shared Health?

It seems to me, based on conversations with some people in the HSC campus, that that's what it is, but just looking for some insight as to—at a very high level, that I think would be appropriate to expect the First Minister to perhaps be briefed on—what the—in general, the business plan on Cadham lab is about.

Mr. Pallister: I don't want any confusion from the member or any of my colleagues here. I'm not trying to avoid answering the question. I'm trying to avoid misleading the member, because we have a planning process that's under way, and the Health Minister may have current information I do not have.

So I wouldn't want to say it's under discussion when, in fact, there's been a recommendation arrived at that the Health Minister knows about in the other room. So this is my reluctance. I just want to be clear with the member.

As far as I know, that there was initial—some discussion. It's not contained in the—on the website, but I know there was some initial speculation, at least, about Cadham lab being structured within Shared Health, but I can't give the member a definitive answer on whether that has been conclusively resolved at this point in time, and I don't want to mislead the member in any way.

* (17:20)

Mr. Kinew: Yes, so, just to clarify, it's—yes, moving Cadham under Shared Health was considered, or is, perhaps, still even under consideration. But the outcome of that deliberation is maybe not

a hundred per cent clear at this point. So that's, you know, that's fine, I guess, for the purposes of this committee, and can leave it at that.

One of the other issues that may be tangential to this, so, it perhaps would be captured by it. One of the issues that we've heard about a ton is the use of mandatory overtime, particularly with nurses, but for other health-care professionals too. With nurses I think the concern is that at sites like St. Boniface Hospital, that mandatory overtime is being used rather than just a technique applied in extenuating circumstances where, for instance, a nurse walks into operating room for a surgery, the surgery goes way overtime, they get mandated to be there to oversee the surgery to its completion. Rather than it being used in exceptional circumstances like that, that it seems to be used as a—just like a routine human resources technique now, just to deal with the short staffing that we have seen at St. Boniface Hospital, again, keeping the examples to one specific site.

So with that in mind, I'm wondering, you know, the Premier, I think it's reasonable to expect, is perhaps not attuned to all the minutiae within the health-care system, but does at a high level share some insight and some decision-making into the way health care is managed in Manitoba, and this issue being so pronounced and so common now, curious to know what the Premier's plans are around mandatory overtime. I would like to see mandatory overtime eliminated because—except in those exceptional circumstances like a long surgery or perhaps a disaster that requires, like, an all-hands-on-deck type response. I do think it is important to eliminate mandatory overtime as a routine HR procedure because it leads to a decline in the quality of patient care. Nurses are forced to work excessive back-to-back shifts and, in many cases, forced to work back-to-back, and then with very short turnaround work another back-to-back shift, and then very short turnaround work another back-to-back shift after that. Causes impersonal, you know, difficulties around child care, and, you know, managing of families, but it also does cause issues with patient care, and that's been a concern that's been highlighted by nurses and by, you know, others in health care.

So I'm curious to know what the Premier has planned. You know, is the Premier working towards ending the use of mandatory overtime? Can the Premier (Mr. Pallister) commit to getting rid of that practice as a routine HR technique, again, you know, preserving the exception where extenuating circumstances may require some of it sometimes?

Mr. Pallister: Well, I appreciate the member raising the topic. I think the goal most certainly should be to reduce mandatory overtime worked by nurses because it impacts on the quality of their work environment, and can impact a negative way. Personally, friends who nurse who tell me that using working overtime also is—can be something they appreciate having the opportunity to do, quite frankly, so I think it varies depending on the nurse.

That being said, though, the goal here would be to reduce the number of mandatory overtime hours, and that is something that we've been able to do. But—and, again, I'm going to speak globally and not specifically, because I would suggest for more detail, talk to the Health Minister.

But on the issue of nurse overtime hours, in '16-17 fiscal, the numbers I have here: 402,453 hours, that was, again, in 2016-17 fiscal; and then '18-19, two years later, 356,812. So perhaps not as fast as we would like to see. That is an 11 per cent decrease, however, so we are reducing the nurse overtime hours on a global basis.

But as the member quite rightly points out, because of the restructuring of the ERs and that exercise of getting three that work instead of six that don't, there've been changes. Some structural changes have occurred that have impacted on ER nurses more, and I appreciate that. And I thank them for their patience as we make these changes. These are necessary changes. Other jurisdictions have made them previously with good outcomes and reduced wait times in ERs. And we're starting to see that now; only province that's seen a reduction the last two years, so we'll continue to stay focused on that.

We are also working to hire additional nurses. We have in '18-2018 we've got 200 more additional nurses over '17 in just the WRHA. So we've got more nurses hired and continue to focus on making sure that these issues such as the member raises are addressed effectively as we proceed with the necessary changes to improve the outcomes for patients.

Mr. Kinew: So I just wanted to spell out that there's a difference between this overtime—I guess we could qualify it as voluntary overtime, and then mandatory overtime when a nurse gets mandated. And, you know, the figures that the First Minister shared, you know, fall into the first category, whereas I think part of what his answer touched on and what I was really asking about has to do with mandatory overtime. And, again, there is a difference between those and mandatory overtime. Certainly looks to be moving in

a very different direction than the figures for other types of overtime that the Premier shared. Mandatory overtime, you know, it's increasing, and I've heard, you know, nurses talk about it being unprecedented and, you know, other kind of adjectives, just basically saying it's hitting a critical point—has hit a critical point and continues to be at that point now.

The basis for wanting to eliminate this as a routine practice I think is sound on a few fronts. Certainly it improves the quality of care delivered to patients, and I think we would all feel more confident if our kid, for instance, in the ER, or our loved one in the hospitals being cared for by somebody who's not over-tired and at the end of, you know, several days of being mandated. For the nurses, certainly it would help with not just work-life balance but retention and would help to prevent early retirement and the departure of nurses from our health-care system who are otherwise able to work and could be providing good quality patient care.

And then the other challenge is just to do with the overall management of the health-care system including the fiscal sustainability of the health-care system and, you know, I note that this is probably an area where the Premier shares a great deal of interest. And, you know, the rationale behind reducing mandatory overtime on that front at sites like St. Boniface is because right now we are paying double time to nurses which is what they get when they mandated rather than just paying them straight-time, you know, which certainly means that's more expensive to staff ERs and other units at hospitals like St. B in this way.

So I do take note of the fact that the Premier has said that there's a goal of reducing mandatory overtime. I think that's important. And I just ask further whether for greater specificity the goal of reducing mandatory overtime is to eventually eliminate it, to get rid of this as a routine HR practice while still preserving the exception—the exceptional cases where it may be needed?

Mr. Pallister: So I'm just—I'm informed that the stats that I'm referencing don't differentiate, and the WRHA does not differentiate overtime by subcategory so that—I appreciate the member's raising the mandatory as a subcategory; I think that's a fair consideration. He's—his preamble points out that it's necessary to have some mandatory overtime. I can share with him that be—in some cases, obviously lengthy surgeries that are unanticipated would be a good example and there may be others. Certainly the

reality is that, you know, imposing unpredictably on workers of any kind and especially, I would suggest, emergency situations in health care as an additional stress lever on workers and not something to be desired.

* (17:30)

The goal across the entire health-care system is to try keep the overtime hours to less than 2 per cent of the total, so that you're making sure that this does not rise as a practice across the system, but there are differences within our system, in different sub-departments and different regions that create, as the member's quite rightly referred to, in pockets where there is an increased presence of overtime as a management lever, some of it entirely understandable, as the member outlined an example earlier.

So it's also clearly not a goal to continue to rely too heavily on overtime. That being said, the ongoing challenges of recruiting and training—HR challenges are real. A friend of mine says the hardest part of running any operation is human beings, but that's the necessary reality in all our systems. We need human resources to provide the services our people so much count on. But in terms of some of my personal travels and meetings with people around the province, I know it's repeated that there are challenges in recruiting people to relocate to some rural communities, certainly in the northern communities, and that is a reality.

There are different factors that will impact on the necessity of overtime to varying practices being added to the services as he tries to manage through issues like vacancies, full-time, part-time ratios, staffing, scheduling practices, absences, sick time, vacation time, surges in volume and patient visits.

These are all realities that managing the health-care system that are, though not exclusive to the health-care system, they are particularly significant because of the urgency and, in some cases, the emergency of the cases that have to be addressed. It's not the same as running business operations.

When you're dealing with health care, there's significant risks and stresses attached to every aspect of health-care delivery that [*inaudible*] dismissed. There's also a number of smaller hospitals around the province that have, when they have a surge that's especially difficult—it's one thing to have a surge in demand at St. B and it's another thing to have a surge in demand at a small community hospital. So there's that.

This is—I'm giving—the member thinks he's aware, I'm sure, but the management challenges for some of the smaller facilities are really—they're real and they're significant. And sometimes there is insufficient nursing relief team capacity in some of these facilities, in particular smaller ones—rural and northern communities.

There's also the issues of patient flow, psychiatric emergency department needs, psychiatric care and, of course, just the challenges of geography. I'm not giving the member these variables to make excuses. I'm just simply saying that running a health-care system is a significant challenge anytime, and in a province like Manitoba, it places real challenges on the people managing the system, as well as the people working within it.

Mr. Kinew: Some jurisdictions have gotten rid of mandatory overtime for nurses. New York State is one example and they've gotten rid of it as a practice, while still preserving an exception for, you know, unforeseen disasters or large-scale events or lengthy surgeries, as a few examples. But they have gotten rid of it as a practice. It's led to greater efficiencies in the delivery of health care and is being pursued, I think, with an eye towards improving patient care.

So I think that that's an important goal to pursue and, you know, it can be done in a way that doesn't unduly restrict the usage of mandatory overtime in some of those extenuating circumstances, so I think it's an important goal to pursue.

I think it's important also to note that the reason why mandatory overtime has become such an issue is because of the cuts and the consolidation plan that this government has pursued.

And, in particular, that's contributed to a crisis in health care, particularly acute in centres like St. Boniface. It's also led to a drop in morale amongst nurses, in particular, other health-care professionals included, including ER docs at some of those facilities, some of which are not urgent-care centres.

So, again, mandatory overtime and its reduction is an important topic for our health-care system to pursue, but it did not arise as a result of some sort of, like, external variable or some sort of external cause. It arose—the use of mandatory overtime as a routine HR practice arose because of decisions that this government took and that this Premier (Mr. Pallister) took in particular.

So as part of this goal of trying to reduce mandatory overtime, then I think part of what needs

to be undertaken by the Premier, and I don't mean undertaken in the matters undertaken since the term, but rather just, you know, advice that the Premier may wish to consider, is to reflect on the rushed nature of the cuts and closures of emergency rooms, the attendant impacts on the human resources in those settings, and the ancillary, I guess, phenomena that we're still seeing play out in many of these emergency rooms.

So I guess the net result of the situation of mandatory overtime and some of those other factors that I'm describing is that it's very difficult for this government to now recruit and train nurses and other health-care professionals to work in these sorts of settings.

Even were the government to be serious about trying to recruit nurses into those settings, there's a bottleneck placed on the number of nurses that can be trained in Manitoba because of previous cuts that the government has made, for instance cutting the number of nursing positions at Red River College.

So, again, if we return to Dr. Peachey, you know, not saying I necessarily agree with what the consultant brought forward, but even if you accept that the government's own consultant at-in-face value with what he was saying, he said there was a lack of oversight and a lack of management undertaken by this government when it came to viewing the impact of their changes and consolidation to the health-care system.

So perhaps reframed—reformulated more directly, the government did not listen when red flags were being raised about some of these issues hitting a crisis point, whether it's mandatory overtime, whether it's staff shortages, whether it's vacancy rates.

What steps is the government taking now to ensure that they won't repeat those mistakes again as they proceed forward with the preventative and clinical services plan, as they proceed further into phase 2, as they proceed with the development of shared health.

There was a clear listen delivered. I'm curious to know what this government will do to learn the lesson that their approach to closing the emergency rooms was mismanaged and that many people with expertise on health care are saying that further changes need to be pursued a lot differently.

I'd also note that the same consultant also recommended hitting the pause button, so I wonder also whether the pause button has, in fact, been hit and

whether the government is currently taking the time to take stock of the lessons that were delivered to it and whether the government is, in fact, taking, you know, advantage of that moment to be able to guarantee improvements to health care for people in Manitoba.

Mr. Pallister: Well, I'll accept none of the preamble the member's just offered. There are 300 more nurses working now in the system than when we came to government, and the recruitment efforts continue and are successful. The same thing with doctors—more doctors, more paramedics, more procedures than ever before in the history of the province being done.

I will accept his fear argument that he is afraid, and I will accept the argument that he's advocating for failure, but I won't accept the thesis that failure is the consequence of accepting the challenges of change, and we had the worst system in the country with the longest waits and they were getting further behind our other jurisdictions and they aren't anymore.

* (17:40)

So I have repeatedly, and I will repeatedly, thank those who work in the system for accepting the challenges of change. They are telling me that they want to work in a system that works for patients. And I will tell them that other jurisdictions have created such a system, and we can too. By adopting the recommendations of Dr. Peachey and others, we are making progress. Others were making progress before us, but the previous NDP administration refused to pursue progress—perhaps because they were afraid.

That being said, we are pursuing progress out of a sense of obligation to the people of Manitoba who want to get their services in a reasonable time frame and want to have quality services. And so, again, I'll say thank you to everybody who works in the system and works in the front line, because they are now able to work in a system that works better for people.

And the fact of the matter is, in terms of achieving results through change, it's never easy and it requires courage and it requires effort. And so the member's suggestion that we should go back, stop or slow down—on alternate days, it's one or the other of those—reveals his lack of concern about improving outcomes for patients. Going slower in reducing wait times would mean that we wouldn't see the WRHA tied over the last two years as the leader in the country in reducing emergency wait times. And it is. Going backward would mean going slower on improving wait times at hospitals like St. B, where the 90th percentile wait times have improved since

the NDP left office by 14 per cent, at Victoria by 25 per cent.

So, you know, these aren't easy things to achieve, but the credit should go to the people who have advanced these changes and the people working in the system for making these improvements occur. And the credit should not go to those who advocate for stopping, slowing down or going back to a time when we were last in the country on wait times. Now we're first in terms of improvement, and that is good.

There are nine other provinces according to the Canadian institute of health insurance—health information, I'm sorry—that have reported lengthening emergency wait times—nine other provinces—and one province where the wait times have dropped. And this is from '16-17-'16-18, a two-year period. So, fear aside, what we're after here is a system that works better for patients.

And so, again, accepting the challenges of change is never easy, but the reality is that the system is working better. We've seen a 13.7 per cent reduction in wait times according to the Canadian Institute for Health Information, whereas across the country, every other province—and the Canadian average, as well—is higher. Nine other provinces. So that's the facts.

And in terms of other regions of the country, the WRHA is leading the way. They've seen an overall 42-minute improvement and this is, again, '16-18—while by comparison we've seen increases—significant increases in wait times across the country. Fraser Health is up by 7 minutes. We've seen increases in Erie St. Clair in their health district of about 12 minutes.

And this may not sound like much to some people, but if you've been in an emergency room, you didn't go for fun. Twelve minutes in an emergency room isn't fun.

So we can reduce the wait times in emergency rooms and help patients spend less time in those emergency rooms waiting in fear to get treatment—that's a great thing to do. We've been doing that.

So I recognize the member's fear. I recognize his concerns about change being hard, but I also recognize the results. And I thank the people working the system for achieving these improvements because patients are benefiting from that.

Mr. Kinew: So I think the challenge the Premier (Mr. Pallister) has is that he's sort of talked himself into a contradiction there. He is trying to cite

Dr. Peachey's advice as being good, and yet in the same answer he contradicts Dr. Peachey's advice, which was to hit the pause button.

Dr. Peachey came back earlier this year in an exercise dubbed by this government as a quality assurance process. And he said that the plan that he had proposed was going off the rails because this government was not paying attention to the changes, cuts and consolidation that they were implementing.

So, again, I don't necessarily agree with the things that Dr. Peachey puts forward, but I do just point out that this government's own source of advice told them that they were mismanaging health care and that there ought to be a pause to the process.

So I know that that's an inconvenient truth for the First Minister, and it leads him to try and mischaracterize what I'm say as if it was somehow originating from me, but it is an independent, unarguable, external fact that Dr. Peachey recommended to this government that they ought to pause the consolidation plan.

I would then note for the benefit of the committee that this government not only ignored the advice, but then they went in a 180-degree different direction by not pausing but rather accelerating the consolidation plan. And that was represented by the early closure of Concordia, and then the early closure of Seven Oaks.

So, on the surface, it would appear that the government has not learned the lesson and that the First Minister's not paid attention to the lesson that was delivered by Dr. Peachey.

We know that the health-care system in Manitoba, and perhaps acutely so in Winnipeg, is in crisis. We know that wait-times are increasing month-over-month and year-over-year. That is from the government's own statistics. We know that nurses and others who work in the health-care system routinely tell us that health care has never been this bad in the past three decades in Manitoba. And they're talking about the patient experience, not about their own work situation.

We also know that physicians who work in acute care are raising concerns and are saying that the fact that St. Boniface emergency room, as an example, is diverting patients several times a week is a serious cause for concern. That is one of the most important emergency rooms in our province, and yet it is routinely now, under this government, turning away patients multiple times a week.

Media's reported on one incident this summer, but apparently that is becoming more and more common under this government. So all these are facts that don't give me great pleasure to bring forward, but I bring forward just as evidence that there is a serious problem with health care in Manitoba.

I also bring it forward to ask, again, the question that, because Mr.—Dr. Peachey, rather, recommended to this government in his quality assurance exercise, as the government termed it earlier this year, that the government pause while an evaluation of consolidation and changes to services take place, I wonder whether that's being taken seriously. I wonder whether the opportunity to learn from the mistakes that we saw in phase 1 and the start of phase 2 for this government is one that the government is availing itself of.

And for me, you know, the concern is for sure about people who work in health care, but also about the patients who should be the primary focus of all of our deliberations when it comes to health. These are real people who are waiting longer now in emergency rooms. These are real people who are on their way to one emergency room and then are being diverted to another. These are real people whose lives are being impacted, and over and above the impact on the quality of care they received. I feel some of frustration or disappointment in all the challenges that they see.

So, again, Dr. Peachey recommended a pause, and I haven't necessarily agreed with everything that Dr. Peachey's said in the past, but accepting the premise that he said there—that the government should pause to re-assess, and importantly, to evaluate what's taking place, is the government taking that advice and implementing it?

Specifically, is the government pausing further consolidation while they evaluate the current status of the health-care system in Manitoba?

Mr. Pallister: Well, it appears that the member believes that if he simply recites the campaign rhetoric that failed him in the last election campaign, he can gain traction with it by its repetition. But the facts are these, and I would hope we could agree on these facts. For years Manitoba endured a broken health-care system which was failing patients. For years we endured the longest wait-times, and emergency wait-times were growing under the NDP. Now, if we can agree that there was a problem, I'm asking the member to acknowledge that there was a problem.

* (17:50)

Despite spending more money per capita than anyone else in the country, we were seeing emergency departments fail the people who presented at them. *[inaudible]* had more people walking out of emergency departments not being seen than at any time in the history of the province of Manitoba. We have more people getting transferred subsequent to admission in secondary facilities and getting—after waiting for hours—and getting admitted and then getting retransferred out to other hospitals than ever before. Secondary transfers are dangerous. They put lives at risk. All these problems existed while the NDP was in power, and yet they failed to act to address these problems.

Now, what the member is raising, quite legitimately, are concerns about how changes should be undertaken. But he needs to acknowledge that change was necessary and that it should have been undertaken and was not. I would encourage him to acknowledge that.

The NDP recognized there was a problem in the last days of their previous administration, and that's why they commissioned Dr. Peachey's report in the first place. So there was a recognition in the last days of Greg Selinger's term of office of the problems that I have just referred to, yet the member seems to gloss over those concerns and says we should go back. Stop. Wait. And that would mean that we would perpetuate a problem for patients, a real problem for patients who present in facilities where they cannot be seen, for patients who were walking out because they couldn't be seen—in frustration—if their conditions continue—and the reason they went there in the first place wasn't for joy. It was for a resolution of a fear or a health-care concern that they have which they considered serious enough to present at a hospital for. But they were walking out not being seen under the NDP government.

These numbers are coming down. The member likes to always refer to emergency monthly stats which go up and down—which go up and down. That's progress, because progress is not easily achieved. The member likes to highlight failure in the short-term as an example of a reason to stop looking for success to in the mid- and long-term.

But to stop looking for success, which the government will not do—we will continue to look for success in the provincial health-care system because it's Manitobans we're talking about who were walking out of health-care facilities not getting cared for. It was Manitobans who in record numbers were driving

to other facilities across the line. The NDP said they'd solve hallway medicine. They created highway medicine instead. They recognized there was a problem but didn't have authority to make the hard decisions to address the problem, to solve the problem. So now we do the heavy lifting and the member has all the answers about how we're doing it wrong. The fact is we need to continue to pursue positive change in our health-care system.

The member continues to cite anonymous reference points, you know, people he's talked to and doctors who are concerned. Look, those concerns were there and those concerns were adamantly expressed by people in the health-care system for years under the NDP administration: concerns about patients not being cared for; concerns about the quality of care; concerns about long wait times not just in emergency rooms, but for getting into personal-care homes. These issues are being addressed and are being addressed successfully. Never as rapidly as we would like, but, certainly—certainly they're being addressed and we are focusing on addressing them where the NDP ignored them.

The changes we are making will ensure there's a stronger system for Manitobans with improved outcomes and it'll be sustainable, and that is the goal. It must be the goal. So while the member says we need to do it differently, the NDP never even had the courage to do it.

Mr. Kinew: Is the Premier (Mr. Pallister) following the advice of Dr. Peachey to pause further consolidation while what is taking place with our current health-care crisis is evaluated?

Mr. Pallister: Yes, thanks. Well, again, the member chooses to misrepresent Dr. Peachey's comments. He does this on a regular basis. It is misguided and dangerous in the sense that—for himself, frankly, because he foments fear unnecessarily among people when he does this. But what Dr. Peachey said is that we recommend the original concept of clinical and preventative service plan be protected. That's what he said and that's what we're doing.

So the plan the NDP commissioned—which they did not act on and did not follow—is the one we are now being attacked by the NDP for following. That's—it seems a bit of a contradiction.

The fact of the matter is, he also recommended opening up urgent care at Concordia as a priority, opening up urgent care at Seven Oaks as a priority, and we have done those things, so we are acting on the

advice of Dr. Peachey. We will not act on fear and the motivations the member has, for some reason, of constantly spreading pessimism around about the success we're making, which the Canadian Institute of Health Information has reported on so clearly.

You know, it may not sound like much to the member, but the WRHA's reduced average ED wait times by over 40 minutes—42 minutes. Multiply that by the thousands of people that are cared for in the emergency rooms throughout our city, and consider the savings: years less. Years less spent waiting at emergency rooms by patients in our health-care system—years less.

I've only, in my life, had two experiences in an emergency room. I can tell you, from a personal standpoint, they were horrifying experiences. If we can save the average Manitoban, on each visit, 40 minutes-plus—and we'd all like to see that, and we are.

Whereas in Hamilton, Niagara, Alton [*phonetic*] and Brant, wait times are up by 13 minutes per person—in north Simcoe, the same, in Prince Albert, the same. In Edmonton, wait times are up by almost 20 minutes. Toronto central—they're up by 20. In Regina-Qu'Appelle, they're up by 37, and in Waterloo Wellington they're up by 37.

The WRHA is tied in Canada in the last two years for reducing wait times. The members keep saying they're getting longer month over month. Well, let's hope that that trend doesn't continue, because the goal we should all share is to see those wait times coming down for people in our province.

That is certainly our goal; it will continue to be our focus. And while the member does not like what we're doing, but I would hope he would acknowledge that the status quo was not acceptable to anyone, and that's most certainly I would hope that he would understand that we are very, very focused on trying to reduce the amount of time people wait in pain and in fear to get care which they so richly deserve to get.

Mr. Kinew: So again, I've said this many, many times in question period, but I'll just repeat it here at the committee for the benefit of the First Minister and others: wait times are up month over month and year over year, and they have been increasing ever since the government began to implement this plan to close emergency rooms and cut health care.

Again, these are facts. These are facts that are published by the First Minister and his own government. What is new, I guess, recently, over the

past six months, is that once the ERs in Concordia and Seven Oaks closed, that the redistribution of patients to the remaining emergency rooms has caused St. Boniface to go on diversion multiple times a week.

Again, one of the most important emergency rooms in our provincial health-care system is sending patients away multiple times a week because of short-staffing, because of issues with the mismanagement of health care, and because of the cuts that this government has pursued.

This was preventable, had the government listened to the red flags that were raised first by front-line workers, that were then reiterated by some folks inside the bureaucracy and then, finally, delivered publicly by Dr. Peachey, who in fact did very publicly say that the government was not conducting itself well by mismanaging our health-care system, and that his biggest recommendation was to pause the consolidation of health care until an evaluation of what has taken place could be conducted.

Again, these are inarguable statements. This is not partisan spin. This is what happened. This is what happened when the government's own consultant was asked to come and do an interim report. He said the government is not doing a good job.

Mr. Chairperson: The hour being 6 p.m., committee rise.

INDIGENOUS AND NORTHERN RELATIONS

* (14:50)

Mr. Chairperson (Andrew Micklefield): Will the Committee of Supply please come to order.

This section of the Committee of Supply will now resume consideration of the Estimates from the Department of Indigenous and Northern Relations.

As previously agreed, questioning for this department will proceed in a global manner.

And before we do proceed, a couple of housekeeping comments. We are short-staffed on Hansard today, so they are recording remotely. Though they are not in the room, they are recording via technology through the camera. And they do ask that we make the effort to speak a little louder and clearly because they couldn't pick up all the words yesterday. So, if we can all do that, that would be great.

The floor is now open for questions.

Mr. Tom Lindsey (Flin Flon): Hopefully, the shortage of staff is not due to more cuts by this government. So we'll carry on.

I want to pick up a little bit of some stuff from the Public Accounts that we were talking about yesterday that really, the answers left me with more questions, I guess. When we looked at the way the numbers break down between '16-17, '17-18, and '18-19, I understand part of the issue is when it was a single department reporting and then it became split and then it went back to being single.

So, just looking at the numbers then, if we leave out the '17-18 and look at the difference between '16-17 and '18-19, a community like Cross Lake is one of the glaring ones that really stands out, where there was 643,257 in '16-17, and now it's only 124,982. So perhaps the minister could tell me exactly what the money was spent on in '16-17 because she seemed to allude to it being just capital project. So what was spent there that isn't being spent anymore, I guess.

Hon. Eileen Clarke (Minister of Indigenous and Northern Relations): We'd like a clarification on your data source. Is it from the annual report or can you give us a page number? The numbers that you're giving don't line up with what we've got.

Mr. Lindsey: It's from the Public Accounts document.

Ms. Clarke: You've got a—do you have a page number to—*[interjection]*

Mr. Chairperson: Hang on, hang on. Sorry. The member for Flin Flon.

Mr. Lindsey: I don't have a page number off the top of my head, but it's year-over-year reporting from the Public Accounts.

Ms. Clarke: Okay, so we'll just advise you at this time that we don't have those Public Account details here, but that we—the staff is looking for them and we'll find a posting online because they were posted just last week, and then we can report back to you on that question.

Mr. Lindsey: Haven't—my question was specifically about Cross Lake, but there's also the same kind of question about so many other communities that are shown here, including the Northern Association of Community Councils that—how does that capital funding, which seems to be relatively stable—but then other communities themselves where the funding changes dramatically, Nelson House, for example, goes from 243 down to 187.

So—don't understand the rationale for why some of the communities, their capital funding—which is what the minister said it was—stays relatively stable year over year over year, where other communities, the funding seems to have dropped dramatically year over year.

So perhaps the minister could explain that.

* (15:00)

Ms. Clarke: Okay, I think the best explanation is, in regards to Northern Association of Community Councils, is that the council is an umbrella organization and they support the Northern Affairs communities. They don't specifically have a capital or operating maintenance dollars to run the community. They basically apply. The funding is grant funding, which is more stable, and we also provide them with funds for northern healthy foods program in the North. So their funding is based on their requests and what they're planning to do. They have different capital projects each year and, you know, in one particular community they may need something much more specific, whether it's for operating their rec program, whether they need—you referenced yesterday a fire truck.

When I was up to one of the communities just not that long ago, they needed a tractor, and they had to get it now because that's their only source of—to do the work in the whole community. So it's based on the needs of the community that particular year.

Mr. Lindsey: I struggle to understand, though, how some of the communities—if this is capital funding we're talking about—are relatively stable year-over-year-over-year, but other communities then have seen drastic reductions. If it's things that are funded through grants and the different things, then why the big fluctuation for some of those communities and not other ones?

So, for example, I look at Norway House and their funding seems to be relatively stable—704, 707—whereas Cross Lake makes that big drastic drop. So what's the difference there?

Ms. Clarke: Would you like to reference the specific communities where you want to see the variation and that way we can provide exactly what was in the spending for that year?

Mr. Lindsey: I can certainly do that. It's—your staff got their pencils ready?

All right, so, looking at particularly Cormorant, for example, goes from 353 down to 208. Cross Lake

is the big one; it goes from 643 down to 124. Duck Bay actually goes up, which is a bit of an anomaly. Nelson House goes from 243 down to 187. Pelican Rapids goes from 202 down to 194. Thicket Portage goes from 329 down to 290.

So it's just all of those communities, if it is just capital funding that—I still struggle with how some of them remain relatively stable and yet other ones take that drastic drop.

Ms. Clarke: I think when we provide you with a list of what actually was within that budgeting amount of money, you'll see a clear pattern of the projects and why it will fluctuate from community to community. The—it depends on what they need that particular year that's forwarded. So I think when you see the actual list you'll have a pretty clear understanding of why it fluctuates.

Mr. Lindsey: Well, I certainly hope so, because it really is confusing right now, that—based on the minister's explanations that doesn't seem to make sense to me as to some of those wild fluctuations when other ones aren't fluctuating wildly. But there's other things that are included in there; I guess we need to know that so that we can pursue that.

I guess we've kind of waiting for the explanation on thumb of that stuff, so maybe I'll move on or let you take a question while I get my notes back in order here.

Mr. Ian Bushie (Keewatinook): In regards to the Lake St. Martin status of consultations, recently the federal government stated that the Province needs more indigenous input regarding the project. In a letter from the Canadian Environmental Assessment Agency, it states multiple reserves and the MMF feel the Province either hasn't adequately consulted them or didn't reach out at all.

Does the minister still believe that her and her government have adequately consulted with indigenous communities on the project?

* (15:10)

Ms. Clarke: Yes, just wanted to confirm, but—consultations on the Lake Manitoba outlet channel are continuing to date. The next phase of consultation will focus specifically on the project's environmental assessment which Manitoba Infrastructure just filed in August. That consultation process has expanded much broader to the North. That was outlined in federal judgment, and they are all included in that consultation process at this time.

Mr. Chairperson: And if I can just remind all members to speak clearly for the recording that would be appreciated.

Mr. Bushie: That brings me to my follow-up question. In a response letter to a—the Canadian Environmental Assessment Agency dated July 21st, 2019, by the project director of Manitoba Infrastructure, it stated that additional meetings and engagement opportunities are currently under discussion with the communities in the North: Tataskweyak, York Factory, Fox Lake, to name a few. These communities are not in close proximity to the project, so why are they indicated?

Ms. Clarke: Originally, expanding beyond the Lake St. Martin channel area, in the consultations that were taking place with those communities, it was the Canadian Environmental Assessment Agency that indicated they wanted more northern communities included in the federal assessment.

So the Manitoba team is now working with the federal agency to assure all those communities that they'd—indicated that they wanted included are now included. So that was not a choice of Manitoba; that was a choice of the federal agency.

Mr. Bushie: So are you able to provide a list of what they define as all the communities?

* (15:20)

Ms. Clarke: Okay, there are 18: Berens River First Nation; Black River First Nation; Bloodvein First Nation; Brokenhead Ojibway Nation; Dauphin River First Nation; Ebb and Flow First Nation; Fisher River Cree Nation; Hollow Water First Nation; I haven't seen that name before, Kinonjeoshtegon First Nation; Lake Manitoba First Nation; Lake St. Martin First Nation; Little Saskatchewan First Nation; Misipawistik Cree Nation; Norway House; O-Chi-Chak-Ko-Sipi First Nation; Peguis First Nation; Pinaymootang First Nation; Poplar River First Nation; and Sagkeeng First Nation.

Oh, is there more? And there's more. These are the Northern Affairs communities: Aghaming—I won't say Northern Affairs communities for them all: Berens River, Dauphin River, Fisher Bay, Loon Straits, Manigotagan, Matheson Island, Pine Dock, Princess Harbour, Seymourville, and Norway House, and Manitoba Metis Federation.

Some of the other eight communities that were involved are Sandy Bay First Nation, Skownan First Nation, Fox Lake Cree Nation, Keeseekoowenin

Ojibway Nation, Pimicikamak First Nation, Tataskweyak Cree Nation, Treaty 2 organization and York Factory First Nation.

Mr. Bushie: Is that a final list, or is that room to, for additions?

Ms. Clarke: That is a final list; that's all the communities that were scoped in by the agency.

Mr. Bushie: Yesterday you spoke of the affected levels, basically one to four. So who determines which community gets affected on which level, or what scale?

Mr. Chairperson: Just while they're getting their answer ready, the filming is happening for the website, so everybody act normal and be natural.

Ms. Clarke: Okay. I think we did enter information. I was asked the same question yesterday, so we'll kind of repeat it.

Regarding the spoke—scope of potential 'incapax' to treaty and Aboriginal rights, a consultation steering committee is made up of multiple departments through previous knowledge of the land use and past consultations. They're basing it on that. The team also identifies the low, medium and high potential for impacts and this scoping can actually change as new information comes forward during the process, so it's evolving.

Mr. Bushie: So will all the communities you listed earlier be engaged and consulted?

Ms. Clarke: Yes, they will each be engaged—not all perhaps at the same level, but they will all be engaged specifically, individually.

Mr. Bushie: When are these consultations and engagements supposed to take place? When will they take place?

Ms. Clarke: They've been ongoing for a while, and they'll be continuing until they complete theirs.

Mr. Bushie: When will they be completed?

Ms. Clarke: There is actually a plan for each community, and it will continue until such time that each community has—plan has been completed. So there has to be some flexibility here because of different scopes for different communities. So, consequently, there is not a date or a timeline on that. It will take until they can get the information that they need from the communities, as set out by the plan.

Mr. Bushie: Is it a public consultation or is it just open to the leaders—meaning chiefs and councils, mayors, councils, reeves?

Ms. Clarke: That would be chiefs and councils, as well as communities and others.

Mr. Bushie: By others, I mean, publicly hosted [*inaudible*].

Ms. Clarke: That's also laid out in the plan—which ones will be for chief and council, mayor and council and those that are—there are those that specifically set out which ones are to be public as well.

Mr. Bushie: So are you able to table the plan?

* (15:30)

Ms. Clarke: Some of the plans are complete at this time. Some are still in the process. So if you would like—if you could define what you would like, like if you would like one that's specifically for First Nations, one that's for a northern affairs community or that type thing, if you could define which plan you'd like to see, that wouldn't be a problem.

Mr. Bushie: Is it possible to see a plan for each community?

Ms. Clarke: As I've indicated, some are still in the process, so they haven't been completed.

Mr. Bushie: But upon completion we can see the engagement plan for each community and consultation?

Ms. Clarke: Yes, these plans can be—you can request them. They're not publicly posted but they're—they could be available to you, if you wish.

Mr. Bushie: Will the minister be involved at any stage in the engagement process?

Ms. Clarke: I actually attend whenever possible. Very often, though, we've got very capable staff that does this consultation engagement process and typically it's done when we're in session and I'm not allowed to leave during that time frame of course.

But typically over the past three years I've attended, whether it's consultations, even meetings, any of those types of things, I always attend when I'm available. I attend things that typically ministers of this department have never, ever attended. And I try to engage with the chiefs and councils as well as the mayors and councils, as I said. I actually travel to the communities and I have one-on-one meetings with them.

So when they—if they have issues with, you know, if, say, it's a consultation or anything else that our government is related to, they have every opportunity. And I actually have a lot of chiefs and councils or others within the indigenous portfolio that come here for meetings now which didn't typically happen either. So we give them a lot of opportunity, well beyond the consultation process, to engage with myself.

Mr. Bushie: So when you spoke about the reports being available but not public documents, you also didn't explain when they would be ready. So how would we know when to ask for them?

Ms. Clarke: As I indicated, there are several that are ready at this point. And you would just have to inquire back as to when they become available, not a problem.

Mr. Bushie: Other than the communities you identified, were there other stakeholders that were recognized in this consultation process and engaged?

Ms. Clarke: I'll just point out in our department, we're very conscious not to use the term stakeholders when we're working with the indigenous communities on consultations. They are rights holders under the treaty, section 35 of the constitution.

Consultation occurs with treaty rights holders. First Nations and Metis have Aboriginal and treaty rights, as I'm sure you know—consultations intended to learn about the impact on treaty and Aboriginal rights so that the Crown can ensure that there's proper mitigation.

Mr. Bushie: In regards to the reports of the 'consturnans' that are already completed, could we request that those be made available to us now, then?

Ms. Clarke: I did indicate that they are available to you, but—not in this meeting, but they are available from our department. Absolutely.

Mr. Bushie: Page 36 of the Estimates book, it states, under expected result, that there will be a, quote, completion of interim consultation report for the Lake Manitoba and Lake St. Martin permanent outlet channels project.

What stage is this report at?

Ms. Clarke: Just while staff is looking for some of the information, you asked yesterday how many separate meetings were held, including Hydro, clean environment and Sustainable Development in the course of the consultation process for the Manitoba municipal transmission line.

So, between Sustainable Development, clean environment and Manitoba Hydro, there have been approximately 207 meetings that have taken place with indigenous communities. And the breakdown is as follows: There's been 47 meetings, section 35, Crown consultation, between Manitoba Sustainable Development and the communities. Forty-one of those were with leadership and six were community sessions.

* (15:40)

With Manitoba Hydro engagement meetings with the indigenous communities—there've been 140 meetings; 90 were prior to filing the environment impact assessment and 50 after that was filed.

Clean Environment Commission meetings the days of the hearings: there was 20. And Clean Environment does not meet individually with the communities, but there were 20 days of public hearings that were held.

You had also inquired about indigenous representatives on the clean environment and the national energy board panels with MMTP, and the clean environment panel for MMTP was composed of four members. One of those was an indigenous gentleman, Reg Nepinak, who was the commissioner.

Reg is a member from the Pine Creek First Nation, and he continues to work with Aboriginal families as well as youth, mentoring them in traditional living and values. He's worked as a program manager and guidance counsellor for Pine Creek, and after a decade of working in Calgary in Aboriginal child and family services, for 20 years prior to that, he specialized in explosives, radioactive tools and directional drilling in the oil industry.

So that's the outline of the two questions that you asked yesterday for information.

Mr. Chairperson: Honourable Minister.

Ms. Clarke: The report you inquired about, the interim report's currently under review with the project's consultation steering committee, and this report is intended to inform the next phase of the consultation specific to the August 29 environmental assessment, and it would—it's indicated that this should be completed by the end of the fiscal year.

Mr. Bushie: In a letter addressed to government, the communities say they discovered a 23-kilometre route in the Interlake that was cleared in preparation for construction of the permanent channel, with no advance notice given.

The communities also indicate that the stripping of 23 kilometres of vegetation might adversely affect the exercise of their treaty rights in the area. The letter also says the Province knows the proposed channel overlaps the traditional territories of the member communities in the Interlake Reserves Tribal Council.

In response, the government stated that they had their authority because it was on Crown land.

Does the minister believe her government fulfilled their duty to consult prior to clearing the 23 kilometres of vegetation?

Ms. Clarke: Yes, this kind of goes the same direction as what I talked to you about yesterday.

Indigenous and Northern Relations, we are about the relationships. The actual scope of work in this case is through Manitoba Infrastructure, and it would probably be advised that that goes in their direction as far as questioning about that. We aren't directly involved in that, that is through their process, through their consultation, and the staff is aware that the Department of Infrastructure was in direct contact with the First Nations as part of the consultation process.

But any further information you would have to get through Manitoba Infrastructure because it was them that—we don't do the work, we don't commission the work, it's all done through another department. So we are kind of an umbrella support to other branches within the government, but we're not in their decision-making processes and what would have happened on this particular question that you're asking.

Mr. Bushie: So has the minister had discussions with Manitoba Infrastructure on this process then?

Ms. Clarke: I've definitely had conversations with the Minister from Infrastructure on this because we, as I indicated yesterday too, we've had meetings with all the four First Nations that are within that area. We've had multiple meetings with them. There's been different issues discussed at those meetings, and typically I am there to listen and to hear and to support the First Nations or the affected communities.

But as I indicated, Infrastructure does the work and they do the planning. So aware of it, yes, but part of the process, no.

Mr. Bushie: So again back to the—my question then, does the minister believe the government fulfilled their duty to consult on the project on the right away clearing?

* (15:50)

Ms. Clarke: So, in regards to that clearing that you're asking about, Manitoba Infrastructure identified the clearing work as being required for the preplanning of the design. This work was authorized under permit. INR and the consultation steering committee were not apart of this process.

Mr. Bushie: With the minister being the spokesperson and the representative of indigenous relations, how could you not be involved in the process when this involves indigenous communities?

Ms. Clarke: I'm not sure you quite understand the roles of ministers.

We are not directly involved. I think in our department alone, we have 71 staff. And in Manitoba Infrastructure, there is literally hundreds and hundreds of staff that do these projects. The role of the minister is not to sit and make decisions on all these meetings. Decisions are made in our Cabinet, a Cabinet of all ministers. So when there's government decisions, they come forward. Not to an—I would never be qualified—or, I would never make decisions on these types of things. That is not a ministerial role.

Decisions are made by order-in-council by the whole Cabinet. The role of my staff or any other staff in this government, they do the work. We have highly qualified people that do the work and we get reports and that type of thing.

My role is to meet with the communities. My role is to meet with chiefs and councils, leadership. My role is to speak in government during a session similar to what we had this afternoon. My role is to represent them best possible.

We have professional people that are involved in these processes. That is not specifically the role of a minister of a government.

Mr. Bushie: No, I'm familiar with the role of the minister, and I just—not quite understanding how, in your role as the minister, in the questions I've asked about the Lake St. Martin channel, you referred it to Manitoba Infrastructure—you referred that consultation process to being done by them, completed by them, organized them, organized by your staff. And you're more, as you described it, an umbrella organization to the communities.

And I'm just wondering how, as the umbrella organization, you're not more directly involved with the consultation process with the indigenous communities that you're here to represent.

Ms. Clarke: Well, as I've indicated, my role is here in government, and I involve myself as much as possible. The leadership tells me I am more involved—they have more connect direction from this government through me than they've had in previous ministers representing Aboriginal people in the province, and I'm very proud of that fact.

These individuals have—we have a very respectful working relationship, and they know full well that at any time, if there is a process undergoing within their region or there's a consultation or anything that they have issues with or want to discuss, whether it's myself or any other minister in this government, they have full access at any time, and they do take that opportunity to do that. So I don't feel that there's a communication issue here. I don't feel that these consultations are not being done to the best ability of everybody that's involved with them.

I think that the process is good. We're working on a duty-to-consult framework that will certainly make these types of projects going forward and others in the past [*inaudible*] previous government that failed miserably that these processes will be simplified and that all indigenous people will be—their consultation process will be one that they understand and one that they have helped to build. And I think that's really important because they have been a part of that .

Mr. Bushie: And that process that you're speaking about, that they're going to help develop, it's going to be publicly and community driven or just the leadership in the communities?

Ms. Clarke: We've been working on that strategy for a couple of years already. It's nearing completion. We're just in the process of setting up public consultations, et cetera, for that. It hasn't been announced yet.

Mr. Bushie: Large concern for communities in the Interlake region are zebra mussels and algae flowing across the two lakes through the channels and affecting the health of the lake and therefore community livelihoods. Have the effects of spreading invasive species and harmful bacteria been researched?

Ms. Clarke: That is a question that you need to take to Sustainable Development.

Mr. Bushie: So those issues have not been addressed by the minister?

Ms. Clarke: They've not been brought forward by any indigenous community or group to my department.

Mr. Lindsey: That kind of leaves the Lake St. Martin stuff for now and get into a couple other areas. Particularly, let's talk about some of the funding for things when it comes to mental health services in the North, not just specific to First Nations but First Nations and other communities. What's the minister's level of involvement in ensuring that some of those services are available?

Ms. Clarke: Well, again, I'd encourage you to take those to Health. The Minister of Health can certainly provide you with a lot more information than I can. I have travelled up north extensively the past three years with—I've been up with the Health Minister as well as the Premier (Mr. Pallister) and we have listened to many health issues. Mental health has not specifically been brought forward by anyone that we've met in the past, and that's certainly isn't saying that it doesn't exist because I certainly recognize it does. It doesn't just exist in northern Manitoba; it's all across our province.

As you've heard many times over, it's of grave concern, and there are steps being taken to work with all communities, all people in the province. Mental health is—has become a very high priority so. But I would encourage you, any other in-depth questions you have in regards to what's actually happening would definitely be directed to the Health Minister.

* (16:00)

Mr. Lindsey: So some of the things that we heard about in last session was, for example, Cross Lake trying to access funds to build a new health facility, and there was any number of times that there was questions asked in the House and elsewhere about the Province's commitment to helping fund that.

So as the minister for northern and indigenous affairs, what's your department's take on helping to fund not just Cross Lake, but that's one that comes to mind, but there's also other communities that want to see their health facilities expand. Does the minister's department have a part to play in that?

Ms. Clarke: Cross Lake actually is getting a new health centre, as is Norway House. And that's where we do have a bit of an issue because these hospitals in these two specific communities were announced totally on no communication from the federal government to the provincial Health Minister or to myself. Actually, the leadership of the communities at that time, they'd been lobbying for health centres for quite some time and they were very much surprised. I had a call from one of the chiefs, and he said, we didn't

even know they were going to announce this when they were getting health centres.

So consequently we need better working relationships with the federal government. And we've tried reaching out so that when these facilities are coming, that we can be prepared to—but to my knowledge, and again, you'd have to take this to 'helse' minister, but I don't know if there's been requests come from either of those communities in regards to these health centres that have been—that are going to be funded. Those health centres are funded through the federal government, not provincial government.

Mr. Lindsey: Well, I know that, certainly speaking about Cross Lake, that it's been probably brought up in the House many times by the member from The Pas previously about funding for that specific health facility. It seems that if the minister, as she stated earlier, sits in in a lot of meetings with different departments and advocates on behalf of those First Nations communities, that she's—doesn't seem to have a good understanding of requests for funding for particularly health-related issues that I'm sure have been long-standing. So there's something more I guess that the minister should be doing to be aware of those things.

Ms. Clarke: I've never had a request from either of those communities. I've never had actually a request from any of those communities for funding for health care directly. I was in Norway House prior to the announcement being made, and the chief actually took me to the location that they had been on hold hoping that they would get a health centre at some point, and then it was announced, I think it was less than a year after that.

But the interesting part is the First Nations have never come to me asking for health-care services. They automatically would go to the Minister of Health. I've been in the communities when we've talked about health care, for sure. Not specifically infrastructure. They know as well that their funding for infrastructure such as schools, health centres, those types of things, that is strictly a federal-funded project. So—but I can honestly say that I have not had, other than one group of communities that are now on their own that are looking to do some health care, like a health-care facility in their community, and we've had a conversation about it. And they are still in the planning stages.

Mr. Lindsey: Well, the minister touched briefly on education, and I know one of the things I heard from one of the communities is they didn't want money for

infrastructure for schools per se because they believe that money is coming from the federal government, but there was some interim funding for some equipment so that they could start doing some trades-type training for kids coming up, 10, 11, 12 type of thing. They had space available, but they wanted to know if there was grants available to purchase any of that equipment. And the answer that they got back was no, that the provincial government doesn't fund those kinds of things.

Doesn't that seem like something that the minister maybe should be advocating for on behalf of some of those communities?

Ms. Clarke: Actually, I've never had requests. And, again, those requests would not come to us for funding. We do not fund projects. It would go to Education and Training. And, in fact, it has.

And I was up not that long ago for a training of 12 young individuals. And, actually, they were from Cross Lake, where they were being trained for mining. And they all were going to be employed immediately following their training.

So there is actually a lot of different training going on, and there probably will be a lot more in the northern part of the province as requests come through.

But I know that there is requests from—through Education. But, again, First Nations or anyone in the North or any part of the province knows that if they're looking for funding in that particular department, they would go directly to the funding department. We are not a funding department as such. Our full budget for a full year is, what, \$31 million? So we don't fund projects like that.

Mr. Lindsey: So I get the fact that this department doesn't fund those things, but surely when communities are looking at issues such as the underfunding of education on First Nations communities, for example—which extends to some of the Northern Affairs communities that the minister's responsible for, that—there must have been some conversations between those communities and the minister's department about education-level funding, not necessarily for infrastructure, but for teachers, for books, for—to try and get the levels similar to what they would be on other communities. Is there not?

Mr. Chairperson: In light of the loud radiators racket, if I could ask the member for Flin Flon (Mr. Lindsey) to speak up and perhaps even repeat the question. That would be much appreciated.

Mr. Lindsey: All right, I will try again.

That there's been any number of issues around the underfunding of education on First Nations or northern communities—particularly ones that are closely associated with First Nations, where it's not specific looking at funding requests for new facilities, because I get that they go to a different department for that, but it's the actual funding for teachers, for all these other things that are underfunded in northern communities.

Has the minister ever had any conversations or—as she says she advocates for those kinds of northern communities and their issues. Has that taken place?

Ms. Clarke: I've actually never had those types of requests for—that you're actually specifically referring to. I did have a really interesting conversation—I think it was within the first year—with a First Nation that was planning—just thinking about what would work best in their area because they did feel they needed a new school. And they just wanted to discuss their plan with me. I think there was others involved in it at the time whereby they would build a school—a very large school so that all the children could stay in community to get their full education.

So what they were planning was a school that would be on treaty property, and it would actually—they would have students coming from I believe two First Nations communities, one municipality. It was a regional school that they would provide. And they were also looking, at that time, providing some types of accommodations for children that came from further north.

* (16:10)

Yes, we had a really good discussion about that. I don't think they've moved forward with it. I haven't—they haven't talked about it recently. I've visited almost every community—First Nations. And—not all Northern Affairs communities at this point. We discuss many topics when we're there. Very seldom has education been brought up.

The most specific education conversation I remember is the one where their children, grade 6 and up, still had to leave community to go to school, and that certainly, you know, is a concern in this day and age.

The other thing we talked about more specifically was Internet and connectivity in the North. That's very specific to education and for their schools as far as, you know, the lack of teachers—they're concerned

about a lack of teachers and getting teachers to come up north, whereby some of the classes could be, you know, over the Internet and that type of thing.

But, when you're talking about specific infrastructure for the schools and that, I have never had a First Nations community come to me asking about funding for a school. Typically, they would go to the Department of Education and I can't answer for that.

Mr. Lindsey: Perhaps maybe the minister could explain Jordan's Principle and how it pertains to the Department of Northern and Indigenous—what her role or what her department's role is in ensuring that those kind of commitments are met.

Ms. Clarke: I am very pleased to talk about Jordan's Principle. That's probably within my department, one of the programming that I am very in touch with. I spent four days at Norway House when I was first appointed to this position, on reserve to learn about First Nations, about the culture, about the ceremonies and their lifestyle and what their challenges are, and about the communities.

The one I chose to go to was Norway House and, of course, that's where Jordan's Principle, Jordan Anderson—that's his home. I visited the cemetery and I had a very lengthy discussion with the community on Jordan's Principle. I was there for the parade during the York Boat Days, where they celebrate it annually, as they still do, and probably always will.

I visited almost every community so far and hope to get to Pine Creek very shortly. They were just completing their Jordan's Principle project within their health-care facility.

Do I understand it? Yes, I do, because I've been there where the children are and I've been there where the therapists are and seen the work that's being done. I think it's amazing. I think non-indigenous schools and communities should learn from it and should be doing the same thing. The care that is changing the lives of those young children in those indigenous communities is absolutely amazing, and I am overwhelmed by the compassion and the love that they get from the staff that's there. And I've visited, as I've indicated, almost every community that has a Jordan's Principle within their wellness centre already.

Mr. Lindsey: So does the minister's department have any direct funding that goes towards the operation of Jordan's Principle in various communities in the North?

Ms. Clarke: Okay, well, we know why this was created in the first place: because it's got to be about the child services first, right?

Okay. So what's happening—that's what happens. The child gets the service regardless of what it's needing—physical, emotional, whatever. Then, they figure out who pays, of course, federal or provincial, and it is decided within this government, which it may come from Families, it may come from Health, it may come from Education.

Wherever that need is, that's where the money comes from. Otherwise, the critical services don't reach kids in a timely manner, and we know that's why this was created in the first place.

Mr. Lindsey: So has the minister's department had any part in funding any of the shortfalls that have happened, or any of the needs that are present with some of the Jordan's Principle, particularly in the communities?

Ms. Clarke: Yes, well, I think, like, when you ask is there shortfalls, I think we've just—we've 'reiterated' that this does not happen anymore. That's why there is Jordan's Principle.

It is funded through the federal or provincial government. Does it come from our department? No. We're not a service funder. So—but it would come from one of the government—provincial government departments. There would be no questions asked. We do not allow there to be shortfalls with Jordan's Principle.

Mr. Bushie: So I, too, am also very familiar with Jordan's Principle and the great work they do. In fact, I have family that works in our Jordan's Principle program at home.

One of the issues they realized in the beginning is the response was, well, here's the funds, but really no infrastructure or plan or policy in place from the beginning, I should say, as to how to do it. So they're kind of implementing and going as they went, kind of learning on the fly, developing programs and whatnot.

But one of the shortfalls they in fact do have is facilities, in regards to classrooms and an office.

So I'm just wondering if those commitments ever came—or requests ever came to your department, in regards to being able to fund the facility—not so much the programming end of it, but it's the facility part, because that's where really the shortfall is for most First Nations JP programs.

Ms. Clarke: I've never had that request from any community. I've been to communities where they're implementing. I've been to communities where they're talking about—but there has never been—I think we can all understand that there's no project within any community, indigenous or non-indigenous, where there's always enough money, but I have not specifically had a request.

Mr. Lindsey: Let's just go back to some things that I was talking about yesterday a bit.

So yesterday the minister attributed the \$5-million underfunding from her budget, on Indigenous and Northern Relations, she attributed that to staffing vacancies, the expired and non-renewed Metis Economic Development Fund and closure of the friendship centre in Winnipeg, and reduction in discretionary grants. So could the minister please tell us what grants were impacted?

* (16:20)

Ms. Clarke: While the staff is working on this, I'll go back to the community funding you were asking about earlier in regards to the differentia.

Our staff is finding it impossible to find the numbers that you're projecting, so you're going to have to provide us with very specifics where you're finding these and page numbers, et cetera, because your figures are not aligning with the information that we've got.

But, just to—as a more general response, community operations and maintenance they send out—is sent out quarterly and it does not change unless new infrastructure is added and old—or old infrastructure is decommissioned. Community programs—this funding can change if communities no longer have a program or are running a program, and this can show as a decrease.

Locally generated revenue—this fluctuates yearly based on the collection from residents of tax for services or amounts of taxes collected. Communities are required to collect 20 per cent of the total budget for their locally generated revenue.

Accounts receivable and payable—this can change depending on when they are collected or paid, and communities may be in a deficit if there's a lot of renewables—or pardon me, a lot of receivables that aren't collected and would be reported as such.

For northern affairs community funding, there's been very little reduction, especially in the last few years. Community budgets would remain fairly

consistent for department funding, and changes may be as a result of outside funding changing to the department, as it does not always provide these funds.

Mr. Lindsey: So, I mean, the numbers that I talked to you about before were from volume 2 of Public Accounts and it's year-over-year funding, so, I mean, it shouldn't be that hard to have your staff find those numbers and you have perhaps answered parts of it that some of the things don't change. And yet, when I see some communities where the funding level is so dramatically changed, clearly, something different took place there. So, again, we'll hope for more clarity as you provide the information that we'd asked for previously.

So is the minister prepared to answer the last question that was asked now?

Ms. Clarke: Okay, going back to the question in regards to the grants that you asked previously. The grants are not grants which regular go to the same project or proponent every year. They do fluctuate; they change from year to year. And they're provided on a year-by-year basis; they are not ones that extend one, two, three years or whatever. They are just a one-time grant. And, while some 'propopones' apply over multiple years, the list of grants doesn't necessarily change each year.

And underspending is not under—it's not cuts. Sometimes they're under—there's a lack of applications, that type of thing. But there are times, too, when these particular grants, when they do apply—I believe you asked at one time, were a lot of grants turned down—no, very seldom. And, if they are, it's just because they don't meet the very minimalist of criteria.

Mr. Lindsey: So now, again, going back to what we talked about yesterday, if I recall correctly, you attributed—the minister attributed the ending of the Metis Economic Development Fund and discretionary grants to the current Communities Economic Development Fund review.

Now, my understanding is that CEDF reviews has been going on, the funding has been frozen for, like, three years. And now it's still in the process of being reviewed.

So can the minister explain why this review is taking so long?

Ms. Clarke: I believe that funding will be in place very shortly, if it isn't already. And there was actually quite a large meeting of the CDEF yesterday.

Mr. Lindsey: So when will that funding be available? Because, like I say, it's been frozen for three years now, and promised to be very soon. So when is very soon?

Ms. Clarke: We have an economic development committee of Cabinet, as you're likely aware. And we've been getting all these—I believe I—it's seven different groups that are going to be working within Manitoba. I read them all to you yesterday. The last proponent in—within that is the rural economic development. I believe it is basically set up and ready to go. And I am sure that the powers to be that—will be providing the funding. It is probably pretty much ready to go. And I can't give a specific date because I don't have that.

Mr. Lindsey: So will the CEDF fill in the gaps of the Metis Economic Development Fund that had ceased?

Ms. Clarke: The money from the Manitoba economic development fund, as I indicated to you yesterday—all that type of funding in—through economic development—that was probably one of the biggest issues we had with the previous government.

There was funding coming from all over the place. For multiple projects, you would get funding from possibly three, four different sources. And nobody knew who was giving what. With our new econ development—economic development strategy, there will be one place to access funding for economic development. In northern Manitoba, it's CDEF.

And, as I indicated to you, I read one of the mandate letters. Indigenous—which includes First Nations, Metis, Inuit—they can apply for funding in any one of those streams. It doesn't have to be northern Manitoba to access money for indigenous projects or whatever. That money will be available to all Manitobans.

Mr. Lindsey: So money that used to be available for specific regions—is the minister now saying that that's not going to be the case, that there'll be one pool of money and all regions will be vying for that same pool?

* (16:30)

Ms. Clarke: It's my understanding that there will be one stream. There is one portal but each different—one of those groups will—I don't know what the structure for funding is for each one of them. I don't have that available to me but it—these announcements are coming on a regular basis in regards to rolling it out, but I do know that access will be there for everyone

and it doesn't matter what region of Manitoba they're in.

Mr. Lindsey: So does the minister envision that there will be the same or greater level of funding for some of these things that have been funded in the past through the grant program or does she envision that there'll be some cost savings for the government here?

Ms. Clarke: I can't answer that because I don't have those figures.

Mr. Lindsey: You don't have those figures but is it possible for you to get those figures or is that still somewhere down the road that hasn't been determined yet?

Ms. Clarke: I don't believe it has been announced. My position within this whole structure and the formation of it—I am the vice-chair of the Economic Development Committee of Cabinet and I'm happy to say that a lot of the wording and the mandate for all the different streams for the economic development throughout the province that, you know, that I've had a hand or a voice in it, indicating that indigenous applications, indigenous people on boards—that that was going to be taking place. There's been a lot of time and effort put into the strategy and it will be rolled out as soon as it's ready to go, and, as I've indicated, that is very soon. These boards are set up. They're setting up their boards and by the looks of the meeting in CEDF yesterday, I said I would think there's probably 20-some people at that meeting. So I'm thinking they're pretty well organized and ready to go, but I don't have funding figures.

Ms. Danielle Adams (Thompson): So with CEDF, you're saying you don't have the figures but you have your Look North strategy. So how do you not know the figures with having the Look North strategy?

Ms. Clarke: Those figures haven't been released yet.

An Honourable Member: So you have them. You just can't release them.

Ms. Clarke: I do not personally have them. Actually—*[interjection]*

Mr. Chairperson: Sorry, just a friendly reminder to the member for Thompson to direct the comments through the Chair, for the purposes of recording, and also to speak after you've been recognized for the same purpose.

The member for Thompson, on a further remark or comment.

Ms. Adams: In terms of saying you didn't know where the fund—where you guys didn't know who all was being funded with CEDF, I've actually filled out a CEDF application. The daycare I was a part of actually got negatively impacted when the piece—when the government did freeze the funding. And we had to identify and list all of where we were getting our funding revenue.

So, when you're saying that funds were being distributed and you didn't know who they were all going to, that's not quite accurate.

Mr. Chairperson: Is there a question?

Ms. Adams: I just wanted to point that out for the record.

Ms. Clarke: I'll point out to the member that economic development falls under Growth, Enterprise and Trade. It is not specifically a part of this. I am included in the Economic Development Committee of Cabinet but the funding and everything in regards to economic development previously came under Growth, Enterprise and Trade. It is still under Growth, Enterprise and Trade.

Ms. Adams: No, I understand that. I just wanted to make sure that you were aware, seeing as I have filled out an application, so I knew that it was one of the questions that was asked. That's all. It was just for information for the honourable minister.

Ms. Clarke: Okay. We're here to discuss Estimates, not individual—we don't deal with individual cases here. We're here to talk about the Estimates for the government.

Ms. Adams: The recent fire at the Forest View Suites in Thompson left 270 families homeless. The RCMP reports there were serious fire code violations. This is not the first serious incident in this building.

Does the minister have a plan to improve fire safety in the North?

Ms. Clarke: Well, first of all, a lot of that would fall under the city and the fire department and the individual owners of the building. I don't believe this was a public building, but I'm not sure about that.

Again, I've had nobody reach out to me in regards to that fire at all, so—but typically, if there's fire codes and that being broken, we have—there are streams within our government that would take care of that. That is not—but very often, if there is a fire on reserve or those types of things, I'm—I immediately contact the chief or whoever is, you know, responsible in that

community for leadership. I do reach out to them to see if there's any way we can assist or anything we can do.

But, in this particular case, with this building—my staff has just indicated it was a Manitoba Housing, and that also does not fall within my department, but when inquiries come to my department, I follow up, either with the department that would be caring for that or talk to individuals myself, but I've had no contact.

Ms. Adams: We need better enforcement of the fire code to prevent tragic incidents from occurring.

How did the frequent fire inspections get done in the North?

Ms. Clarke: Okay, I'll first point out fire inspections in municipalities are done—are—municipality's responsible for them. However, within our department we work with the Northern Affairs communities and Manitoba—our group that looks after this planning and test emergency responses and that is Emergency Measures Organization, EMO. That's who works with us in Manitoba.

Our department is also contracted with the Office of the Fire Commissioner to do inspections in Northern Affairs communities when necessary, but starting in 2021, INR will be doing these inspections directly ourselves. So municipal looks after everything within the municipalities.

Ms. Adams: Could the minister tell me how many affordable housing units were built in the North in the past fiscal year? How many were built in 2017-2018?

Ms. Clarke: Those questions should be directed to the Department of Families. They are responsible for housing. We can get that information for you from them, but you'd be—probably best to go directly to them because you probably have additional questions with that as well.

Mr. Bushie: I request a 10-minute break.

Mr. Chairperson: A request has been made for a 10-minute recess. We have—I'd just like to point out to members we do have options here. The whole committee need not recess if an individual wishes to step away.

Is it—however, is it the will of the committee to take a 10-minute break? *[Agreed]*

Okay. Seeing no objections, the committee will recess for 10 minutes and return at 4:51—or 4:50 according to the clock on the wall.

The committee recessed at 4:40 p.m.

The committee resumed at 4:51 p.m.

Mr. Chairperson: Will the Committee of Supply please come to order.

This section of the Committee of Supply will now resume consideration of the Estimates from the Department of Indigenous and Northern Relations. As previously agreed, questioning for this department will proceed in a global manner.

The floor is now open for questions.

Ms. Adams: How many Manitoba Housing units were built on Northern Affairs communities in the last fiscal year?

Ms. Clarke: As I've indicated, that would have to come from the housing under Department of Families. That's—they are responsible for all the housing.

Ms. Adams: How many were built in the fiscal year of 2017-2018?

Ms. Clarke: Same question, same answer. That is a housing department question.

Ms. Adams: And Northern Affairs communities, how many Manitoba Housing units were built in 2016 and 2017—Northern Affairs communities?

Ms. Clarke: Okay, as I've indicated, our Northern Affairs communities leadership would request any type of this activity. It would directly go to Manitoba Housing in all cases.

We know, to the best of our ability, through our staff that there were no communities—or, no housing built in Northern Affairs communities in the past two years, possibly in the last many years prior to us being in government. We did, however—we moved a house from the provincial evacuation site to the community of Rock Ridge that we are aware of, because that's under our jurisdiction.

* (17:00)

Ms. Adams: Does the minister have a plan to advocate for more housing on Northern Affairs communities?

Ms. Clarke: There's 52 Northern Affairs communities in this province. I don't know how many you've been to. The population, actually, is declining in a lot of them, and that's one of the reasons we're doing the transformation review right now is because some of the—we've got communities with two people, four

people. We've got some now that have zero people. Eight to 10 people is not uncommon, and in some communities, it's one family.

So there's—it's very diverse, but they're not populations that are growing, per se, and demanding or looking for housing. But we do have some 'cumenes' that are looking to expand, and in the Northern Affairs communities too. Some of these communities are actually cottage country, where there's actually developers that are working with them and they are developing them.

But we've got other small communities or other Northern Affairs communities; they are also looking to expand, but they, too, are also working with developers. So we, to our department, are not getting requests for housing, and there may be requests going through the housing department, but those communities—and I was in Duck Bay recently, for instance, but Manitoba Metis Federation is also putting housing into certain communities that they choose to, so.

I think President Chartrand told me he's got funding for 100 houses, and he hasn't made it clear yet what communities or where these houses are going to go, but he has got federal funding for 100 houses, so. And he did indicate that he would be talking to our government, because although he's got the money for housing, he doesn't have the money for infrastructure.

But to my knowledge, I don't know if he's reached out to us for any of that infrastructure and—but I do know that he has spoke to Minister Stefanson in regards to housing. That was at his call. I wasn't available or I wasn't aware of that meeting, but he did indicate to me that he'd talked to Minister Stefanson. Minister Stefanson indicated she'd had a conversation and they are planning on having a meeting about that.

So where he's planning on putting these houses, we don't know at this time.

Mr. Bushie: Respecting the fact that some of these questions may be geared specifically to the Health Minister or the Minister of Health, in regards to indigenous relations, this summer a walk was held from HSC to the Legislature to highlight the gaps in access for indigenous communities, particularly those living in the Island Lake region.

As you mentioned, you've visited most of the communities. Some members from these communities were calling on government for facilities in their region to cut down the need to leave their communities to access the care that they need.

Does the minister believe that communities living in the Island Lake region have adequate access to medical facilities?

Ms. Clarke: Actually, I was in Island Lake just a few weeks ago, less than a few weeks ago. And we did have a bit of a discussion, and we've also had the group from the four different communities come in and talk about their health-care plan. So we have been having those conversations.

Mr. Bushie: Yes. I was there after you.

Has the minister consulted with other levels within the government to begin addressing the issue of access?

Ms. Clarke: Access to health care or access to the communities?

Mr. Bushie: Access to the facilities that they require.

Ms. Clarke: We just had a preliminary discussion. They came in and, kind of, presented to us their plan, where they felt the shortfalls were.

And I believe they were also planning to meet with the Minister of Health. I don't know that they had or had not. I think they've had that discussion, but it so far as in—best of my knowledge, it's just been discussions.

Mr. Bushie: Your meeting was with elected leadership?

Ms. Clarke: Yes, from all communities. Yes.

Mr. Lindsey: I've got some questions around the Northern Healthy Foods Initiative. Now it looks like that initiative has been drastically underspent for 2018-2019. Can the minister explain why that is?

* (17:10)

Ms. Clarke: All right, so, just for clarification, this funding is new to our department. It has previously been in the Department of Health, so this is new money into our department. So, currently, we're waiting to launch a new, enhanced northern healthy foods program. It will strengthen and expand the program. And we're looking to do this very early in the calendar year, and perhaps even sooner.

I actually met with 'representatives'—representation from Tides Canada foundation, which is a partner—which—actually several partners in this. It isn't just our government that contributes to this—northern healthy foods. And they include Bayline Regional Roundtable, Child Nutrition Council of Manitoba, Food Matters Manitoba, Four Arrows regional health

authority, Frontier School Division, Manitoba Lifesaving Society and Northern Association of Community Councils.

An interesting part of that was they give a very expanded list of everything that they do under those particular headings, but this is a program that is actually growing, and we're very excited now to be a greater part of that.

We partnered with Northern Health to some degree previously, and I'm just asked to outline some of the really successful projects that have happened on account of this funding that's made available.

In Churchill, they had a—funded a grocer's unit. They funded seed containers that were actually outfitted to grow leafy vegetables for community use, which was really important. And I think we're all very aware of OCN, the LED lights that they can grow root vegetables for community use. That's been up and running for quite a while; very successful.

In Meadow Portage, they've got beehives that now ship honey outside of Manitoba. I met with the gentleman from Peguis who is not just growing potatoes, but teaching all the youth. They have a project with the school where they're doing potatoes. And, actually, they're doing tobacco, as well. That doesn't fall under northern healthy foods, I don't think.

Also, I was very pleased to be up in Norway House not this past year, I believe it's a year ago, where we provided them funding for a small tractor for their garden. And, again, they've got elders working with the school that are coming in and teaching the kids how to garden and how to grow their own produce. So there's a lot of projects that we could expand on, but we are looking now to take that funding that's available in our department, and we're actually looking to enhance it and provide hopefully more help for northern communities.

Mr. Lindsey: So the minister talks about expanding the program, but at the same time she's talking about expanding it, the amount of money that has been spent is dramatically less than what was budgeted.

How do you expand programs while cutting funding?

* (17:20)

Ms. Clarke: So I indicated that the money was previously with Manitoba Health, and it was specifically originally set out for what was called the AFFIRM program, and it was a milk subsidy program, but we've expanded on that and Health was able to

main the AFFIRM program and transfer the funds to INR so that we can then enhance the program—and we're very excited. As I said, we're developing this and the strategy for it, which should be rolled out very quickly.

Mr. Lindsey: So, following the minister's comments, if from the Department of Health, they transferred—it looks like \$1.2 million—but the actual spend from the minister's department was less than half of that amount, how does she see that as expanding any kind of program? It seems to me that when you spend half the money, you're not going to grow the program.

Ms. Clarke: Just for clarification on the number that you're talking about—that one-plus million—there was only \$662,000 that was transferred from Health to INR and these funds will be used to expand the existing 584, which typically was in INR, which is—was always expended. So it's the combination of the two funds that we're talking about when you're talking one-point whatever.

Yes, but there was only \$662,000 transferred to INR, and we're going to use their money, along with what we had, which will make that 1.2 or whatever and that's why the program can be expanded, because we combined the two.

Mr. Lindsey: So is that explanation captured in here? Because what I'm looking at on page 28 is that there was an estimated amount of money that was going to be spent, 1.2 plus, and instead there was only 569 spent, which seems to be a variance of 478 underspent.

So I'm not sure how the minister's suggesting that there's more money being spent. I'm not following along with the math here.

Ms. Clarke: The amount that you're talking about in the \$500,000 range, that's what was expended from INR that was in INR. The 662 that adds—that was added in came into this department from Health.

Mr. Chairperson: The honourable minister, on a further point.

Ms. Clarke: I've got the actual document here. So what you're looking at, northern healthy food initiative, which actual was 569 expended through INR. That's our funding. The 1247 is the amount that is the combination of Health and INR. And I'm fully—that amount will be fully expended when we redesign the program. Yes.

Mr. Lindsey: So it will be fully expended at some point in time, but not necessarily this year. This year it's going to be underspent.

Ms. Clarke: Okay, as I 'undercated', this process is ongoing. It's already been worked on, and it's not completely finalized, so indications are this year's expenditures will depend on the launch date. Trying to get there as quickly as possible.

We also anticipate in the future years it will be fully expended, without a doubt. And this fiscal year will be expended a portion of the new funds. So it will, as quickly as we can get it launched, it will be—the spending will take place.

Mr. Bushie: So in regards to how it's being reported here, is there a reason why it wasn't written, as you've said, transferred from Health, or perhaps as another line item as other revenue? Is there a reason why this was just kind of—in?

* (17:30)

Ms. Clarke: Yes, like, it's transparent. It clearly indicates in the note underneath, underexpenditure is due to program review—so that's been indicated there—and redesign resulting in lower expenditures. That's why it hasn't taken place to date, but I think it's pretty clear that, you know, there's additional funding in there. Or a transfer of funding. It doesn't necessarily say where it came from, but it's within our government and seems fairly transparent.

Mr. Lindsey: Unfortunately, it does seem somewhat transparent in the fact that there's a sum of money that's not going to be spent because the program is under review—and we've seen particularly from this government that when programs are under review, at the end of the day, there's going to be less money spent.

So the minister's already said that, well, there's all this money there, but because the program's under review—and then we're going to redesign it, so it'll be like trying to find the money once it's redesigned. Right now, what we know is for this fiscal year, this money isn't going to be spent now.

Is it—that amount going to be for next fiscal year? Well, we don't know that because we don't have those documents. What we do know is that the money is being underspent, whether it came from Health, whether it came from indigenous northern affairs, there's X number of dollars that were budgeted to be spent, but that money is not being spent this fiscal year. At least, not at this point in time, because the

program is still under review and it's going to be redesigned to look like something different. Meanwhile, there's communities in the North that need to have those services expanded.

So, doesn't the minister agree that while this review is going on, we should still be looking at expanding those initiatives in northern communities to help them have access to health and food?

Ms. Clarke: I think it needs to be said that in regards to the northern healthy food, our government is committed to ensure that—the effective use of the resources that we have now acquired, along with what we've already had in the past.

We know that our partners—and I read them all off—that they leverage funding that enhances services for the program. The northern Manitoba food collaborative has actually leveraged approximately 50,000–\$500,000 based on our \$30,000 commitment, and we look forward to ensure these new investments are most strategically used to meet the needs of these communities.

And we are going to make sure that we do this right and that the money is used to the best possible way to use it in as many communities and for as many projects as possible. And that will happen.

Mr. Bushie: Are the partners you're referring to charging an administration fee?

Ms. Clarke: There is an administration fee, but it's extremely low and that's one of the things that's being negotiated as we move forward with the new program, that that administration fee could go up slightly because there is more funds to expend and that type of thing.

But they work at a very low rate, too. They are so committed to these programs. We had a meeting with them and they explained to us all the work that it's done and has done in the past. And it's significant.

Mr. Bushie: I have no further questions.

Mr. Chairperson: Having no further questions, we will now proceed to consideration of the resolutions relevant to this department.

I will now call resolution 19.2: RESOLVED that there be granted to Her Majesty a sum not exceeding \$32,127,000 for Indigenous and Northern Relations, Indigenous and Northern Relations, for the fiscal year ending March 31st, 2020.

Resolution agreed to.

Resolution 19.3: RESOLVED that there be granted to Her Majesty a sum not exceeding \$96,000 for Indigenous and Northern Relations, Costs Related to Capital Assets, for the fiscal year ending March 31st, 2020.

Resolution agreed to.

* (17:40)

The last item to be considered for the Estimates of this department is item 19.1.(a), the minister's salary, contained in resolution 19.1. At this point, we request that the minister's staff leave the table for the consideration of this last item.

The floor is open for questions.

Mr. Bushie: I move that line item 19.1.(a) be amended so that the Minister of Indigenous and Northern Relations' (Ms. Clarke) salary be reduced to \$1.

Mr. Chairperson: It has been moved the the honourable member for Keewatinook (Mr. Bushie) that line item 19.1, subsection (a), be amended so that the Minister of Indigenous and Northern Relations' salary be reduced to \$1.

The motion is in order. Are there any questions or comments on the motion?

Mr. Lindsey: I guess this is something that quite often happens when we see a department that, in our estimation at least, isn't really living up to its mandate—that we see things like northern food initiative that we just talked about, that seem to be being underspent. We see northern communities really struggling. We see efforts towards reconciliation that are falling short.

There's so many issues in some of these northern communities that the minister's responsible for, that, throughout the questioning process, that it seems every other department is responsible for things that we've asked questions about, other than the department of Indigenous and Northern Affairs. And yet we know very well that the minister should be responsible for a lot of those things but claims not to be and I mean that really comes down to why we're making that motion—that, really, there needs to be a change, I guess, in the culture of the minister's department so that it actually is living up to the mandate that it's been given. And, really, from the answers to the questions that we've got, so far, seems to be falling short.

And I don't necessarily want the minister to take that personally. It's just that there seems to be so much opportunity to do so much more, particularly for those northern communities that struggle so much with underfunding for education, health care, infrastructure, on and on and on, that, really, the minister's answers and her department's answers have really failed to fire up, certainly, our imagination, our inspiration that we'll see good things happening anytime in the future. So that's really the reason why we bring forward that kind of motion, I guess.

Mr. Bushie: And to kind of reiterate what my colleague had mentioned, as much as I'm new to this process and some of the protocols that take place and in bringing forth that motion brought a little giggle around the table.

The reality of it is, I don't really take it that way. And the reason for that—and I'm sure you can—the minister can attest to the fact that when she talked about visiting, in particular, a lot of the First Nation communities, you've seen exactly the living condition of the communities: the needs, the wants, the shortfalls. The—our communities are the basis of the Jordan's Principle program about falling in between the cracks, and then people getting left behind, whether it be federal, provincial, bounced back and forth, whatnot.

And, in particular, one of the things we've—when you—when the minister referred to the fact of visiting Island Lake area and I, in fact, visited it probably about a week or two after you had been there, if that's when you were up that way.

And, when I visited community I did not land in the community. I landed on an island that's not in the community. It's not in the First Nation community, and I took two boat rides, one truck ride, one plane ride, another boat ride and about a 20-minute walk to get where I was going. And that's just the reality of people living in the North and living in First Nation communities.

So, when you take on roles like this and the roles of government minister and any role in particular, when it comes time to going and cashing your paycheque and being able to say, well, I've earned this—and I'm sure everybody around the table feels we've earned, you know, our money at the end of our every two weeks and things like that.

But, at the same time, most people are not starving the way that a First Nation community is starving.

So, when I took on this role or I agreed to take on this role, I looked at the budgets. I have a background in finance also, and looking as to see what salaries are—make up various organizations, especially at the ministerial level.

And when I see the salaries that go out there compared to the salaries that are the reality of First Nation communities, in particular, in my own First Nation community: \$220 a month, that's what a single person can—is expected to live on. That works out to be about \$7 a day.

And can anybody here really say we can survive on \$7 a day? No, that's not the reality.

Even though we are trying to make your salary a dollar, in comparison that really doesn't matter. The fact—to what we take home at this level, in response to, in particular, in my riding in Keewatinook, being able to go and justify salaries at this level to those community people that are really living in Third World conditions is very, very difficult.

And as much as, like I said, we took that as a little bit of a joke, a little bit of a laugh around the table—you've heard the term, you know, walk a mile in my shoes. Well, my term is more live a month in my community rather than walk a mile in my shoes, and you really see what that's like.

We talked about Third World conditions. It's not to make our communities the cause of the day, and by no means is it a joke or something to laugh about. It's the reality and it's a very difficult situation.

You know, I've seen people that are living in the bush. And when I say living in the bush, that doesn't mean they have a house in the bush. They're literally living out in the bush with a tarp as a shelter. It's not a home. It's not a place to live. It's not a dwelling. It's living basically homeless in your own community that you've grown up with, and for most people, that's all they know. That community life is all they know.

So, when we talk about passing that resolution to be able to take that, myself, as a former member of my own leadership in my community, chief in council, that was something that was mentioned to me on a regular basis. My money is what pays your salary is what the community people say, what public say, what Manitoba and taxpayers would say. And I'm sure most people are going to say, well, you told that yourself, which is in fact true.

So what are you doing to earn your money—and not anything in particular, anything personal against

the minister. I think it's a slight against the government and society in general when they feel that we're not earning up to their potential.

So, with that, that's—that was the reason why when I seen that motion there, people took it as a token thing that's said around the table, a policy, something that's been maybe discussed around this table for 200 years, or whatever it is.

But for me it's a reality and I would like you to consider it and consider, around the table, passing that as a sign and a show of commitment to the communities that, you know what? We're not here for the money. We are here, in fact, to do right, to do what's right for our communities, and we all at this level need a base salary. Minister's salary is a little bit different.

I know my comments on that, and I already see head nods around the table so I'm thinking we're all in on the same page. We're in agreement here.

Thank you.

Ms. Clarke: I would like to respond to that because I don't think any of us slighted in any—typically, the response for it has not been \$1 in the past, and that has no significance to the wages.

* (17:50)

I did not take this job as being an MLA or a Cabinet minister. I was appointed as a Cabinet minister. I'm not here for the money. I have never considered this a job about the money, and I think if you'll talk to the indigenous leadership, Metis Federation or the Inuit in this province, you will not get the kind of responses I just heard from across the table.

I have done probably more work—actually, I've had my colleagues—those that are sitting here, many that aren't—that have indicated that I have put more effort into this job because I take it very seriously. This is not a joke to me. What I do is not a joke. Indigenous people are not a joke. The hardships that they experience, it's not a joke. It's not a joke to me or our government. So I don't want you to ever think that we don't take this seriously, because we do.

There is so many things that we would do if we had the money to do it. If we hadn't come into a deficit of almost \$1 billion, think what we could have done. We could have fed everybody in the North.

So, you know, we laugh about it, but it's not a joke. So I'd just like to leave you with that.

Ms. Adams: I also support the member from Flin Flon's resolution.

The honourable minister indicated the Minnesota transmission—Minnesota-Manitoba transmission line is not in her portfolio, the CEDF is not in her file, education is not her file, health is not in her file and housing is not in her file. So that's a lot of things that affect northern communities that are not in her file, and she was unable to answer the questions on those issues.

Mr. Chairperson: Is the committee ready for the question?

Some Honourable Members: Question.

Mr. Chairperson: Shall the motion pass?

Some Honourable Members: Yes.

Some Honourable Members: No.

Voice Vote

Mr. Chairperson: All those in favour of the motion, please say aye.

Some Honourable Members: Aye.

Mr. Chairperson: All those opposed to the motion, please say nay.

Some Honourable Members: Nay.

Mr. Chairperson: In my opinion, the Nays have it. The motion is accordingly defeated.

* * *

Mr. Chairperson: Resolution 19.1: RESOLVED that there be granted to Her Majesty a sum not exceeding \$1,131,000 for Indigenous and Northern Relations, Administration and Finance, for the fiscal year ending March 31st, 2020.

Resolution agreed to.

This completes the Estimates for the Department of Indigenous and Northern Relations. The next set of Estimates to be considered by this section of the Committee of Supply is for the Department of Finance, including Crown Services.

What is the will of the committee given the time? We are six minutes away from our scheduled—

Some Honourable Members: Committee rise.

Mr. Chairperson: Committee rise?

Committee rise.

HEALTH, SENIORS AND ACTIVE LIVING

* (15:00)

Mr. Chairperson (Doyle Piwniuk): Will the committee of supplies please come to order.

This section of Committee of Supply's now resumed the consideration for the Estimates for the Department of Health, Seniors and Active Living.

At this time we invite the ministerial and opposition staff to enter the Chamber.

Could the minister please introduce his staff that he has in attendance?

An Honourable Member: We need a chair—

Mr. Chairperson: Okay, sure.

Hon. Cameron Friesen (Minister of Health, Seniors and Active Living): This afternoon I have at the table: Deputy Minister of Health, Seniors and Active Living, Karen Herd; I have resources and performance, assistant deputy minister, Dan Skwarchuk; I have the CEO for the Winnipeg Regional Health Authority, Mr. Réal Cloutier; and I have my special assistant, Nathan Gordon Clark.

Mr. Chairperson: Thank you, Minister.

Could the member for Union Station have—introduce—his—her—the critic?

MLA Uzoma Asagwara (Union Station): Good afternoon, Mr. Chair.

I have Chris Sanderson, policy analyst.

Mr. Chairperson: Thank you. I thank the member.

Okay, now the—as previously agreed, questioning for the department will now proceed in a global manner. The floor is now open for questions.

MLA Asagwara: The minister yesterday had indicated that he would provide some information that we had—I had asked questions about. I'm wondering if the minister could provide that data for us today.

Mr. Friesen: The member will recall that yesterday just before 6 p.m. at the close of the committee I read into the record a number of pieces of information that we had managed to collect over the course of the afternoon. These included the vacancy rates for Concordia Hospital, Seven Oaks Hospital, Misericordia hospital, Health Sciences Centre, St. Boniface Hospital. There was other information provided as well. As a matter of fact, I note that the

member and her party used that information in today's press release that the NDP party put out.

So I'm wondering if they could clarify if there's other information they are seeking at this time that did not form part of the disclosure that we made at approximately 5:45 p.m. yesterday afternoon.

MLA Asagwara: If the minister did provide the information regarding Concordia and Seven Oaks, then that was missed on my part. If the minister wouldn't mind providing that information again specifically to Concordia and Seven Oaks.

Mr. Friesen: I remind the member that Hansard contains all the information provided in this committee, and therefore I'm sure that the assistant that is seated at the table will have in possession the information that was provided less than 24 hours ago in these proceedings.

If she would like to, we could take further time in this committee to re-read into the record the same information that we read yesterday. I would submit, respectfully, it wouldn't be the best use of the time in this Committee of Supply for Health.

MLA Asagwara: The minister, I'd like to ask about what we're seeing in terms of admission rates. From the last WRHA annual report that was publicly released—excuse me—a higher percentage of patients presenting at emergency rooms were admitted in 2017-2018 at 12.7 per cent, than the previous five years. That's concerning certainly for me, you know, as somebody who has worked in front-line services as a nurse for over a decade, and it should be concerning, really, for all Manitobans. It suggests, this information, that there's a sicker population.

Can the minister explain why this is happening and what, if anything, the minister is going to do to address it?

Mr. Friesen: I'm happy to provide an answer to that question.

The member is signaling that presentations at emergency departments in the WRHA are up. I would concede they are, and I would also say first of all that this is consistent with what is being seen in other jurisdictions. So, across Canada, in other provincial jurisdictions, there has been also recognized an overall increase in presentation rate at emergency departments.

The reasons for this are, of course, complex. We have, in Manitoba, we know, an aging population. We know, in Manitoba, we have challenges as other

jurisdictions do, with things like chronic disease, and people living longer and managing more with chronic disease. We also know that the methamphetamine issue that has hit Manitoba, as—has hit across this country. As I continue to talk with health ministers and ministers responsible for mental health and addictions in other jurisdictions, we know that these issues are having an impact in emergency departments, not just province wide, but country wide.

What I can tell the member, though, is that I would want them to keep in mind that we have one of the lowest re-admission rates at Health Sciences Centre in the country, as evidenced by the continued information offered by Canadian Institute for Health Information. And that tells us that there is not a signal there that people are being somehow admitted and discharged too soon.

We also can indicate that there have been changes made in the system to be able to increase capacity and to make sure that people are getting the right care in the right place at the right time. I know that member will be familiar with that phraseology. It's phraseology we have used since the beginning of this healing our health care transformation. The right care, in the right place in the right time.

*(15:10)

We know that traditionally in this province, people defaulted to going to the emergency department, even when the level of acuity of their illness or injury did not warrant a trip to the emergency department. We have endeavoured to partially work to educate people as to know where to go. We believe that continues to be a major part of the challenge.

We know that it is difficult to drive behavioural change in any kind of context. But when it's health care, it's equally important to make sure people know where they can receive treatment. As a matter of fact, when I think about the changes undertaken at places like Concordia and how this government accepted David Peachey's recent recommendation that we should enhance the level of service for that community in respect of creating an urgent-care centre—we did that and we now know that when we consider the change under way in that community, 90 per cent of the people who were formerly receiving care at Concordia when it was an emergency department can now continue to receive care there, as it is an urgent care. The other 10 per cent we also know should never have been presenting to that emergency room for any reason.

I would want to also outline that there are other investments we've made into the system. We now have, at Health Sciences Centre, operating since just this summer, a mire—minor ailments space. This is a space where lower acuity patients can be diverted to receive treatment sooner and in a more appropriate way, which we also know takes the bottleneck off of Health Sciences Centre. This has been, as I say, in place since the summertime.

But we also know, in addition to this, this government has made significant investments in paramedicine, and I would welcome subsequent questions by this member on the subject of how we are redoubling our efforts to invest in paramedicine across our system and how that is helping to drive better results among patients.

We know at the end of the day that emergency department wait times are only part of the issue. The bigger issue—and the comprehensive one—is one of how we move patients appropriately through the system from admission to treatment to discharge. This needs to be the focus of our work. It's work that was neglected for years under the NDP, and we're attending to it.

MLA Asagwara: The rates—the percentages over the last—well, since 2016, have increased. They've gone up. And considering that nursing-staffing ratios are decreasing, considering staffing vacancies are increased, emergency room wait times are increased, considering that folks are presenting to emergency rooms at 12.7 per cent in 2017 and '18, indicating a sicker population, I think it's reasonable to get a clear response on what this minister is going to do to address that. What is the plan?

We know that this government—that this minister went ahead and rushed changes despite being encouraged to not do that, resulting in staff burnout, resulting in health-care aides and doctors and nurses writing letters expressing their concerns about whether or not they can provide the care that Manitobans deserve when they're accessing health-care services. We know that, you know, nurses are making the decision to leave the province and work elsewhere. And we know that that is not going to change if this government does not make some serious considerations in how it's addressing this health-care transformation.

I hear every day from folks in my constituency, in the constituency of Union Station. I heard it every day as a front-line service provider as a psychiatric nurse and as an addiction specialist how challenging it is for

folks to be able to access the services that they need in Winnipeg and beyond Winnipeg.

And so, again, I ask this minister: What are you going to do—what is the minister going to do, rather, to address the fact that we're now at 12.7 per cent for 2017 and '18 in terms of who's presenting to the emergency room and being admitted? And that clearly indicates a sicker population. Manitobans can't afford to continue to get sicker and sicker as wait times continue to increase. Staffing shortages continue to increase and nurses are working more and more overtime.

Mr. Friesen: I'll tell the member what our government is going to do.

I said just earlier this afternoon in question period, that with the end of the planned changes at Seven Oaks General Hospital, we have largely completed the planned changes that form the largest health-care transformation in the Winnipeg Regional Health Authority in our generation.

They are changes that are bold but are designed to decomplexify our health-care system, to help the system work more effectively as a single system, not where we have such a variances from site to site to site, from hospital to hospital, level of care, standardized nursing hours. All these differences in the system, they—those differences do not lend themselves to one coherent health-care system, which should be our goal. It's why we have said better care sooner for all Manitobans is the goal.

What is the government going to do? We're going to hire nurses. I want to remind that member that we have, since the 1st of June, hired 128 new hires at St. Boniface Hospital. Of those, 56 were external hires and 72 were internal hires. Beyond that, we have hired 258 new positions into the WRHA at Health Sciences Centre, at Shared Health, at St. Boniface Hospital and throughout the system. This includes the opening of 10 monitored treatment spots in emergency department at St. Boniface Hospital. This includes additional resuscitation spots in the emergency department at St. Boniface Hospital. This means more than 30 additional emergency department and 30 speciality resource team nurses since June.

We are continuing with our recruiting, with our on-boarding and our orienting of new staff to their roles, with the goal of filling all vacancies in the coming weeks. This remains our goal.

The member says, what is the minister going to do? The minister and the department and Shared

Health and all the agencies involved in this, including the WRHA, will continue to fill vacancies, stabilize the system and help throughout the system, where significant changes have taken place for these new teams to become oriented to work together and to co-ordinate care better.

But let me be clear. When it comes to the 12 per cent increase that the member cites in increase of admission, let us be clear that admission rates are important but what is more important, of course, is that people are getting the care they need. It may need that it was more appropriate, in this case, for these people to be admitted than to be treated and then released.

The issue should be about the care we need and how we are providing it throughout the system. We are convinced that the significant changes we're undertaking in our system are having effect of getting better care and over time we know that not just these investments but also the ones we've brought in respect of adding bed capacity throughout the WRHA, which we are referring to as stabilization beds at multiple sites.

* (15:20)

This represents another one of the investments that are necessary. But beyond this, what I want to point out to that member, because they asked a question yesterday: What did you do about David Peachey's quality assurance review? And I cannot overstate the importance of the changes that we made to planning throughout all of these changes.

When we started in on the WRHA changes, there was no Shared Health to point to. And so, really, the WRHA was on its own, planning and implementing site to site and centrally and it was a huge challenge to take on.

Dr. Peachey pointed out that it would be a good idea this spring to bring Shared Health into a better participation along with the WRHA. That has been done. In some cases, chief medical officers have been replaced. Leadership has been renewed. Site hospital leadership has come into the room, with transformation leadership team.

When I pointed out just moments ago about an investment at Health Sciences Centre to see a lower acuity minor ailment space come up, that is the demonstration of leadership that is able to—

Mr. Chairperson: The honourable minister's time is up.

MLA Asagwara: So I hear the minister saying that in order to address the fact that Manitobans—that folks presenting, rather, to the emergency room are getting sicker, I hear the minister saying that in order to address that, they're going to hire more nurses.

I find it difficult to understand what the approach might be, given that we know that nurses are leaving the province due to working conditions. We also know that nurses have not been duly consulted in the process of this health transformation the government has undertaken.

We know that nurses aren't happy. Health-care aides aren't happy. We know that there are concerns across the board.

I'm curious to know how the minister would motivate nurses to stay in the province and work in facilities that nurses are leaving because the conditions are so poor due to this government's rushed and hurried health care—health-care transformation.

The lack of consultation and the lack of listening to front-line workers in our health-care system has real impacts, not only on front-line service providers, but also on Manitoba families who are simply trying to access health care the best way possible.

And we will continue to see Manitoba families and health-care providers express their concerns and really struggle to get the hair that—the care that they deserve as a result of not listening to the folks who are expressing these concerns.

I'm curious to know if the minister could please clarify the 258 positions that you stated were hired. Can you provide a breakdown of what those positions are? There are over 1,300 vacant nursing positions in the WRHA alone: 258 hired positions, even in nurses, wouldn't cover a significant amount of those vacancies for nurses.

So, if the minister could please clarify, out of the 258 hires that you—that he's just mentioned, what the composition of those hires are, that would be wonderful; and how they intend to satisfy the nursing shortage in the WRHA to ensure that, as he said, folks will stop getting sicker as a—partially as a result of the lack of nursing staff that should be in our health-care system?

Mr. Friesen: I would remark that question after question I continue to receive on the part of that member—anecdotal. The member refers to the nurses with which—with whom they are talking in the system and there's lots of anecdotal and 'conjecture' coming

back from the member. I recognize the member is new to these chambers and that it will take some time to facilitate a grasp of some complex issues, but I do want to point out that a lot of that is anecdotal.

So when the member suggests that there is a trend happening whereby nurses are leaving this jurisdiction in greater numbers for other jurisdictions, I'm going to put out the call to this member to substantiate that claim. I can indicate to that member there is no suggestion by the college of registered nurses in Manitoba that there is any anomaly in the data whereby people are departing Manitoba in greater numbers for other jurisdictions. There is no anomaly in the system that is pointed to in regard to nurses retiring or leaving the profession. So I am anxious to receive any evidence that this member can point to if it's greater than just the conjecture and anecdotal evidence they've pointed to so far this afternoon.

I also want to indicate that clearly, as I pointed out, 256 new positions hired just since July the 1st in the WRHA. There is a well-worn and tediously repeated pronouncement by the NDP that somehow hiring isn't happening in the system. That's not true. Hiring continues to go on.

But I want to be clear that when it comes to our ability to work within the collective agreement to hire into vacant positions, we do have challenges. And we have challenges in this jurisdiction that are disproportionate in comparison to the challenges faced in other jurisdictions in health care and in respect of nurses to hire into those positions. Manitoba as a jurisdiction is more complex and has not made changes that other jurisdictions have done to facilitate the more efficient hiring practices. We have in this province some very significant technical and administrative barriers, old-fashioned ways of doing business.

Let me give one example. If there is a position posted today at St. Boniface Hospital for a nurse and there are 40 applicants to that position and then there is a process by which those applications are vetted and interviews are undertaken and an adjudication process is sought and a decision is made, the 39 non-successful applicants have their applications tossed out. And there is in Manitoba no ability to take those 39 other applications, keep them on the desk and immediately enter into consideration for other available positions.

* (15:30)

I say this not as a complaint. I say it in order to scope up what should be an obvious opportunity for a win-win between nurses, between the Manitoba Nurses Union and this government, because all of us are aligned in the goal of wanting nurses to work in this jurisdiction.

This member and her colleagues have heard me say there is a job for every nurse who wants to work as a nurse in Manitoba, but we could do it better. And to that end, we have facilitated and tasked a group within government to work to address the technical and administrative barriers. We would welcome the co-operation and collaboration with the Manitoba Nurses Union in order to find workarounds, in order to find—find ways, even in the interim, to expedite the hiring of nurses.

I am sure that given the creativity and innovation of all of us, we can find ways to do this better, and that is our goal. So we focused on hiring nurses, but I'm hoping to sit down in short order with the Manitoba Nurses Union and then to invite better co-operation and collaboration around the shared goal of making sure that we can hire nurses into roles that stay vacant right now too long because of challenges that the NDP never addressed.

MLA Asagwara: The—to the minister's comments made yesterday, actually, about—the minister made comments yesterday about nurses having the opportunity through the health-care transformation to reinvent themselves. And today the minister is talking about the application process that many nurses have to go through in order to obtain employment in any given area of health care.

I think it's important to note that nurses specialize and nurses go through a tremendous amount of training to get the qualifications to work in any given area, and that having to reinvent one's area of desired work is a—for many nurses is simply a task that would require resources they don't have. It would require a decision that would be very difficult for many nurses to make, given that, again, like anybody in any profession, pursuing your passion and working in the area of service that you feel really connected to is something that a lot of folks, a lot of nurses train and study and work very hard in order to maintain.

And so the—I just wanted to make that note, that many nurses work very, very hard and study very, very long in order to be able to enjoy their careers in the area that they choose. And it's—it has been the notion that, you know, nurses can simply reinvent themselves. Nurses are very capable, and certainly, if

they choose to, can do so, but that we should perhaps be treating our nurses and front-line workers with a bit more respect than that.

And I'd like to ask the minister to please clarify. I did ask in my previous question, so if the minister could clarify, these 258 positions that were hired into, what is the breakdown of those positions, please?

Mr. Friesen: So my staff are working on a breakdown of that data at this time.

I want to respond to certain comments made by the member. First of all, everyone respects the fact that nurses in our system work long and work hard. Many of those nurses are my personal friends, and I also have anecdotal evidence back from those nurses who are working the system; sat with a nurse at a Winnipeg Blue Bombers football game, and while the game was disastrous, we had a good conversation about the state of the system. As a matter of fact, the game was so disastrous, that it facilitated a more fulsome examination of the health-care system.

And here is what that nurse told me: essentially, that nurse told me that she is young and she is new to the career, but she is highly trained and working at a job that right now makes her work hours she doesn't want. She told me that she's willing to work through the system to advantage herself and get ahead and to take positions that might lead ultimately to the one that she really has her eye on.

I admired the honesty and the openness with which she spoke. But she clearly pointed out that there was no magical period in nursing at any time, and that some of the challenges that faced nursing in Manitoba are challenges that have been there for a long, long time.

One of those challenges that she pointed to, and I would like to underscore for a moment this afternoon, is the challenge created by bumping. And bumping is that terminology we give to that ability under negotiated terms of the collective agreement for a nurse to signal that they will have priority in a new position because of their seniority in the system.

Now, while in principle, we don't have a principled issue with the idea, as a result of bumping, when such a significant reorganization of the system is taking place; as I say, a reorganization that is rationalized for all the right reasons, because we've had one of the most expensive systems in the country, because we've had some of the longest wait times that under the NDP went unaddressed year after year after year.

I remind that member that since the time I sat in this Chamber in opposition, in one year Grace Hospital had the longest ER wait times in all of Canada. And the facility with the next longest wait times in all of Canada was Concordia Hospital, under the NDP. And every year they said they'd do better and they did not.

However, when it comes to bumping, what this means is that it takes time. It means that hiring nurses becomes a highly sequenced activity where the process must start from the bottom again and continue to the end, and then start from the bottom again and continue to the end. I am suggesting this afternoon that in collaboration with the Manitoba Nurses Union, with the tasking of this challenge to a specific group to facilitate a more efficient and effective means of hiring a larger number of workers, that I am optimistic that we could make progress in a way that respects collective bargaining and in a way that satisfies the needs of both the union, of its members, and of the facilities and the patients that are being served.

Now that member seems to say that there's no good reason to look at extra-jurisdictional comparisons. I disagree. I think we should always be driven by a need to look at best practice.

That member says nurses are highly specialized; therefore, you should not look at any kind of change in the static and current way of doing business. I strongly disagree with that assertion by the member. I think that this is exactly evidence of the kind of thinking that kept the Manitoba health-care system from evolving. And I hope in my next answer to be able to talk about the necessity of a system to evolve.

Our systems, our hospitals, were contemplated at a time 40 and 50 years ago where health care and technology and chronic disease and the impact of urbanization are all having an effect on our health-care system. We have to be responsive to these changes. For years the NDP ignored them. They threw more money at the system and hoped things would get better, while other jurisdictions were modernizing and getting better results.

We want those better results. We believe they're in—they're within reach for the first time in a long time in Manitoba.

MLA Asagwara: Does the minister think that it's best—the minister just spoke to nurses choosing to change their career path or their area of expertise at any point in their career. Of course, nurses are able and often do make those decisions for themselves if

they would like to make a change in their area of expertise and make a change in what hospital they practise in or what area they practise in or how they practise in medicine or health care.

Does the minister believe that that is a decision that should be forced for Manitoba nurses or is that a decision that should be in the hands of Manitoba nurses to make for themselves?

* (15:40)

Mr. Friesen: Before running for office, I taught in the public school system for 12 years. I was highly trained. I had three degrees in performance piano from three recognized universities. And my first job involved me teaching social studies to a group of 36 students. It wasn't the area of my specialization, but over time, within the system in which I taught, I was able to work my way up, because of seniority, because of my collective agreement, in my placement, because of my performance, I would argue.

If the member is trying to get an admission, somehow, that somehow we're not respecting nurses she won't get it, because nothing could be further from the truth. Nurses, like the one that I spoke to at that Blue Bomber game, that one indicated her preference was for 'obsetrics' and that nurses could indicate a preference to work in internal medicine or obstetrics, or orthopedics; they could indicate that they want to use—work in critical care, or emergency work. We're not talking about the ability of a nurse to indicate a preference. We're not talking about a nurse's ability to additionally train, to specialize in their area.

We all know that some nurses are highly specialized in their training and continue an on-going education to specialize even more. But we also know that our system, our health-care system, should behave as a system, it should behave as a health-care system. And we know that in other jurisdictions, much more work has gone into transforming the system to standardize practices and procedures, scheduling and rotation.

Many decisions, I would argue, would go into a nurse's decision about where they're going to work or in what capacity they're going to work: location and geography; whether they prefer days, or nights, or evenings; rotations; the FTE choice they make. All of these can go into their choice about which job they would make.

What we're talking about is a system in Manitoba that has not evolved the way other systems have evolved, and if that member wants to suggest that

improvements could not be made to the manner in which we are filling vacancies for nurses, let them suggest it this afternoon. But certainly, I would not make that suggestion, because I'm in the possession of knowledge that bumping takes too much time.

As a matter of fact, we have, even recently, had questions from the NDP about why there aren't more external applicants coming into the system. The way our system works right now, it can be weeks and weeks before the practice even allows for an external solicitation for new applicants to get made. That should be tightened up. And I am suggesting today that that work to improve the system would be in the best interests of patients, in the best interests of nurses who are looking for jobs, in the best interests of their labour organization who is looking to fill those positions for their members. It is a shared interest that we have. And shame on us all if we will not explore to the fullest ability and opportunity the—that potential to improve our system.

I want to go back to something that the member said earlier. She said that nurses weren't consulted. It's not true. Nurses, throughout the changes taking place in this system, have been consulted. I remind that member that when it came to the Province's clinical and preventative services plan, nurses serve on every clinical planning team in the province. And I believe there are 15 or more of those separate planning teams.

We know that when it came to the quality assurance review undertaken by Dr. Peachey, a consortium of nurses was the first meeting that Dr. Peachey agreed to have on one of the first days that he was back in the jurisdiction. The Manitoba Nurses Union sat on the original advisory committee for the Dr. Peachey original report, as did Doctors Manitoba.

That member may try to advance a theory that nurses were not consulted. That theory is not founded on anything factual.

MLA Asagwara: I'd like to gently remind the minister that my pronouns are they/them. The minister continues to use other pronouns. Just a gentle reminder.

We've heard from nurses in Manitoba that they don't feel their voices are being heard, that they continue to struggle to manage patient-care loads, that they are being overwhelmed with providing best care to folks accessing emergency rooms. These are concerns that have been repeated by front-line service

workers time and time again since this health transformation has taken place and has been rushed.

Wondering if the minister could provide a bit of information in regards to nurse overtime in the WRHA. We know July—I believe the number for July 2019 was just over 35,000–35,800 hours. Wondering if the minister could provide nurse overtime for the WRHA from quarter 3 of 2018 to whatever is most recent. If he could provide that—if the minister could provide that quarterly, that would be wonderful. If that's not available, then monthly would be great.

Thank you.

* (15:50)

Mr. Friesen: Let me be clear; we need nurses working in our health-care system. There is a job for all nurses who want to work in our health-care system.

We as a government believe that if there is opportunity to improve the way we hire nurses to make that process more efficient and more effective, if there is an ability to collaborate with labour organizations and with nurses and other organizations, not just the labour union, to facilitate a better process there, we welcome the exploration of that.

And this member has yet to indicate whether the NDP supports such action to change for the better how we are hiring.

We know that there is too much administrative and financially—finance and background complexity when it comes into hiring nurses. That process is then exacerbated when large, fundamental changes in the system are undertaken. We have taken these changes in order to improve our health-care system.

Nevertheless, I remind all members that under our government, in 2018 alone, we saw 201 additional nurses added to the WRHA over the previous year. I can recall, it was only a few months ago where the NDP tried to misrepresent that. They went out in the hall. They tried to suggest that the number of nurses working in the province of Manitoba and in the WRHA was down, not up.

And, in fact, within a number of days, I believe they had to retract their statements. They walked those statements back, because they recognized they could not get around the evidence that showed 200 more nurses working in the system.

And that's the way the NDP pays—pays fast and loose, like the member for Point Douglas (Mrs. Smith) this afternoon, where she stood in the House and

indicated that our government had no plan to deal with mental health and addictions, and yet, she had, over the period of three hours, the day before, heard us explain in great detail the individual aspects of a comprehensive continuum, a suite of investments that we are making into mental health and addictions.

So we can have that conversation again. Our government, in this campaign, pledged to hire 200 more nurses, over the next four years, as part of our \$2-billion health-care funding guarantee improving patient safety while reducing the utilization of agency nurses and overtime.

And let's talk about agency nurses, because the member mentions it. Agency nurse hours were never higher than what they were under the NDP government. Agency nurse hours in the year 2014-2015 reached 20,000.

There was no transformation of the health-care system going on. There was no new identified role for the community hospitals and an articulated role for the tertiary hospitals, as we have introduced to the system, changes we know that will benefit patients across the system, and yet, in that year, 20,000.

And how'd they do the next year? Still 15,000. And we know that our use of nursing—agency nurse hours will improve as we continue to hire nurses into our system. We want to stabilize the nursing numbers in our system, but let none of us pretend that the changes that have been underway are not significant changes.

Think of the changes that have taken place in Concordia Hospital. Concordia continues with its important role in orthopedic surgery. The emergency department no longer operates, but, in its place, a urgent-care centre serving that community, intensive care services shifting to HSC and Grace Hospital. The in-patient care focuses on community hospital medicine and rehabilitation. It's the movement of the neurosurgical unit for post-acute to Concordia Hospital, and so these are very significant changes.

And this is just one hospital, and perhaps I should take some opportunity this afternoon to explain how these various changes in the system will actually improve not just patient experiences—we believe, over time, will drive down the emergency wait times that under the NDP went higher and higher and higher without explanation. But they're very significant changes. We're committed to stabilizing the nurse numbers. We're committing to hiring more nurses. We're committing to a \$2-billion health-care

investment over the next four years and this is the only part of the investments we're making in the health-care system.

MLA Asagwara: The minister talks about the nurses that they plan on hiring. The minister currently has a—have very difficult time hiring nurses in the conditions as they are. The minister, like the rest of us, can see nurses raising the alarm, sounding the alarms in regards to what's going on in their emergency departments, what's going on as they're trying to provide care to Manitobans.

The minister hasn't clearly identified how they intend to recruit nurses, given that nurses who are currently working are making it very clear that working conditions are not satisfactory; that, in fact, they're extremely concerned with the changes that have been going on and how that's impacting those working in front-line services and those trying to access health-care services.

So can the minister please provide some detail around the—his plan on recruiting and retaining nurses into this health-care system?

Mr. Friesen: Mr. Chair, let me be clear. We support that hiring of nurses. We clearly see that our system, because of certain facets of the collective agreements, it takes too long to hire into vacant spots and, of course, this is seen—and demonstrated most clearly—in a time of more significant change that requires more people to perhaps change where they work or how they work or with whom they work. That is going on right now and we all are aware of the fact that there are significant changes taking place in our system.

But the NDP seems to offer no signal that it's open to the idea of exploring a better way to do that and, of course, we think that just flies in the face of common sense. If every jurisdiction in Canada has found a way to hire more effectively and efficiently and quickly into vacant positions, then why would this member suggest that that shouldn't be done here in Manitoba, when we know system experts say that Manitoba is the outlier.

* (16:00)

But all of this goes back to the need for health care in Manitoba to evolve.

I want to point to an article by Stuart Greenfield, who was appointed to two RHA boards by the NDP, and who wrote, only a few weeks ago, that it's been said—and I'm quoting from his September 17th, 2019, op-ed in the Winnipeg Free Press—that if you continue

to just increase funding for health care at the same rate that we have over the 20 next years, eventually there'll only be two departments in government: finance and health.

He goes on to say that 20 years ago, each hospital had its own board and administrative staff, and each facility provided a full range of medical, auxiliary and support services, all competing for the same dollars to provide the same services to overlapping populations. And he goes on to say that as the system faced mounting pressure to service the growing community, individual facilities began operating at a deficit. At that time, under the NDP, he says, that Manitoba Health directed that no services be cut or staff levels reduced and so every facility worked hard to find efficiencies but, ultimately, it was insufficient and so the system suffered.

And he goes on to say that what is needed is that we modernize our system. He says by consolidating all emergency care in three hospitals, system was creating three specific facilities that are designed to treat the most critically ill; they are becoming our equivalent of trauma hospitals, that are in common with many large American cities. The other benefit of the recommended changes was to establish centres of excellence where specific hospitals focused on specific procedures and illnesses, so they could be better and more efficient at treating those specific problems, leading to better patient experience and better outcomes.

He goes on to say the following: he says there have been stumbles, but we are talking about a change to a massive system with multiple sites, thousands of staff and thousands of patients. When health care is involved, change can be frightening and emotional. We rely on our hospitals. But, the realities of the system could not continue the way that it was. Most of us were taught to go to the hospital first, but we know today that that is the most expensive and the least efficient way to operate a health system.

The only real way to reduce strain on hospitals is to address the needs before you require a visit to the hospital. There are many difficult decisions that lie ahead, this writer goes on to say, and hard work to do, if we are to reimagine our health-care system to meet the challenges of a growing and aging population. But the alternative, he says, pretending that yesterday's system is sustainable, and throwing more money at it as a panacea would be the gravest mistake.

Stuart Greenfield is a sales and marketing consultant who has served on the volunteer boards of

Seven Oaks General Hospital and the Winnipeg Regional Health Authority. I remind all members of this House that he was appointed by the NDP to those positions. I think there has been—there have been few articles more insightful about the need for these changes, but also the hope behind them. Why we're doing these things in the first place is to get better care, sooner, for Manitobans.

MLA Asagwara: The nurses have made it clear—the nurses have been making it clear, for several months—nurses have marched, nurses have been here at the steps of the Manitoba Legislature in hundreds, in hundreds, making their voices heard, expressing their concerns, making it clear that under the current conditions—conditions that have been challenging—increasingly challenges—challenging over the years, since this government began this health-care transformation, they've made it very clear that they simply do not have what they need in terms of staffing to do their jobs to the best of their abilities.

The vacancy rates continue to increase. The minister, unless I've missed something, has not clearly laid out or indicated what he's going to do to ensure that these vacancies are filled. Nurses are letting us know that they need more nurses to work with, in order to perform their duties and make sure Manitobans can access the health care that they deserve.

The—one of the marches, the protests here, we saw nurses who clearly didn't agree with the government's approach to recruitment, as many nurses wearing spa-like masks on their faces indicating that they weren't happy with the government's—some of the government's approach to recruiting and retaining nurses in this province.

I'm curious to know, and I'll ask it again, what is the minister's plan to recruit and retain nurses to work in this health-care system, especially given that nurses today, nurses over the past several months, have made it very clear that working within the system is quite challenging, and they've been sounding the alarms in terms of the care that they can provide, and obviously, you know, nurses, or future nurses, have seen this as well.

And so what is the minister's plan to recruit and retain nurses to work in our health-care system?

Mr. Friesen: Again, I mean, conjecture from the member and they're welcome to it. I'll go back to evidence. I feel like the member in some respects won't take yes for an answer. They continue to say,

what will the government do? Well, the government's doing it.

The government has—well not directly of course, but the regional health authority has hired 256 new individuals into the system since June the 1st alone. The—128 positions of those are at St. Boniface, others throughout the system. But remember, we're not only just talking about the effect of the restructuring of the system, our government is growing the health-care system and adding capacity to the system.

The member has yet to ask a single question about the stabilizer beds. When they ask for evidence of investments in the system, and we say 42 stabilizer beds coming online right now, remember that there's an impact that there is a nurse provision of care necessary for an additional 42 beds brought into the system. Beds that I would remind the member will help to facilitate better patient flow. But there's also 16 cardiac beds introduced into the system at St. Boniface, all requiring allied health and nurse and doctor resources to coalesce around that new resource.

We have new community-based nursing positions. All of those must be advertised. All those positions will be filled. Our government is proud to be opening the significant expansion at Holy Family personal-care home, which is introducing the need for new nurses in the system.

Of those stabilizer beds I just referred to, 12 lower acuity at Concordia Hospital. Twelve of those beds, acute beds, at Health Sciences Centre; nine of those acute beds at St Boniface general hospital, nine of those acute beds at Grace Hospital. And all of those are adding capacity to our system.

So the member asks: What is the government going to do? The government's doing this: the government is facilitating the hiring of nurses, the government is increasing the resources within the health-care system which require more nurses yet.

The government, though, is also doing the following, and I will once again underscore, that we have brought together individuals at a—within our organization to work to solve the problems of a process that conventionally takes too long to add nurses into our system. The member should take consolation in the fact that the government is actually addressing what their government for years and years left unaddressed.

* (16:10)

I don't know why the former government wasn't more anxious to solve the questions around the sequencing of hiring, the long periods of time it takes to get to an external contest, the high level of administrative and finance framework that didn't lend to the more expeditious hiring of nurses. I don't know why the previous government didn't attend to those challenges. Other jurisdictions were attending to them. As a matter of fact, we know now that Manitoba is the outlier when it comes to its practices.

Let this member put on the record that they support efforts to facilitate the faster hiring of nurses. And yet they won't do it, even in this proceeding this afternoon. They will—surely, we would all agree that good ideas are good ideas, wherever they're found. We are soliciting for the involvement of labour, for the involvement of other groups, including the Association of Registered Nurses in Manitoba.

That member suggested today that nurses do not support the changes within the system. I would want to update them this afternoon and let them know that the Association of Registered Nurses in Manitoba supports the changes that are under way in the health care. They support a modern nurse workforce. They support changes to facilitate nurses being skilled and equipped in a modern setting to work at their greatest scope of practice to administer the greatest level of care.

How do I know any of this? We've met with them. We've met with the association for registered nurses in Manitoba, and the message we are receiving from them—

Mr. Chairperson: The honourable minister's time is up.

MLA Asagwara: I think it's clear that the—this government—the minister, they don't have a clear plan. There is no clear plan on how to successfully recruit and retain nurses during a time where nurses are making it clear on a regular basis that they do not have the resources they need in the form of staffing in order to provide the health-care services that they would love to be able to provide to folks accessing whether it's emergency rooms or health-care services in Winnipeg and in Manitoba.

We know that the rates in terms of folks presenting to emergency rooms and being admitted are increasing. They've gone up every year since this government came into effect in 2016. It's 12.7 per cent in '17–2017 and 2018. People are getting sicker, wait times continue to go up, vacancies continue to

increase, nursing shortages continue to exist. And this government has no clear plan on how to address this.

This is something that should be concerning—is concerning, I know, for many Manitobans—clearly concerning for Manitoba nurses. And it is something that I'm going to continue to ask the minister about because nurses deserve an answer and Manitobans deserve an answer on—in terms of how this government is going to make sure that these new beds that they're super excited to tell us about—how are those beds going to be staffed? Who's going to provide care for folks in those beds? How are you going to get folks in those beds if you don't have the staffing for them? That's a reasonable question to ask.

The minister has talked about 128 positions at St. Boniface Hospital, out of the 256 hires since July. Can the minister explain—can the minister provide information in regards to a further breakdown of those 256 positions that he says were hired for and some clarity around the 128 positions that were hired for at St. Boniface Hospital out of a—those 128 positions at St. Boniface, how many of those are nurses?

Mr. Friesen: The member is wrong and the government has a plan. Actually, what Manitobans can take away is that for the first time in Manitoba, when it comes to health care, there is a plan. There's finally a plan. And Manitobans waited for years and years.

I was the critic for health care, asking at the time the minister for evidence of a plan that would lead to lower wait times. And I remember talking to the minister at the time—for some of the highest wait times we had seen. And there really was no plan. There was emphasis on spend, but we were already one of the highest spending jurisdictions per capita in all of Canada. But there was no evidence of system modernization. And that is what we need. It's been said by Dr. Peachey, it was said in the KPMG report, it's been said by many experts within our own system that Manitoba's health care system is overly complex for the size of jurisdiction.

And why is over complexity a problem? Because it creates a lack of co-ordination and efficiency. Everything becomes longer. It takes more time. The navigation takes longer. What do we mean by complexity? Well, Manitoba's health-care system is in operation with 55,400 employees.

It has three funding departments. It had eight health authorities, 200-plus delivery and stakeholder organizations, 187 bargaining units in health care

alone, 7,500 business processes, 700 computer systems, 68,000 supply chain materials. Two federal departments, nine cities, 70 towns, 135 RMs and 63 First Nations communities operating under 56 statutes, 100 regulations and, as I said, 182 collective agreements and 250 service purchase agreements. That's a massive system.

And that member, nor anyone in the NDP, will take the first step of acknowledging that Manitoba's health-care system is the outlier. And they will 'nitpig' on individual details of the plan without acknowledging fundamental successes that are taking place right before their eyes. What are some of those successes? Well, as recently as June—or May, pointed out in that quality assurance assessment of the clinical consolidation plan, under David Peachey. Those successes included a 17 per cent improvement in emergency wait times over the three-year period that preceded it. It includes a historic low in wait times for placement in personal care homes in Winnipeg. It includes improved patient care from consolidating mental health services in three hospitals down to one hospital at Victoria, which has allowed for the opening of an additional 14 mental health beds that were not open before. It has allowed—it has resulted in the development of a more integrated community intravenous program at Misericordia Health Centre.

There have been so many successes in areas like indigenous health, surgery, mental health and addictions. This is not coming from your government. This is coming from the system leaders in the WRHA and across the province.

So, if the members want to squabble with the information I just required, I will give them the contact member—information for the system leaders who are the ones trumpeting the benefits and improvements in the system. And yet those members say go back.

In the absence of anything resembling a plan over months and months of pre-election and in the election, they used fear and obfuscation and distortion to try to create, in Manitobans, a wariness so that they would elect the NDP. And what did Manitobans do?

Today I made a point of proudly welcoming, and welcoming back, to this Legislature, the member for McPhillips (Mr. Martin), the member for Transcona-River East, the member for Radisson (Mr. Teitsma), the member for Rossmere (Mr. Micklefield).

* (16:20)

Why did I do that? Because the Leader of the Opposition said there would be an orange wave in the northeast sector of Winnipeg, and instead what we saw was a blue wave.

There is one thing that the NDP is saying. There's another thing that Manitobans are saying, and that is—

Mr. Chairperson: The honourable minister's time is up.

MLA Asagwara: I've asked the minister for some clear information. The minister has talked at length about creation of new beds, about new nursing positions. We currently have increasing rates of—increasing vacancy rates for positions, including nurses, so I—forgive me, I'm just a little confused as to how the minister plans on actually filling nursing positions when we have increasing nursing shortages, and the minister seems unwilling to even provide information in regards to how many nurses were hired out of the 128 positions hired for at St. Boniface Hospital, where we know that nurses are sounding the alarm in regards to not being able to provide the care that they would love to be able to provide based on staffing shortages.

So again, I'd like to ask the minister to please provide a breakdown. Out of the 128 positions at St. Boniface, how many of those positions that you've hired for are for nurses?

Mr. Friesen: I can inform the member that officials are working at this time at a breakdown, site by site, but I appreciate the fact that she continues to reinforce, as we have said, 128 new hires at St. Boniface Hospital—or that they have said—sorry, I'm endeavouring to use the proper pronoun—that they have said that there is 128 new nursing positions at St. Boniface Hospital, 258 positions.

And I should provide a clarification. The news is better than I first described it, because it would seem, after conferring with my officials at the table, that the information I—that I provided was specific only to Health Sciences Centre and St. Boniface Hospital. The 258 hires are specific to only two sites in the WRHA, and we are working at this time to provide the additional hired nurses and other professionals who have taken their place across the system at places like Concordia Hospital, Seven Oaks hospital, Misericordia hospital and Grace Hospital.

I'll revert back to a question the member raised earlier this afternoon, and they commented on the nurse ads. And I'll take this opportunity to comment

on the nurse ads, which I've found to be absolutely obscene and said so as soon as I saw those in print.

This government worked very hard to undertake to understand how such ads could have been generated within our department and by third-party contractors. We apologized on the very first day and said that in no way, shape or form did those ads reflect the opinion of this government or anyone in government when it came to nurses. We worked hard to find out whose profound lack of professional judgment would have led to such a series of ads. People in the system later said they wanted to go in a bold, new direction. That's an unsatisfactory explanation.

I personally signed the letters of every nurse who contacted me—personally signed those messages and sent back to them an apology that said that in no way, shape or form did those ads reflect the opinion of government. I can inform all members that changes were made that will ensure that such an egregious lapse of judgment is not made in future for anything having to do with a solicitation for nurses to come and work in Manitoba.

The member for Point Douglas (Mrs. Smith) has repeatedly said that we failed to apologize. We apologized on the very first day. I've personally signed every note to every nurse who contacted me. Those were pretty bumpy letters to read. It's the responsibility of the minister to read them, and I did.

And so we take responsibility for that. Didn't create those ads, no way did they reflect the opinions of our government, but I'm only too happy to talk on the record about what we want for nurses. And what do we want for nurses? What nurses want, to work in a health-care system that works for them, that allows them to move ahead, that allows them to move to the fullest scope of their area of practice, that allows them to move through the system without such siloed approaches, when it come to human resources and hiring, that constrains them.

I'm thinking right now about—and we haven't had a chance to explore the very, very recent reduction of the number of bargaining units in health care. When the summer began, in Manitoba there were 188 bargaining units in health care. The vast majority of those being in the WRHA. Compare that to Saskatchewan, Alberta and British Columbia combined that had less than 20 bargaining units.

Now imagine what it means for a nurse working on a ward who perhaps has one set of standardized

leave requirements for bereavement and a colleague down the hall that has a totally different one and they work the same job, and it makes no sense. And we simplified the system and we worked with labour, and I'm proud to say that there are under 40 bargaining units now in the province of Manitoba. And I would invite further questions from that member about how we are working on behalf of all nurses to create a simplified system in which they can work.

MLA Asagwara: The capacity in the system in terms of—we know what's going on with capacity in the system. We know that staffing shortages are increasing. We know that the vacancy rates have been increasing. We know that we—this government hasn't been able to recruit and retain nurses and fill those vacancies effectively.

We also know that since 2017 that we've seen a decrease in available beds in the WRHA. Those numbers—we're looking at about 130 beds since 2017 to April 1st of 2019. And I'm wondering if the minister can explain that change. And I know the minister's talking about new beds coming into effect, but if the minister could provide some clarity around the fact that we've seen a decrease in available beds in the WRHA, that would be great.

* (16:30)

Mr. Friesen: In answer to the member's question, it's important to keep in mind that we want our health-care system to function as a totally integrated system.

Mr. Andrew Smith, Acting Chairperson, in the Chair

And when they ask the question, asking questions particular to hospitals, and they're making the assumption that the current number of beds in the system is the appropriate number of beds. I'm not sure the benchmarking that's taking place because of that.

But what I would point to is the significant investments that our government is making—*[interjection]* Yes, in hospitals—and we just had a discussion moments ago about stabilizer beds and cardiac beds and other beds in the system that we're creating. But we're also creating capacity throughout the system outside of the hospital. That has to be factored in, because I think the member would recognize that what is important in the end is—when it comes to hospital—in a hospital stay, would be metric—measuring metrics like length of stay.

Now, we know that according to the Canadian Institute for Health Information we have a ways to go yet in Manitoba in order to reduce the length of stay

for people in hospital. We know that compared to other jurisdictions that we keep people longer. There are some areas, of course, that we know we're doing better and better in, including our re-admission rates where we know we've continued to do well. That's an important metric and we follow that one.

But when it comes to length of stay in a hospital, I want to inform that member and all members of the House that we're making progress. As a matter of fact, we know now that currently in Manitoba less than 7 per cent of patients in a hospital at any one time are in non-acute care—*[interjection]*—in Winnipeg hospitals, non-acute care.

In other words, we're saying that the percentage of patients that are in the hospital for acute reasons is increasing and we want that. We want people who are non-acute to move through the system back to community. For clients who need to move on to a personal-care home, we want to facilitate that.

I would point to investments we've made as a government like Priority Home and transitional care which have enabled us to move people into community, sometimes facilitating their movement back to home after stabilization. And our investments in home care are also facilitating this.

So I say that to caution the member, to say it would be a mistake to focus solely on hospitals without recognizing that we must examine the system as a totally integrated system. Yes, we've made good investments. Yes, we've driven down wait times in the WRHA for personal-care-home placement to almost historic levels.

When it comes to comparing our—that non-acute-care ratio, I understand that in Ontario that can be as much as 30 per cent in hospital of non-acute care. In Manitoba now, driving that down to 7 per cent. That represents a significant improvement in the system under our government's leadership. There is more work to do, but certainly that is evidence of the ongoing improvement of our system—metrics like length of stay, yes, metrics like admission rates, metrics like emergency department wait times, which we know are trending down over time.

This—today, the Leader of the Opposition expressed concern about wait-time levels in the WRHA that he knows are under any wait-time level under the last few years of the NDP. If measured from the start of our transformation—if measured from the NDP, wait times are down in Winnipeg and across Manitoba.

MLA Asagwara: We know that under this government, the wait times continue to go up.

We also know that—actually, before I get into my second question, I actually wanted to go back.

If the minister could please provide some clarification around a question I asked earlier in regards to nurse overtime in the WRHA. So I had asked for the details from quarter 3 of 2018 to whatever's most recent, and if that—if quarterly details are not available, if the minister could provide monthly details, that would be great.

Mr. Friesen: I will endeavour to get the member that information, as they requested.

MLA Asagwara: As I had indicated previously, and the minister had addressed my question, in regards to the fact that, you know, since 2017 we've seen a decrease in available beds in the WRHA—about 130 less beds up until, most recently, April 1st of 2019.

* (16:40)

And we also know, as I indicated earlier, that patients presenting in emergency rooms and being admitted has increased to 12.7 per cent in 2017, in 2000–2017–2018. That's higher than in previous five years.

We know that the vacancy rates are increasing. We know that there continue to be ongoing staffing shortages, nursing shortages. We know that, in the WRHA, hospital re-admission rates within the last—within 30 days, rather, of discharge, are going up. They're increasing. We're looking at an increase from 2017 and '18 all the way to 8.1 per cent in 2018 and '19. So, I think we're getting a very clear, well-rounded picture that we know nurses, front-line service providers, folks accessing health-care services, have all been making very, very clear that things are simply not the way the minister or the government would like for us to believe.

Sure, you can talk about aging population; you can talk about issues around addictions—acute issues around addictions and problematic substance use. But really, we need to look at the evidence as it is. The beds are decreasing, vacancy in terms of positions are increasing, staffing shortages continue. Re-admission rates within 30 days of discharge in the WRHA are also increasing, with 130 less beds from 2017.

What is the minister going to do—and I'll just speak to the re-admission rates within 30 days of discharge within the WRHA. What is the minister

going to do to address this one specific detail? I'll neglect all the other details I presented in that—in my statement and focus on that one detail, if the minister wouldn't mind answering that. Thank you.

Mr. Friesen: I'm asking the member to cite source for the information that they are providing. It's inconsistent with the information that we have. Could the member cite source so that we can more fully answer the question?

MLA Asagwara: It would be the annual report, by WRHA.

Mr. Friesen: I want to clarify, I'm glad that I asked for a source because it would seem that the source being cited is from a year ago, so that's the 2018 annual report.

I would also cite the fact that the change the member's referring to is a 50-basis point percentage change, half a percentage point. And I would point to the fact that the Canadian national average for re-admission rate is 9.1 per cent; 9.1 per cent is the Canadian average and Manitoba remains at 7.7 per cent. We're beating the national average, with a variation year by year that I would suggest is not material. Manitoba has in the past been very proud of holding down re-admission rates. It's important metric.

The member has just used a source a year old to demonstrate what they said was a current issue in the health-care system; we've corrected the record, the Canadian average at 9.1 per cent, re-admission rate, Manitoba at 7.7 per cent.

And, sorry, and just to be clear that is WRHA data, not Manitoba data, but data that is specific to the WRHA.

Thank you.

MLA Asagwara: So the 2018–2019 annual report as per the WRHA does state that re-admission rates within 30 days of discharge is at 8.1 per cent? I'd just like to correct that.

If there's something that we were looking at that's incorrect then I welcome the minister bringing that to our attention.

The, as I stated earlier, you know, 2018–2019 re-admission rate within 30 days of discharge in WRHA's annual report says 8.1 per cent. Number of beds in the WRHA continue to decrease, down 130 beds as of April 1st, 2019. That's 130 beds lost since 2017. Higher admission rates, folks presenting

sicker at emergency rooms, we know that vacancy rates are increasing, we know that nursing shortages continue.

I think that it's important to have conversations and to go over the details as a whole to really understand the impact of the minister's decision making, and not just only on, again, from unserved workers, nurses, health-care aides, doctors, but also Manitoba families. And there are details that I'm hoping to get and I guess a little bit later on, maybe tomorrow or near future, in regards to nursing overtime.

But in its totality it just speaks to the narrative that we're hearing consistently from folks that things are just not going well in the health-care system and—which is why we continue to draw attention to these details and this information and continue to ask the minister what he plans to do to address what's going on in each of these areas.

* (16:50)

And it may seem repetitive, because it is, because it is important that we get these answers. It is important that Manitobans have some clarity around the concerning changes that we're seeing in terms of increased re-admission rates within 30 days of discharge in the WRHA and less beds being available and not enough folks to staff these beds and future beds that the minister is saying they will be generating.

I have a question for the minister in regards to separations, in-patient hospital separations. After falling for many years, the in-patient hospital separations have started to creep back up. Like a lot of these numbers, we're seeing some concerning changes, and the separations include transfers to other facilities and they can be an indirect measure of health of our population.

Can the minister explain why separations are increasing? This is as per Health stats 2017-2018.

Mr. Friesen: Measured in the annual year 2016, when it comes to re-admission rates, Manitoba is under the national average; 2017, Manitoba is under the national average; 28, Manitoba is under the national average; and 2019, Manitoba is, once again, under the national average.

On the subject of the in-patient hospital separations, let me cite a few numbers to provide context. In 2015-2016 there were approximately 83,000 hospital separations in the system in the

WRHA. Contrast that with 2019 where there were 87,000 discharges from hospital. We know, because of the evidence, including the Canadian Institute for Health Information and the KPMG report of our own health-care system, that when it came to length of stay in Manitoba, we were an outlier. Our times, measured against other provinces, were too long in hospital—length of stay being too long. So, as a focus of our efforts to reduce the length of stay appropriately and according to the patients' needs.

Mr. Chairperson in the Chair

So I would suggest to the member, it is a sign of a strengthening system that we are discharging more individuals from hospital—a full 4,000 more—than measured only two years previously. What it is showing is that our system is able to admit, to treat and to discharge in a manner that still allows us to accept more capacity and we've talked about the reasons for that capacity increase.

I remind the member that is not a Manitoba-specific trend. That is a North American trend. A Canadian trend seen province to province to province and territory to territory, whereby presentations are up. We have a growing population. We have an aging population. We have issues with addictions and mental health in our society and in our cities and in our towns and in our First Nations communities. And we are attending to these things. Some of the good investments that we've made are exactly some of the ones that I just described. Like the increase in that sub-acute area of the Health Sciences Centre emergency department, which is able to divert patients of a lesser acuity to a more appropriate level of care—which not only helps those patients but it helps those patients who are awaiting more significant interventions in their health care.

So we acknowledge the numbers when it comes to in-patient hospital separations. We think they're evidence of a system that is getting better at attending to metrics, including length of stay.

MLA Asagwara: I also acknowledge these numbers that the minister just addressed in regards to in-patient hospital separation. I also acknowledge the 12.7 per cent in 2017 and 2018 indicating that folks are presenting sicker at emergency rooms in the city.

I also acknowledge that re-admission rates within 30 days of discharge in the the WRHA are going up. Also acknowledge the number of beds in the WRHA have decreased 130 since 2017.

I think it's important to acknowledge that when you add of these things up and you look at these things together and you listen to the concerns of those who are trying to work within the system and access the system, what's trending here is that things are not working as well as they should be or could be in our health-care system. I think the trend is clear when you see that folks are presenting to emergency rooms at increased rates and then the prior five years we have a sicker population.

We see in-patient hospital separations have increased, as the minister has acknowledged. We know that re-admission rates are increasing within 30 days of discharge and that folks just lack the resources in order to address all of these things—that the shortages continue, the vacancies continue.

The minister, you know, can provide some information if you're looking at in-patient hospital separations, in and of itself alone but when you add these things up and you look at them together, I think that Manitobans have every right to be concerned. I think that it's important we continue to ask these questions. I'll continue to ask the minister the questions in regards to how he plans on making sure that, you know, the capacity is there to address what's going on.

What does the minister plan to do in terms of filling the vacancy rates and making sure that, you know, the staffing actually exists, in order to staff the beds the minister says at some point are coming.

These are all areas that we're not getting a ton of clarity around but, you know, what I'm really concerned about and what we're really concerned about are these trends that we're seeing that indicate that things are not improving—that, in fact, the challenges are increasing.

* (17:00)

And with what we're seeing in our communities, in terms of mental health and addictions and aging population, it's—with a flu season coming, I can only imagine that we're going to be stretched in our health-care system, continue to be stretched beyond capacity. We'll continue to hear from front-line workers and folks accessing health care that things are just not going well.

I'd like to get some clarity. We did take a look at the last few minutes of Hansard, as the minister had indicated that was when he shared the information regarding vacancy rates for Seven Oaks and Concordia. We did take a look. We were unable to

find that information in Hansard. If the minister would kindly provide that information. We did look for it, we just didn't see it there specifically in regards to vacancy rates for Seven Oaks and Concordia.

Mr. Friesen: So, once again, the emergency department and urgent care overall vacancy numbers for Concordia at 18.4 per cent and Seven Oaks at 21.4 per cent.

The member talks about the length of stay and—I mean, really asked and answered when it comes to re-admission rates. I'll say again, in 2016, Manitoba—lower than the national average. In 2017, Manitoba—lower than the national average. In 2018, lower than the national average. In 2019, lower than the national average.

So I'm not exactly sure the point that the member is making. Traditionally, re-admission rates have been low in Manitoba. It's been a source of strength within our system. It continues to be a source of strength.

I know that the member is anxious to find fault with system changes, but this one really strains credibility when the numbers are significantly and consistently under the national average. The member's not pointing to numbers that are trending above the national average, she's trending—she's pointing—they are pointing to numbers that are under the national average. Asked and answered.

In the area of the way we use our system resources, I said in a previous answer that it's important to bear in mind that we must focus on a totally integrated provision of health-care services. So when we talk about the number of—the length of stay in the system, or the number of beds in any hospital, the number of beds is important. What is also important that we are optimizing the use of that bed. And that goes to length of stay and measuring the use of that bed.

I'll refer the member back to a public document. Page 139 of the KPMG report from 2016. It talks about area of opportunity, core clinical and health-care services. And there's analysis here about acute in-patient lengths of stay.

The author said they benchmarked the length of stay in Manitoba hospitals to Ontario peer hospitals, adjusting for differences in case mix using the CMG+ system. Here were their main findings: The length of stay in Manitoba hospitals are significantly longer than the average in Ontario. Number 2, improve lengths of stay to the average of Ontario peer hospitals

would have reduced in-patient use by roughly 400 beds.

So, once again, that means if we could get to the level of efficiency of even Ontario, to use that example, it would reduce in-patient use by roughly 400 beds.

Number 3, Improving length of stay represents a substantial opportunity to make better use of Manitoba's health resources.

For example, the report authors go on to say Manitoba would be able to meet the acute bed needs of roughly 8 years of population growth and aging were they to meet even the efficiency number of our neighbours in Ontario.

It's why I continue to say that the overall resource optimization must be kept in mind.

This summer, to no great fanfare, we implemented two very significant pieces of eHealth system tools that will help us to move from analog processes in many places to digital processes. Investments that will help us to be able to better use big data and metadata to make good decisions about what we predict in the needs of care, what we predict about times of stress on the system because of disease, because of influenza, because of other trends.

This data will be helpful for us to create a more efficient system. Why is efficiency important? Let me give one example, and do it quickly.

Last year, we found a way in government to save more than 6 or 7 million dollars by simply taking over the amount that regional health authorities were using for working capital before completed capital projects had been swapped into long-term debt.

We saved \$7 million and what did we do with that money? We bought 1,000 additional hips and knees and 2,000 cataract surgeries that we added into our system to perform more of those surgeries than at any point before in the history of Manitoba. We're proud of our ability to find savings to re-invest in a stronger health-care system for all Manitobans.

MLA Asagwara: So, given that we know that folks are presenting to emergency rooms sicker, we know that re-admission rates within 30 days of discharge are increasing in the WRHA, you know, we can identify that is—it is critically important that folks have access to the health care that they need outside of accessing hospital, outside of accessing emergency rooms. That in order for folks to have the best health care that they can at home and to have health-care plans that work

for their families, for individuals, whether that's in regards to physical health, emotional health, mental health, you know, substance use, problematic substance use, addictions, really, wellness overall.

*(17:10)

A key component of that in community, in communities, are folks being able to have timely access to primary-care physicians. Our primary-care physicians really intervene at critical times for Manitobans and are—play such an important role in determining health outcomes. The Family Doctor Finder helps link people with family physicians, with the goal of doing so within thirty days. And by the time the Pallister government took office, things were heading in the right direction, hitting a high of about 90.5 per cent matching within 30 days in the spring of 2016.

Since then, unfortunately, things haven't gone as well over the last couple of years, two to three years, as the Pallister government has continued to close clinics and really impact timely access to primary care. Access to primary-care physicians and timely access to primary-care physicians has declined.

Why is that, and what is the minister going to do about that?

Mr. Friesen: I welcome a question from this member about doctors practising in Manitoba.

Just a week ago, this government released a news release that demonstrates that the number of doctors practising in Manitoba has increased at a near 10-year high. A new report is showing that our province's efforts to retain and attract physicians is working. There are 158 more doctors working in Manitoba today than there were only two years ago. That number represents the largest 24-month increase in physician retention and recruitment in at least a decade. This is good news for people who have waited too long for a family doctor.

I believe that that member's recollection of the NDP's activities on this file are too rosy. I was in this Legislature; I remember the day Theresa Oswald made the commitment that she would promise a family doctor for every Manitoban. It wasn't 24 months later that she retracted the promise. Go back and look in the press releases of the NDP. The promise went back. It was re-navigated; it was renegotiated. The language was softened, the commitment was pushed out longer and there was a lot more nebulous use of language.

What isn't nebulous is 158 more doctors in Manitoba today than just two years ago, the largest, the most significant 24-month increase. That means, for people waiting for doctors, there are more doctors available as family practitioners and other specialists across our system. There are now 2,982 licensed medical practitioners working in Manitoba as of April the 30th.

But more than that, I would want to point this member and all members of the House to the other good news that took place recently, and that is the fact that the master agreement with Doctors Manitoba was signed just very recently through our agreement and our negotiations with Doctors Manitoba and health care. In the interest of all Manitobans, I think this is a very significant move forward. I think that it speaks very clearly to the fact that negotiation continues to take place in a Bill 28 environment.

Here we have 2,900 doctors in Manitoba agreeing to work with the government to be able to modernize the physician's manual and the schedule of alternate funding agreements; here we have the doctors of Manitoba agreeing to work with the government to allocate general price increases, to engage on—with physicians on implementation of the clinical and preventative services plan, to engage with doctors in areas like E-consultation and telemedicine, to engage with doctors on issues like mental health and addiction services and compensation models, to engage with doctors about hospital care services and patient access and patient flow, to talk about retention recruitment and return of service, to talk about utilisation management and appropriateness of care and to talk about a positive work environment.

I believe that this negotiated agreement is a very positive and very historic point for this province, and so while we have doctors willing to work with this government and willing to say we will scope out that common ground for our patients and for the future—calling on the NDP if they have good ideas to do the same, and today we've still not a single—seen a single idea offered, not even a single acknowledgement about how we could make things like nurse recruitment go faster. They are silent on that issue. They don't talk about improvements to the system or how they can be a part of it. Good thing doctors in Manitoba is coming to the table to be part of a better, stronger health-care system for all Manitobans.

MLA Asagwara: The minister still hasn't clarified why the sharp decline in people being able to access, in a timely manner, primary-care physicians.

So, again, I kick this back to the minister, why did this happen and does the minister have any goals in mind in terms of what he believes is a timely manner for folks to be able to be matched and to find a family doctor, a primary-care physician, which we know is a critical and important determinant of health outcomes for Manitobans. We know that folks are presenting to emergency rooms and they're sicker. We know that there are changes happening now for Manitobans that are seeing health outcomes head in a direction that folks are concerned about.

So why, then, this sharp decline in people being able to, in a timely manner, access primary-care physicians, and does this minister have a target in mind in terms of what is a timely in order for folks to be able to access a primary-care physician?

* (17:20)

Mr. Friesen: The anomaly that the member pointed to is due to a seasonal backlog. I understand that it's been addressed with the re-resourcing. An additional staff member has been attached.

Nevertheless, more doctors than ever in Manitoba, including rural.

Ms. Malaya Marcelino (Notre Dame): Can I say his name?

Mr. Chairperson: The honourable minister—the Minister of Health.

Ms. Marcelino: Okay.

The honourable Minister of Health, I have a question about a critical incident that occurred at one of the RAAM clinics on Bannatyne over this past year. There was a—[interjection]—should I ask the Chair?

I have question, Mr. Chair, about a critical incident that happened to a student nurse at a RAAM clinic on Bannatyne. This student nurse was actually sexually assaulted. She was locked in a closet with the assailant, who was a patient at the clinic, and it took some time for the others to come to her aid.

I was wondering, do we have statistics about critical incidents like that that affect our health-care workers, especially since they're mostly women? And, secondly, if there's anything that the departments can do to try to avoid such kinds of cases.

Mr. Friesen: I thank the member for Notre Dame for that question and welcome her as well to the Chamber as a new member. It's good to see her here. I haven't

had a chance to congratulate her personally on her electoral victory.

I thank the member for raising the question. I know the situation that she raises, and I was deeply troubled, as many people across the system were. I won't discuss the specifics of the case here. I would want the member to know that significant efforts and interventions were made in this case after the fact. Everyone felt it was a horrific attack.

It's a very big system, and every effort is made to make people safe in their workplace. This one was troubling. And I know that, at a very high level, efforts were made to engage with this individual and offer support. And I believe some of those efforts are ongoing.

I can say, though, in addition to that, that our government has taken steps, including when we announced in March that we would undertake a review of safety and security at all Manitoba health-care facilities. We ordered that because we felt it was necessary. We know that the situation is changing. Our hospitals are large, large places. I understand—I won't ask my CEO to provide this level of detail, but I heard in one report that Health Sciences campus has 400 exterior doors or some incredible number. And you can imagine that, in the downtown environment, it becomes an issue to make patients and to make care providers and allied health members—doctors and nurses—and visitors to these complexes, safe. Especially after hours.

Let me talk about just a few of the interventions and improvements to the system that we've made. We have given to staff a—personal alarms where they can summon help. So they wear an alarm where they can activate an alarm and people will be summoned to help. We provide escort services now to anyone leaving the complex who needs to be escorted back to a vehicle. We have better video surveillance CCTV cameras. We have hired security staff.

We are undertaking, as we said, more than that—a comprehensive evaluation site to site to site to ask questions about where is security used, what manner of security is used, how is it consistent or inconsistent from one site to the other. All of this is very, very important. We want people to feel safe where they are.

* (17:30)

But I would also point to the very significant step we've taken to introduce legislation in this Legislature to establish a new level of safety officer in Manitoba. And we have indicated that that safety—that new

safety—institutional safety officer, as it's named, would be able to be deployed both in university settings, so post-secondary settings, and also in hospitals. They would have expanded authority. They would be responsible for the security and property at their facility. They would provide initial response. They would work with local police agency as needed.

Amendments that we will introduce will set out the rules. They will outline their enforcement responsibilities and identify where they may be a valuable addition to enhance safety. We want everyone who is working in hospital or visiting hospital or a patient in hospital to have the utmost confidence that they will be safe.

MLA Asagwara: Nurse practitioners, we know, are a tremendous resource in our health-care system. They act often as primary-care service providers. They are instrumental in people and communities and families being able to access the care that they need in a timely manner, as well as primary-care physicians. I've had the pleasure of working alongside some nurse practitioners who really set the bar very high, in terms of providing care.

And my question to the minister is: How many nurse practitioners are currently employed by the WRHA?

Mr. Friesen: A question on the subject of nurse practitioners, who are essential for our health-care system. I personally know nurse practitioners have been practising in the Manitoba system for years. I've seen the model successfully adopted, used in rural settings, in urban settings, to extend health care, to provide necessary health care.

The best models, of course, co-locate nurse practitioners with other medical providers. That was not the approach of the NDP. So I would like to talk about, for a few minutes, the debacle which was the NDP forays into establishing nurse practitioners in Manitoba.

The NDP chose to politicize nurse practitioners. The implementation or the extension of the model, under the NDP design, was to buy up expensive commercial property throughout Winnipeg in areas that one could suggest were less expedient for geographic reasons and more for political ones, being as they were located at times in the constituencies of NDP provincial health ministers and education ministers and others.

But be that as it may, the model was unsuccessful for a number of reasons. Number 1, it was

tremendously expensive to acquire the property, to undertake the zoning changes, to construct the buildings and then to operate these, all with no opportunity to seize on economies of scale.

There were no shared services, so you still had to have security; you had to have snow clearing. You had to have front-line reception; you had to have waiting rooms and examination rooms, and then beyond that, the implementation went so awry that the hours of operation of these practitioner clinics were immediately not expanded but contracted.

Not only that, but there was no consistent hours of operation. I remember a QuickCare clinic in the south of Winnipeg that had no consistent hours of operation with one in north Winnipeg. I remember one in Selkirk that was closed for three days of the week. I remember the one in Steinbach that was closed and open on a variable basis, so that it made it almost impossible for potential clients to know when and where to go for care.

And, in many cases, because of a rush to proceed, the nurse practitioner was simply referring back—in many cases, not all cases—referring back to other practitioners in the system, creating overlap and duplication. The whole foray by the NDP into this was expensive, poorly planned, did not manage to promote the interests of nurse practitioner in the province of Manitoba in the manner it otherwise could have. The clinics were understaffed, had strange hours, were frequently closed, were subject to insufficient staffing levels, were isolated from other important health services, and wait times were not reduced.

And others in the system, speaking of anecdotal evidence which has been offered many times this afternoon, I cannot tell you how many times people in the systems have told me what a tragedy it was that more significant opportunities to expand the model of nurse practitioner were not being seized, and instead what was being done was so expensive and so ineffective.

What I can tell you, is that we will be happy given more time to provide the numbers that the member has requested, but the College of Registered Nurses in their annual report, reports 239 registered nurse practitioners practicing in Manitoba.

MLA Asagwara: I apologize. Could the minister please repeat that number? I just didn't quite hear it.

Mr. Friesen: I just had to confer with my colleagues. The number provided here, the College of Registered

Nurses end report is listing is the number of RN nurse practitioners in Manitoba as 239.

MLA Asagwara: Thank you to the minister for clarifying that. I had asked previously about nurse overtime in the WRHA from quarter three 2018 until, well, as recent as possible for that update. I would like to ask that if we could add another note to that, if the minister could also provide, when available, the mandatory overtime rates.

So previously I had asked for nurse overtime in WRHA, but specifically to quarter three of 2018 until as recent as possible, if the minister could also provide the mandatory overtime rates in the WRHA, just maybe add that as a separate column to that undertaking, that would be wonderful.

* (17:40)

The WRHA publicly released its annual report for 2017 and 2018. In that report, it was indicated that there had been a drop of 116 personal-care-home beds in the WRHA.

Can the minister explain why the decrease in beds of 116 for personal-care homes in the WRHA?

Mr. Friesen: We are happy to have this conversation. I can recall when I was the critic for health care going back five, six years and watching the WRHA personal-care-home wait time, the placements, and screenshotting that—of course, I learned that in opposition because then the data would disappear and I wouldn't have a version of that to refer back to. So I might have just disclosed more than I wanted to.

But I remember the time the numbers were extremely high. Those numbers were in the hundreds of patients at any one time. They would fluctuate; there was ebb and flow in the numbers. But as a critic, I was sure to ask those questions in the House, because they were in the hundreds.

And I invite the member to go and look at those sites now and see, where there used to be in the hundreds, there is now 20. Twenty. In a province of 1.36 million people, 20 people in the WRHA currently waiting for placement in a personal-care home. I cannot overstate the success of this.

And why is that? Well, it's not incidental and it's not anecdotal. It is because good investments have been made in the system to create capacity where capacity is needed. We've talked about some of those today. We've talked about the move of this government to establish transition-care beds. And we discussed the Priority Home program whereby home-

care resources would come around a patient to be able to stabilize that individual and, in many cases, return them to where they really want to be, which is home. And all of those investments represent strides forward.

In addition to that, at a number of facilities we were able to create specialized care beds for behaviour beds in personal-care homes, to create a more secure and appropriate environment. If the member is familiar with various reports on patient safety, including the Frank Alexander inquest, they will understand that these changes were called for in our system.

I can recall as far back as six, seven years, the call for personal-care homes, even new ones being built, to create capacity in behaviour beds, or secure beds. In some facilities, including places like Taché and Charleswood Care Centre, we actually took facilities that had double-room beds, so two-bed-to-a-room facilities, and we created secure and appropriate modern spaces for a single client in that space. So we were meeting the recommendations of the Frank Alexander inquest; we were providing the specialized care beds, but on the books, perhaps because of the way we use the terminology of licensed personal-care-home bed, it could misrepresent as somehow some kind of system reduction when in fact, it's a system enhancement.

Because not only—and of course those beds we know take more nurse hours of care per patient per day to staff. It's responding to a recommendation and task force, but also going back to the same data I started with, we have not seen, as a result, a return to the out-of-control and high personal-care-home wait numbers that were consistent under the NDP. Instead, if the member goes today to the website, they'll once again see those very low numbers.

So we're making the investments to the system: transition care beds, priority home program. Part of that program now has been repatriated to Misericordia hospital, where that capacity has been essentially brought over to that facility, but the capacity has increased. We've made use of capacity within the system. We've seen a dramatic improvement in the personal-care-home wait times for the WRHA. All of those are success stories of our health-care transformation.

MLA Asagwara: Just so that I'm clear, if the minister could just provide a bit more clarity around the explanation for specifically why there's been a drop in the number of personal-care-home beds available in

the WRHA. Hear the minister talking about the waits, the number of folks waiting for beds has decreased, but why the drop specifically in regards to how many actual beds are available in the WRHA?

Mr. Friesen: So I'm happy to provide a clarification to the member.

In cases, as I said, at sites like Taché and Charleswood Care Centre you might have had a conventional facility that had two licensed care beds per single room. We know that best practice and the—and other jurisdictional comparison shows a movement away from shared rooms and personal-care-home beds.

So it was an opportunity for us to not only, then, move in that case toward a single licensed care bed per room, but also meet the recommendation of the Frank Alexander inquest, which was saying what's needed in the system is that specialized, secure behaviour personal-care-home placement.

* (17:50)

We all know the context of that inquest. We all know how one patient perpetrated violence on another patient to a tragic end, and we know that the system has learned as a result. But let's be clear: this is a good example for all of us to reflect.

The member is talking in isolation about a number of beds. What I'm answering back for is optimization and utilization to the highest degree of efficiency system resources. Why? So that we can meet the needs of the overall system.

That kind of system planning is the system planning we have not shied away from. There was a comment by a provincial Health minister about six months ago that I took note of from another jurisdiction. And she was talking about the need to create efficiencies in the health-care system. And I know people love to hate the word efficiencies in the health-care system because they see it as a threat. I do not.

And, when asked about the comment, the minister of Health in that jurisdiction said the following, she said: Let me be clear that every opportunity to save a dollar in the delivery of health-care services because of a way we've found to do something in a more efficient or effective or cost-saving manner is simply an opportunity to reinvest the saved amount right back into the health-care system in areas of need.

And I thought to myself—I printed out a transcript of that because I thought it was well said. Efficiency

in the health-care system is not the enemy of capacity. It is the means by which we will facilitate the—and I would suggest it is the only means, ultimately, by which we will facilitate the resource to meet the growing demands of our health-care system.

An aging population, challenges around mental health and addictions, the cost and increasing cost of pharmacy, and not one question from this opposition party on pharmacy or pharmacology or about the increasing cost of high-priced drugs, and I would welcome this conversations.

But what about the cost and opportunity of technology in our health-care system? What about the challenge of meeting chronic disease in northern Manitoba, in southern Manitoba, in urban Manitoba? These are the challenges that we will meet.

The federal government is saying they want to give less for the provision of health-care in provinces. The Parliamentary Budget Officer, the Fraser Institute, the Macdonald-Laurier Institute, they all agree that the cost of providing health care is not going down. It is only going up.

As a matter of fact, I believe that the Fraser Institute pegs that rate at 5.2, and what they've said is that, anecdotally, the 5.2 escalator on health-care investment is the floor, the minimum to maintain services in our system, not meet any of the growing demand for what I've just pointed to.

And, in that environment, we must use of our—make better use of our resources. I'm proud of what the WRHA has been able to do, and the best evidence of its effectiveness is we have not seen an increase in that personal-care-home wait time for placement. It remains one of the lowest in Canada.

And that should be something that all of us in this House this afternoon can celebrate together, because we know at the end of the day that is our mothers and our fathers and our uncles and our aunties and our grandparents and our neighbours down the street who are waiting for those personal-care-home beds.

We're creating more capacity, not less.

MLA Asagwara: So we do know that there has been a drop in personal-care-home beds available in WRHA. I don't speak about that in isolation. I speak about that in examining in totality everything that we've been discussing here today, and the questions that I've been asking the minister about today.

We also know that hospital re-admission rates within the WRHA within 30 days of discharge are

increasing. They've been increasing 8.1 per cent from 7.7 per cent the previous year. We know that the number of beds in the WRHA have been decreasing. We know that there are still vacancies that are increasing. We know that there are nursing shortages. We know that folks are presenting to emergency rooms sicker. We know these things and, when we look at these—I mean, in isolation, the minister is able to speak and provide some details in terms of what he plans to do. He's not clearly able to indicate, in some regards, what they're able to do, other than, you know, reinforce what it is I've been presenting in terms of when you look at everything in its totality.

The health-care system is not serving Manitobans the best way possible. And we will continue, and I will continue, to press the minister on these areas. I will continue to ask for clarity around information that the minister has been very, very hesitant to provide.

I would like to know whether or not, because the minister did not clarify, I'd like to know from the minister whether or not they will be providing the numbers in regards to mandatory overtime—it's mandatory overtime within the WRHA. I've asked for that now a couple of times, and it hasn't been clear whether or not the minister will undertake that as well. So I will leave it with that with the minister.

Can you commit to providing that information, alongside the other requests of nurse overtime within the WRHA from quarter three of 2018 until most recent information? Can you also provide the 'mandantory' overtime that nurses are working in the WRHA for that period?

Mr. Friesen: I agree with the member's characterization of the proceedings today. She asserted that I was hesitant to provide information and yet that member has seen us on multiple occasions, over the course of the last six hours of Estimates here in health, both yesterday and today, work collaboratively with even people behind the scenes in administration at the WRHA and in the Department of Health and in my own office, providing information at the request of that member.

So I take exception to the characterization that somehow there's a hesitancy—that member's asking for information that is not tracked in the system. The member is asking for us to provide mandatory overtime numbers. The system doesn't track mandatory overtime numbers. The system tracks overtime numbers.

The place that the member could go to get mandatory overtimes, I would suggest, would be labour. Perhaps labour is tracking mandatory overtimes. I also remind that member that mandatory overtime, as a practice in Manitoba, was a practice brought in by Gary Doer, in the 2000s. That was the advent of mandatory overtime for nurses in the province of Manitoba. So there's that.

But I would say this, at the end of the day, and as we wrap up in these proceedings this afternoon, and I only wish the time would allow us to continue to go on—*[interjection]*—because there is so much more to say that the member for McPhillips (Mr. Martin) wants to hear—and others in the Chamber as well.

But what I want to say is this: that we have, over the course of hours and hours in this Chamber, had a discussion, a discourse, a back and forth on areas of health care, and that's good. But not once in these probably six hours of debate and discourse has that member for Union Station (MLA Asagwara) offered one acknowledgement of system improvement, even though people throughout this system are citing those things.

Not once have they offered any acknowledgement of what we inherited in government just three

short years ago. Not once has that member provided any suggestion of a willingness to collaborate or express other ideas that might help this system.

When we talk about the need to make nurse hiring run faster because we're clearly the outlier in Canada, they decline to offer any acknowledgement that that would somehow, or in any way, be a good idea.

This member is not offering ideas. I think this would be a good opportunity in this committee for a free and frank exchange of ideas. And, if the NDP have ideas—which they didn't share in the campaign because we didn't hear ideas; we heard fear and fear mongering, I would invite them to share those ideas, when—they'd be taken into consideration as we all work together in this province to build a more robust, a stronger health-care system that gets better health care sooner for all Manitobans.

Mr. Chairperson: The hour being 6 p.m., the committee rise.

Call in the Speaker.

IN SESSION

Madam Speaker: The hour being 6 p.m., this House is adjourned and stands adjourned until 1:30 p.m. tomorrow.

LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, October 1, 2019

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