



Fifth Session - Thirty-Sixth Legislature

of the

Legislative Assembly of Manitoba

**DEBATES
and
PROCEEDINGS**

**Official Report
(Hansard)**

*Published under the
authority of
The Honourable Louise M. Dacquay
Speaker*



Vol. XLIX No. 29 - 1:30 p.m., Tuesday, May 18, 1999

ISSN 0542-5492

MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Sixth Legislature

Member	Constituency	Political Affiliation
ASHTON, Steve	Thompson	N.D.P.
BARRETT, Becky	Wellington	N.D.P.
CERILLI, Marianne	Radisson	N.D.P.
CHOMIAK, Dave	Kildonan	N.D.P.
CUMMINGS, Glen, Hon.	Ste. Rose	P.C.
DACQUAY, Louise, Hon.	Seine River	P.C.
DERKACH, Leonard, Hon.	Roblin-Russell	P.C.
DEWAR, Gregory	Selkirk	N.D.P.
DOER, Gary	Concordia	N.D.P.
DOWNEY, James	Arthur-Virden	P.C.
DRIEDGER, Albert	Steinbach	P.C.
DRIEDGER, Myrna	Charleswood	P.C.
DYCK, Peter	Pembina	P.C.
ENNS, Harry, Hon.	Lakeside	P.C.
EVANS, Clif	Interlake	N.D.P.
EVANS, Leonard S.	Brandon East	N.D.P.
FAURSCHOU, David	Portage la Prairie	P.C.
FILMON, Gary, Hon.	Tuxedo	P.C.
FINDLAY, Glen	Springfield	P.C.
FRIESEN, Jean	Wolseley	N.D.P.
GILLESHAMMER, Harold, Hon.	Minnedosa	P.C.
HELWER, Edward	Gimli	P.C.
HICKES, George	Point Douglas	N.D.P.
JENNISSEN, Gerard	Flin Flon	N.D.P.
KOWALSKI, Gary	The Maples	Lib.
LAMOUREUX, Kevin	Inkster	Lib.
LATHLIN, Oscar	The Pas	N.D.P.
LAURENDEAU, Marcel	St. Norbert	P.C.
MACKINTOSH, Gord	St. Johns	N.D.P.
MALOWAY, Jim	Elmwood	N.D.P.
MARTINDALE, Doug	Burrows	N.D.P.
McALPINE, Gerry	Sturgeon Creek	P.C.
McCRAE, James, Hon.	Brandon West	P.C.
McGIFFORD, Diane	Osborne	N.D.P.
McINTOSH, Linda, Hon.	Assiniboia	P.C.
MIHYCHUK, MaryAnn	St. James	N.D.P.
MITCHELSON, Bonnie, Hon.	River East	P.C.
NEWMAN, David, Hon.	Riel	P.C.
PENNER, Jack	Emerson	P.C.
PITURA, Frank, Hon.	Morris	P.C.
PRAZNIK, Darren, Hon.	Lac du Bonnet	P.C.
RADCLIFFE, Mike, Hon.	River Heights	P.C.
REID, Daryl	Transcona	N.D.P.
REIMER, Jack, Hon.	Niakwa	P.C.
RENDER, Shirley, Hon.	St. Vital	P.C.
ROBINSON, Eric	Rupert Island	N.D.P.
ROCAN, Denis	Gladstone	P.C.
SALE, Tim	Crescentwood	N.D.P.
SANTOS, Conrad	Broadway	N.D.P.
STEFANSON, Eric, Hon.	Kirkfield Park	P.C.
STRUTHERS, Stan	Dauphin	N.D.P.
SVEINSON, Ben	La Verendrye	P.C.
TOEWS, Vic, Hon.	Rossmere	P.C.
TWEED, Mervin, Hon.	Turtle Mountain	P.C.
VODREY, Rosemary, Hon.	Fort Garry	P.C.
WOWCHUK, Rosann	Swan River	N.D.P.
<i>Vacant</i>	St. Boniface	

LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, May 18, 1999

The House met at 1:30 p.m.

PRAYERS

ROUTINE PROCEEDINGS

PRESENTING PETITIONS

PR 326 North Upgrading

Mr. Clif Evans (Interlake): Madam Speaker, I beg to present the petition of Ernie Plett, Wilbert Reimer, Milton McClinton and others praying that the Legislative Assembly of Manitoba request the Minister of Highways (Mr. Praznik) consider making the upgrading of this section of road a project in the 1999-2000 provincial Highways budget.

PRESENTING REPORTS BY STANDING AND SPECIAL COMMITTEES

Committee of Supply

Mr. Marcel Laurendeau (Chairperson): Madam Speaker, the Committee of Supply has considered certain resolutions, directs me to report progress and asks leave to sit again.

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

Motion agreed to.

TABLING OF REPORTS

Hon. Jack Reimer (Minister responsible for Seniors): Madam Speaker, I would like to table the '99-2000 Departmental Expenditure Estimates for the Manitoba Seniors Directorate.

INTRODUCTION OF BILLS

Bill 27—The Essential Services Amendment Act

Hon. Eric Stefanson (Minister of Health): Madam Speaker, I am requesting the unanimous

consent of the House to move introduction and first reading of a bill to amend The Essential Services Act.

Madam Speaker: Does the honourable minister have the unanimous consent of the House to move and introduce first reading of a bill? [agreed]

Mr. Stefanson: Madam Speaker, I move, seconded by the Minister of Education (Mr. McCrae), that leave be given to introduce Bill 27, The Essential Services Amendment Act (Loi modifiant la Loi sur les services essentiels), and that the same be now received and read a first time.

Motion presented.

Mr. Stefanson: Madam Speaker, on May 13, 1999, the Province of Manitoba received correspondence from the mayor of the City of Winnipeg regarding the current status of collective bargaining between the city and the Emergency Response Services Employees Association of Winnipeg. I am prepared to table that letter.

On May 18, 1999, the province was further advised that the ambulance workers have voted in favour of possible strike action. Based on the urgent request from the City of Winnipeg, plus possible strike action, plus the fact that there are no essential service agreements in place between the city and ambulance workers, I am seeking leave of the House to introduce for first reading an amendment to The Essential Services Act to include ambulance services of the city of Winnipeg as an essential service. I have copies of the letter from the mayor to table here, Madam Speaker.

Madam Speaker: Is it the will of the House to adopt the motion? [agreed]

Introduction of Guests

Madam Speaker: Prior to Oral Questions, I would like to draw the attention of all honour-

able members to the public gallery where we have this afternoon sixty-four Grades 2 and 9 students from Victor H.L. Wyatt School under the direction of Mr. Bruce Dunbar. This school is located in the constituency of the Speaker.

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

*(1335)

ORAL QUESTION PERIOD

City of Winnipeg Paramedics Binding Arbitration

Mr. Gary Doer (Leader of the Opposition): Madam Speaker, we just gave leave to deal with the request from the government to deal with the amendment to The Essential Services Act. In the past we have had requests from the city to deal with legislative changes, one, noticeably, to open a contract in the past that has not been accepted by the government. We ask the government why they have not considered using The Fire Departments Arbitration Act as a remedy for this potential dispute, a matter that allows the matter to be resolved with binding arbitration for firefighters who also carry out essential services. Why would this Legislature not contemplate that alternative as a more equitable and workable way for the people of this province and for the workers affected in this dispute?

Hon. Eric Stefanson (Minister of Health): Madam Speaker, I encourage the Leader of the Opposition to read the two letters from the mayor of the City of Winnipeg, one dated May 13, just last Thursday, and the other one dated today, May 18, 1999, where the City of Winnipeg very specifically asks for this amendment and this kind of coverage to include the ambulance services within the essential services legislation. So we are responding very directly to that request from the mayor and from the City of Winnipeg. As well, obviously it is very important to protect the citizens and potential patients, potential users of ambulance service here in the city of Winnipeg for that very important and very vital health care service.

Mr. Doer: Madam Speaker, The Fire Departments Arbitration Act, which was provided in

the public interest to deal with public services that would not be disrupted in the time of a dispute and the dispute would be resolved by binding arbitration—many first responders for patients in Winnipeg, these services are provided by the firefighters, and ambulance providers also provide a service to our citizens. Why, given that The Essential Services Act does not have a way of resolving a dispute or does not have a remedy, would we not use the tried and tested way on behalf of the public, rather than just using something that has not been tested yet in the province?

Mr. Stefanson: Madam Speaker, there is obviously the opportunity to reach agreement by both parties through collective bargaining, and we obviously support that process, encourage both parties to work towards finding an agreement through that very important process. Having said that, it is my understanding that with the discussions that have taken place, there has been no agreement to an essential services agreement in the event of a strike of ambulance service employees. We have before us now a very specific request from the mayor and the council of the City of Winnipeg to include this important service under essential services. There are a number of services that are included under essential services that provide for the very important health care of all citizens of Manitoba, and in this case it is the important service of ambulance services in the city of Winnipeg. We are certainly responding both to the request from the City of Winnipeg and from the mayor of the City of Winnipeg and to the protection of that very important service for the citizens of Winnipeg and Manitoba.

Mr. Doer: This Legislature and the government opposite agreed to binding arbitration for the doctors last year after considerable acrimony before they reached that stage. We have put in place binding arbitration for police officers. This Legislature has approved The Labour Relations Act that provides for binding arbitration for firefighters in Manitoba. The binding arbitration option allows for this dispute to be settled without any withdrawal of services, and therefore the public would be protected.

Why would this government not consider an amendment that we will put forward as a

positive alternative for the citizens of Winnipeg and for the legislative process for the province of Manitoba?

Mr. Stefanson: Let us look at the history of The Essential Services Act which was introduced back in May of 1996. It was passed in November of 1996 and was originally applicable only to provincial civil servants. Subsequent to that, we had a request from health facilities to be included in the essential services legislation. That was in June to October of '97, and in April of 1997, again The Essential Services Act was extended to health facilities and Child and Family Services agencies. Again, that legislation passed in June of 1997.

So this legislation has been available for organizations to come forward with requests that they felt that the service they are providing is of such a nature that it should be protected within the essential services legislation.

The City of Winnipeg has done just that with the two letters that I provided members opposite, the letters of May 13 and May 18, making that very specific request, and we believe in supporting that request and responding to that request. That is what we are doing today. We are certainly very supportive of protecting that very important health care service, which I hope all members in this House are supportive of doing. One way to do that is to respond to the request from the mayor of the City of Winnipeg and include the ambulance services within The Essential Services Act.

* (1340)

Neurologists Recruitment/Retention Strategy

Mr. Gary Doer (Leader of the Opposition): Well, we will work on the government at committee.

A new question to the Premier (Mr. Filmon). The Premier has been involved in attempting to maintain neurologists and people that work in the neurology program in Manitoba. We have been quite concerned about the neurology program, pursuant to the specialists' provisions in the last contract signed by the government.

There are five neurology residents presently in Manitoba. I would like to ask the government: how many of these residents will be staying after their residency program in Manitoba?

Hon. Eric Stefanson (Minister of Health): Manitoba, I believe, currently has about 18 adult neurologists in the province of Manitoba. Recently four additional neurologists have been recruited. I am certainly prepared to provide the names to the member opposite. Obviously, this recruitment represents a 20 percent increase in neurologists serving the needs of Manitobans, and that certainly shows significant, again, enhancements in this whole area.

In part, responding to a question from his colleague the member for Transcona (Mr. Reid) where he was asking about an issue relative to epileptologists, again, in that particular case, two of these new neurologists, Dr. Ahmad and Dr. Hudson will join the team on July 1, 1999. They also specialize in epilepsy, Madam Speaker. So, again, that certainly is showing progress in addressing that very important area.

Mr. Doer: The minister did not answer the question. There are five residents now in Manitoba. We have been informed that after June, three residents will be leaving. Can the minister confirm this, and what will the impact be on patients?

Mr. Stefanson: Again, I have just given the member recent information in terms of the significant progress in terms of the whole issue of recruitment of neurologists. I have outlined for him the current numbers of adult neurologists, the recent addition of four more neurologists. I have indicated the role that two of the new neurologists will play in the whole area of epilepsy, which is an issue that is of concern to all of us and has been raised by his colleague the member for Transcona (Mr. Reid). So, again, we continue to make significant progress in that area of specialty medicine, as we do on a number of fronts in the province of Manitoba.

Mr. Doer: The minister did not answer the question. We know that the complement has been down in the neurology program. We even

know with some recruitment they were still below the levels that were stated by the WHA to be, quote, acceptable. My question was: if we have five residents in neurology and three are leaving at the end of June—that is 60 percent of those people—what will the impact be on the patient services requiring neurology? Why are we losing so many of them, I think, is a real vital question to the people of Manitoba.

Mr. Stefanson: Again, Madam Speaker, I have indicated to the member our current number is 18 adult neurologists in the province of Manitoba. There are four additional neurologists that have been recruited. I have named two of them who are starting on July 1 of 1999. That is a 20 percent increase in neurologists in the province of Manitoba.

Madam Speaker, we currently have three and a half positions for pediatric neurologists, and again there was a recent acquisition there, again with an individual who brings some specialty in the whole area of epilepsy. So again, Manitoba has never been in a better position regarding pediatric neurology than it is today, so significant progress on all fronts relative to services from neurologists, and again we continue to improve not only in this area but in other areas in terms of recruiting and retaining health care professionals.

* (1345)

Neurologists Recruitment/Retention Strategy

Mr. Daryl Reid (Transcona): Madam Speaker, back in November 1997, I wrote to the previous Minister of Health about the loss of neurological services at the Health Sciences Centre and also involving the loss of the only remaining epileptologist in the province. At that time the government said they were on a recruiting program. Here we are, two years later, and now the minister is announcing that we have some new doctors coming into Manitoba.

Some Honourable Members: Oh, oh.

Mr. Reid: I guess the government thinks a two-year wait is a reasonable period of time for these services.

I would like to ask the government: if you cannot maintain your own resident doctors in our hospital program in the province of Manitoba, how can you run a neurological program in our hospitals, and how do you know you are not going to be losing these doctors as well some short period down the road?

Hon. Eric Stefanson (Minister of Health): Again, the member recently asked me about the whole issue of epileptologists, and he referred at the time to a Dr. Pillay who had left for the province of Alberta. I do want to assure him that the team in that entire area that is involved in that implant program is still in place at the Health Sciences Centre. Dr. Brian Schmidt, a neurologist, has followed all of those patients. The surgeon on the team, Dr. Brownstone, remains at the Health Sciences Centre and continues to follow those patients as well, and as I indicated in response to a question from his Leader, there are two new neurologists, Dr. Ahmad and Dr. Hudson, who are joining the team on July 1, 1999. They specialize in epilepsy, which is exactly what is required in this area, and as I responded to his Leader, not only do we currently have 18 adult neurologists, there are four additional neurologists that have been recruited, a 20 percent increase, so again showing significant progress in that whole area of retaining and recruiting neurologists in Manitoba.

University of Manitoba Neurology Program Accreditation

Mr. Daryl Reid (Transcona): Then perhaps can the Minister of Health indicate what will be the effect on the accreditation program at the Faculty of Medicine now that three of the five residents are leaving the province of Manitoba? What is going to happen to the accreditation of that particular program?

Hon. Eric Stefanson (Minister of Health): Well, Madam Speaker, again without necessarily accepting any of the preamble from the member, based on some past practices in this House, I am certainly prepared to look into that issue further, but again I pointed out very clearly for members opposite the significant progress in this area of the recruitment of neurologists here in our province, a 20 percent increase, not unlike the

kind of progress we are seeing in other areas whether it be oncologists or the recent graduating class for anesthetists here in Manitoba where the majority of them are staying right here in the province of Manitoba, the vast majority of them again. So I tell the member not to worry about any accreditation.

University of Manitoba Neurology Program Accreditation

Mr. Dave Chomiak (Kildonan): Madam Speaker, in respect to the minister's responses, a 20 percent increase when you are below actual levels required is not anything to brag about. My question to the Minister of Health is again a repeat because it is a very, very significant. [interjection] Well, if the Premier (Mr. Filmon) wants to answer and do something about health care, let him stand up and answer a question on health care.

Some Honourable Members: Oh, oh.

Madam Speaker: Order, please. The honourable member for Kildonan, to pose his question please.

Mr. Chomiak: Thank you, Madam Speaker. We will welcome a chance to talk about health issues when the Premier screws up the courage to call an election.

Some Honourable Members: Oh, oh.

Madam Speaker: Order, please.

* (1350)

Mr. Chomiak: My question to the Premier, who wants to answer, or the Minister of Health: is the minister not concerned if three of the five resident neurologists, who are home-grown, home-trained, are leaving the province, what the effect will be on the neurology program at the University of Manitoba?

Hon. Eric Stefanson (Minister of Health): Madam Speaker, again, with all due respect to the member opposite, I have answered the majority of that question.

We are always interested in this province in keeping the majority of our graduates of our educational facilities here in the province of

Manitoba. We continue to see more and more of them staying right here in Manitoba, whatever faculties they are coming through, for a number of reasons, from reasons like the tremendous job opportunities they have in Manitoba to the quality of life, to all of the factors that make individuals who come through our education facilities want to remain in the province of Manitoba. I have just cited in this House that for the recent graduating class of anesthetists, I am told that virtually all of them are staying right here in the province of Manitoba.

I have outlined very clearly for members opposite the significant improvement in areas like neurology. In fact, when it comes to the whole area of specialty provisions, Manitoba, on a ratio to our population, we have the fourth-highest ranking in Canada in terms of specialists to population of all the provinces in Canada. Again, we stack up very well in keeping specialists, just like we do on our ratios when it comes to nurses that I pointed out very clearly from a report from the Canadian Institute for Health Information.

So again, Madam Speaker, we made significant progress in the province of Manitoba, not only retaining but recruiting additional neurologists to our province.

Mr. Chomiak: Madam Speaker, will the Minister of Health not agree and will he not undertake to review the situation at the University of Manitoba and the neurosurgery program because of this shortage of manpower so that like when we raised the issue of oncologists and the government finally responded, like when we raised the issue of anesthetists and the government responded, like when we raised the issue of the neurosurgeons, the government responded, the government—

Some Honourable Members: Oh, oh.

Madam Speaker: Order, please.

Mr. Chomiak: Will the minister undertake to return back to this House, as the government was forced to do when we raised those other issues, to ensure that the program is not in jeopardy and the residents in neurology can maintain and stay in Manitoba?

Mr. Stefanson: Madam Speaker, again, I thank the member for Kildonan for acknowledging the significant progress in the whole area of oncologists, again acknowledging the significant progress in the whole area of anesthetists. Again, I am sure he will acknowledge the significant progress in the whole areas of neurology, and I am sure that is one of the many reasons why they have had the wisdom to support our 1999 budget which includes \$194 million more than last year to provide all of the very important health care services right across Manitoba. I am sure that is one of the many reasons that they saw the wisdom to support our budget this year.

Mr. Chomiak: Madam Speaker, I will try again to the Minister of Health or the Premier who seems anxious to try to answer some questions.

Will the Minister of Health undertake to return back to this House with information about the security, the future and the tenure of those students and those residents who are involved in the neurology program so it can be assured that home-grown, home-trained individuals will not have to, as they have had to do the past 11 years under the dismal Filmon government's control of health care, leave the province of Manitoba?

Mr. Stefanson: Well, Madam Speaker, I have already indicated to the member that we continue to do all kinds of things to keep the graduates of our educational facilities here in the province of Manitoba, not only in the area of health care but in all types of educational faculties and facilities right across the province of Manitoba.

I have outlined very clearly to him the progress we are making in the whole area of attracting neurologists to the province of Manitoba. He himself, while he likes to sit there and try to take some credit for it, acknowledges the significant progress in areas like oncology, like anesthetists. I hope that he can certainly acknowledge the significant progress here in the whole area of neurologists, that we continue to make progress in attracting and retaining specialists. Within Canada, we continue to have one of the best ratios in all of Canada in keeping specialists here in the province of Manitoba.

* (1355)

Government Loan Information Release

Mr. Kevin Lamoureux (Inkster): Madam Speaker, my question is for the Minister of Industry and Trade.

Madam Speaker, quite often government will give out or loan out monies in expectation that those loans in fact be paid back. There is somewhat of a strange occurrence with the Estimates, which we made reference to, where the government has given out a \$2-million loan or made a \$2-million loan commitment of which \$1.6 million of that has already been given to the company. Yet, today, we still do not know who or what company that \$1.6 million is being sent to.

My question to the minister is: is he prepared to share with Manitobans where those tax dollars are in fact going?

Hon. Mervin Tweed (Minister of Industry, Trade and Tourism): As I explained to the member in Estimates, in the process, quite often when negotiations are completed, before we make an announcement, we always try and get an agreement between us and the company or the business that we are doing business with for an agreed-upon announcement. Sometimes these companies prefer to delay the announcement or defer it to a certain period of time to make arrangements with their employees, make arrangements with the other companies that they are doing business with.

I advised the member during the Estimates process that, upon completion of the negotiations, we would be proud to make the announcement.

Mr. Lamoureux: Madam Speaker, given that the election has in fact been put off, my question to the minister is: is the minister trying to tell us then it has nothing to do with the government, that the only reason why Manitobans do not have a right to know is because the company does not want Manitobans to know that they are in fact receiving the money? So it is the

company; it has nothing to do with this government.

Mr. Tweed: I would like to thank the member for Inkster for making the announcements in regard to the election dates, but perhaps he knows something I do not.

I can tell the member again that we are negotiating with the company, as we do with all of them, because of certain formalities that we like to go through and respect with doing business with the companies and the province. I advise the member again that upon completion of these negotiations, an announcement will be made.

Mr. Lamoureux: Madam Speaker, can the Minister of Industry and Trade then tell this House: how often does this government give out \$1.6 million of a loan and not feel any obligation to tell Manitobans where those tax dollars are in fact going? How often has this occurred, or is this just a one-time thing?

Mr. Tweed: I would like to just correct the member for Inkster. We do not give out money. We loan out money with a return on the investment. As I said in Estimates, our success rate to date has been very good. We have seen a lot of new jobs and a lot of new industries brought to the province.

Again, I will just advise the member that when negotiations are completed, I would be happy to inform him.

Flin Flon General Hospital Special Care Unit Closure

Mr. Gerard Jennissen (Flin Flon): My questions are for the Minister of Health.

This past weekend, the special care unit at the Flin Flon General Hospital was shut down. The hospital was forced to send patients by air ambulance to The Pas. Could the minister tell residents of the city of Flin Flon and surrounding region why the special care unit was shut down and when we can expect to see it reopened?

Hon. Eric Stefanson (Minister of Health): Well, Madam Speaker, I am certainly prepared

to look into that issue with the regional health authority and with the individual facility as to what led to those kinds of decisions and to report back to the member.

Patient Air Transportation Costs

Mr. Gerard Jennissen (Flin Flon): To the same minister: does the minister perhaps know how much it would cost then to send one patient by air from Flin Flon to The Pas hospital?

Hon. Eric Stefanson (Minister of Health): Madam Speaker, I am certainly prepared to look into those kinds of issues. I am in Estimates; I have been the last few days. I am back in, I believe, again this afternoon with the member for Kildonan (Mr. Chomiak), so I am certainly prepared to look into that specific financial request. But I think, for all of us, the issue that is first and foremost is patient care and patient safety. That is what drives all of our decisions.

In terms of the specific request that the member for Flin Flon asks about, I am certainly prepared to get back to him or to return with information during the Estimates process.

* (1400)

User Fees

Mr. Gerard Jennissen (Flin Flon): Similarly, could the minister then also find out and report back to me or to the House whether or not those patients being flown from Flin Flon to The Pas are being charged the \$50 Filmon user fee?

Hon. Eric Stefanson (Minister of Health): Madam Speaker, I am certainly prepared to look into all of the financial impacts in terms of the overall cost of that service that the member is referring to and to provide him all of the details and whether or not there is any contribution required from the individuals. But, again, I remind the member for Flin Flon that the most important issue is providing the health care services that are needed when they are needed. That is certainly something that we are committed to right throughout the province of Manitoba. That is why we have taken a number of initiatives to not only provide the services

here in the city of Winnipeg but also to provide them right across Manitoba in all of the other communities. I will certainly get back to the member with specifics related to the question that he asked.

Club Regent Hotel Construction

Ms. MaryAnn Mihychuk (St. James): Madam Speaker, today Manitobans learned in the media that we are now in the hotel business, and in fact the Lotteries Commission will be building a new hotel next to Club Regent. My question for the Minister responsible for Manitoba Lotteries is: how much are Manitobans going to pay for their new hotel, and how are we going to finance this new project?

Hon. Darren Praznik (Minister charged with the administration of The Manitoba Lotteries Corporation Act): Madam Speaker, it always amazes me when I hear the tone of the member opposite with respect to these issues because there are certainly two sides to the gambling issue, and like all issues there are pros and cons to it. One of the pros to our province has been the increase in tour buses, et cetera, coming from outside our jurisdiction, bringing people into our province to spend dollars as part of the increase in our tourism trade. This hotel project is certainly part of that development of the facility. It is part of that particular development; it is financed, part of it is not costing the taxpayer money. In fact, if anything, it is bringing revenue into this province which we need for things like health care.

Ms. Mihychuk: Madam Speaker, my question to the Minister of Lotteries and past Health minister: why is this government building a hotel now—and I am sure that it will be built very rapidly—when it has not built the personal care homes it promised five years ago?

Mr. Praznik: Madam Speaker, the member knows full well that the operation of the Lotteries Commission, the construction of the casinos, any relationship with the hotel is not coming from public money, is not coming from taxpayers' money, and in no way affects the budget operations. In fact, the profits from the operation of our lotteries contribute to the

general revenue of this province. For her to come up in this House for the umpteenth time to try to imply that somehow a choice is made on scarce taxpayers' dollars of building a companion hotel to the casinos or personal care homes is just absolutely wrong.

Manitoba Lotteries Corporation Standing Committee Review

Ms. MaryAnn Mihychuk (St. James): Madam Speaker, I want to ask the minister if he is prepared to call the committee where the public can have a full discussion of the policies of Manitoba Lotteries which puts lotteries and hotels and casinos before health care. When is the committee going to meet?

Hon. Darren Praznik (Minister charged with the administration of The Manitoba Lotteries Corporation Act): Madam Speaker, talk about cutting off your nose to spite your face. Lotteries has provided, over a number of governments, a source of revenue for a variety of operations and activities in our province, and today a significant portion of those lottery dollars go into general revenue and is used for health care, and now today we hear members of the New Democratic Party saying we should not have that revenue. How many patients would they deny care if they were ever in power to bring about that kind of course of action?

Rescom Ventures Inc. Government Contract

Mr. Tim Sale (Crescentwood): Madam Speaker, in November of 1997, the government awarded a contract worth \$260,000 to Rescom Interactive, a subsidiary of Rescom Ventures, to produce a State of Innovation Report for the Economic Innovation and Technology Centre, but by that time, by November of 1997, Rescom's \$5-million contract with the Royal Bank was in deep difficulty and had been cancelled roughly the same date that the contract was awarded. The company was already in severe difficulty, severe cash-flow shortage. Why did the government award a major contract to a company which was already in serious financial difficulty?

Hon. Mervin Tweed (Minister of Industry, Trade and Tourism): Madam Speaker, as the

member knows, companies that we do business with in Manitoba, certainly when we ask for information or we ask for services to be provided, they are usually sent out and asked for proposals from companies that can provide the information and the technology that we need. It is my understanding that Rescom, at that particular time, fulfilled the needs that we were looking for.

Mr. Sale: Madam Speaker, when the company was already being operated by a manager put there by the minister's own Manitoba Capital Fund, when its president had been ousted, why is the company and its president still featured in the 2,000 copies of the little red tool kit that were distributed, or at least were paid for, for \$260,000, rendering the tool kit totally worthless because the company was bankrupt?

Mr. Tweed: Madam Speaker, as I mentioned earlier and we have discussed in the Estimates, when you look at risk capital, when you look at firms that are interested in taking part in some of the risk capital that is out there, I would like to make the honourable member aware that these firms create jobs at a 23 percent annual rate, which is very many more times higher than an average general business community.

I would like to advise the member that the booklet that was put out was not to highlight companies that have succeeded or have not succeeded but to just show to the community out there that the government of Manitoba is interested and caring and would look at all companies that are willing to make risk capital investments in the province.

Mr. Sale: Will the minister not acknowledge that by highlighting an unsuccessful company that was belly up when he highlighted it, he wasted \$250,000? This report is totally worthless because, basically, you cannot use it. The company is belly up, \$2 million down the drain in Manitoba capital, \$250,000 in contracts, all wasted.

Mr. Tweed: While I totally disagree with the member opposite's comments, in the sense that we as a province, we are here to promote the risk capital investment in the province that we need. I would like to point out to the member opposite

that during the previous administration, when they were involved in risk capital financing, they had to write off just under 70 percent of the loans that the government of the day put out, and I would gladly compare our record in this province to the previous administration.

Rescom Ventures Inc. Government Contract

Mr. Steve Ashton (Thompson): I must admit, on this side of the House when we see any kind of government contract being let, as we have seen in so many cases, we expect either to see Cubby Barrett or some other major contributor to the Conservative Party. In fact, in this particular case, the president of this near-bankrupt company that received a quarter of a million dollars just coincidentally happened to donate over \$5,000 to the Conservative Party over the last number of years.

I am wondering if the Premier can indicate whether indeed this is another example of this government giving money to its friends, in this case money—\$250,000—that was to be lost by the people of Manitoba because of this government's actions.

Hon. Gary Filmon (Premier): Madam Speaker, we have had so many examples under New Democrats of them throwing money down the toilet at every opportunity—MTX over \$30 million. In the words of the now Leader of the New Democratic Party when he was president of MGEU, they spent \$200 million putting signs up along the roadways on the Jobs Fund. None of it resulted in any jobs that are here in the province today; \$200 million they threw away.

In addition to that, they came up with their version of a venture capital fund in which not one company ever put any money back, ever paid any money back into the province of Manitoba. All failed, every single one of them throughout the '80s. There were millions and millions of dollars. Not one succeeded. That is the kind of record they had. I would think the member for Thompson would be embarrassed to even ask such a question.

* (1410)

Mr. Ashton: I am wondering if the Premier, instead of practising to be Leader of the Opposition again and living in the 1980s, might answer the question: when is he going to refer this to his ethics chair who just happens to be the minister who authorized this \$250,000 boondoggle.

Mr. Filmon: I can understand why the member opposite turns red and gets embarrassed every time he has to ask those silly questions. The fact of the matter is no government in the history of this province embarrassed this province more than the Pawley-Doer administration did for its boondoggles, and that is exactly what they stand for, is boondoggles. The member for Thompson is the king of boondoggles.

Mr. Ashton: Madam Speaker, as a final supplementary, I want to ask the minister if this is the legacy of the Lyon-Filmon years, in this particular case another example of the previous minister giving money to Tory friends, money that is now completely lost to the people of Manitoba, something the Premier does not even have the concern to even answer the question about. That is how arrogant and out of touch this government is after 11 years.

Mr. Filmon: In addition to the \$200 million on the Jobs Fund, in addition to the \$30 million at MTX, in addition to the \$28-million bridge to nowhere, there was, of course, the over \$30 million that they threw down the toilet.

Point of Order

Mr. Dave Chomiak (Kildonan): On a point of order, Madam Speaker, it was just several weeks ago that this Premier stood up and apologized for the worst scandal in the history of the province since the Rodmond Roblin scandal of 1919. I cite Beauchesne's, and I listened very carefully to the previous question of the member for Thompson. He asked specifically if the Premier would refer the matter to his newly created ethics person, and the Premier did not answer. The member for Thompson again asked the Premier a specific question, and the Premier, who is so defensive, who is so unable to answer questions, refused to answer the question.

I ask you to ask the Premier, either answer the question or go back and rewrite his memoirs about the 1980s where he seems to be living.

Madam Speaker: Order, please. The honourable First Minister, on the same point of order.

Mr. Filmon: Madam Speaker, the member opposite is very embarrassed these days and very sensitive to being reminded of all the issues that they absolutely fouled up when they were in government in this province in the '80s. They do not like to be reminded of it because it is terribly embarrassing, but Manitobans remember each and every one of these instances, and they know why they keep those incompetents on that side of the House.

Madam Speaker: Order, please. The honourable member for Kildonan did not have a point order.

Brandon Regional Health Centre Replacement Equipment Budget

Mr. Leonard Evans (Brandon East): I have a question for the Minister of Health, and I would like to read a brief quotation from the chairman of the regional health authority in Brandon. It was in today's Brandon Sun, and the quotation is: our replacement equipment budget last year and this year is only about a half a million dollars, and it really should be over a million annually. So when you consider that we had a couple of years when it was \$100,000, we had two years when it was nothing, well, the equipment situation was so bad, our replacement equipment budget was so low that everything was destitute. That is the quotation from the government-appointed chair of the regional health authority.

Madam Speaker: Question.

Mr. L. Evans: My question to the minister is: if this government is so committed to quality health care, why has it denied the Brandon general hospital the funding necessary over the years to replace essential outdated medical equipment?

Hon. Eric Stefanson (Minister of Health): Well, Madam Speaker, I had a chance to meet with the chair of the Brandon Regional Health Authority just last week, and I can certainly indicate they are very pleased. They are very pleased with the level of support that they receive from our government.

We have been in Estimates, and I outlined for the member for Brandon East some \$65 million in capital projects that are being spent basically on the Brandon Regional Health Centre, approximately a \$40-million improvement in their clinical services and building services, \$4.4 million on a 25-bed adult acute psychiatric unit, \$3.2 million on the Westman Child and Adolescent Treatment Centre. I could go on and on. I provided that for the member for Brandon East. I outlined all of these in great detail for him, and I am certainly prepared to do it again, to outline all of the projects totalling approximately \$65 million dedicated to the Brandon Regional Health Centre to continue to improve the quality of care and the services not only in Brandon but in that entire region of our province.

Madam Speaker: Time for Oral Questions has expired.

Speaker's Ruling

Madam Speaker: I took under advisement on April 28 a point of order raised by the honourable Minister of Education (Mr. McCrae) respecting words spoken in debate by the honourable member for Crescentwood (Mr. Sale). The words in question were: "You know, if he were a little more forthright with the truth." The Minister of Education asked that the words be withdrawn.

I have reviewed Hansard and also Beauschêne's Citation 486.(1) respecting unparliamentary language which reads in part: "It is impossible to lay down any specific rules in regard to injurious reflections uttered in debate against particular Members . . . much depends upon the tone and manner, and intention, of the person speaking."

I would say that, strictly speaking, there was not a point of order in the matter raised on April 28, but I would encourage the honourable member for Crescentwood to be judicious in his choice of words.

MEMBERS' STATEMENTS

Personal Income Taxes

Mr. Edward Helwer (Gimli): With yesterday's passage of Bill 22, Manitobans will see the

results of lower provincial taxes beginning July 1. Reducing provincial income tax while increasing spending on priority programs was a major part of our recent budget. By keeping our taxes competitive, we are continuing to make Manitoba an attractive location for investment and job creation.

With the passage of Bill 22, Manitoba's personal income tax rate will be cut by three full percentage points by January 2000, saving Manitobans some \$70 million this year and \$112 million in the year 2000. The changes will be reflected on pay cheques starting July 1, and I know that Manitobans will certainly appreciate this.

Our government believes the way to achieve a strong economy is to provide responsible leadership, remove barriers to economic growth, keep taxes competitive, and look for strategic opportunities which build upon the province's natural strength. Balanced budgets, lower taxes and debt repayment all stimulate the economy by making the province more attractive to business.

Our government will continue to look at ways to keep the province's taxes competitive while ensuring sufficient revenue to support important programs. Our government knows that lower taxes create jobs and provide the economic growth that supports our province. We also know that is what Manitobans want from their government. Thank you, Madam Speaker.

* (1420)

Youth News Network

Mr. Stan Struthers (Dauphin): I would like to say a couple of words about an educational issue in this province that needs some strong leadership but is not getting it from this minister.

Madam Speaker, the Athena Educational Partners are encouraging schools in our province to sign agreements in which they show the Youth News Network to students in our high schools. What this does simply is increase the amount of time our students watch commercials. This is the same government who, on the one hand, wants to increase the amount of time that

students watch commercials, who wants to also decrease the amount of time that students spend in phys ed and decrease the amount of time that students spend in Canadian history.

Madam Speaker, let us be clear what this means for students. The students are a captive audience for commercials and this company's idea of what is important in the news. That is it. Where is the leadership on this issue from our minister?

Madam Speaker, three provinces have had the good common sense to say no to this company's proposal. This minister gave us the lame answer in Question Period that he did not want to dictate to trustees. Well, I would suggest to this minister that maybe he should talk to his party's candidate in the Springfield constituency, who is also the chair of the River East School Division, and tell him that Manitobans do not want this for their students, tell him that this is wrong to subject our captive students to these commercials and not sell students against the parents' wishes. Thank you.

Crime Prevention

Mr. Peter Dyck (Pembina): I would like to take a few moments to recognize the efforts of local police forces as they combat crime in southern Manitoba. The Pembina Valley and Red River Valley RCMP detachments, along with the Morden, Winkler and Altona police services, have been busy investigating a number of business break-ins in the region. Since January 1999, the police services had received several reports of business break, enter and thefts, including six cases where safes were attacked. The total loss to area business from theft, vandalism and wilful damage was estimated at approximately \$70,000.

The local police forces knew the importance of dealing with these cases quickly. A joint task force was established consisting of three RCMP officers and one member of the Morden police service. I am pleased to report that the task force has already cleared 23 of these cases and laid 46 criminal charges. Their ongoing investigation may result in additional charges being laid. This project stands as a fine example of how groups

can work together to build safer, healthier communities.

Partnerships between different police agencies, citizen groups and government are proving effective in preventing crime. It is important that we acknowledge and support the innovation and commitment of the many Manitobans who actively work in their communities to increase safety and prevent crime.

Grain Transportation

Ms. Rosann Wowchuk (Swan River): Last week we learned that federal Minister Collenette has appointed Arthur Kruger to make changes to the grain handling system based on the report put forward by Justice Estey. This report is basically the wishes of the grain companies and the railways, and the wishes of the majority of farmers are being ignored. If this is implemented, we will see that farmers' wishes are completely being ignored. We will see the rate cap removed, we will see the role of the Canadian Wheat Board diminished, and this will pave the way for massive branch line abandonment across Canada.

For a fair process to take place, we should have a grain freight costing review done. This was a request that was made of the federal government. The federal government rejected that request despite the fact that all farm organizations have been calling for it. We called on this government to do a pricing review for Manitoba with the hope that other provinces would get on the bandwagon with us, but this Conservative government has also refused to take those steps to have the costing review done so that farmers could be treated fairly in this whole process, because it is our understanding that CN and CP are having a great increase in their returns. Over \$200 million is being drained out of the farming economy, and this should go back to the communities.

This review is taking place during the farmers' busiest season, and we must ensure that farmers have a fair say in this process and that they are represented. I would hope that this government will ensure that Manitoba farmers have a say and ensure that farmers do not lose all

that they stand to lose if the Estey report is implemented.

Property Taxes

Mr. Kevin Lamoureux (Inkster): The member for The Maples (Mr. Kowalski) and I have had the opportunity to talk about an issue that has been somewhat frustrating. We talked about it the other day while we were in committee, that being the issue of property tax.

We do feel that the government has not gauged what the public opinion really is on this very important issue. Therefore, I know for me and the member for The Maples (Mr. Kowalski), we are going to do what we can to enlighten the current government as to what we believe many, in particular Winnipeggers, and ultimately Manitobans, want to see, and that is more attention given to the issue of property tax. It is something in which no doubt we will be working over the next little while on trying to get a better gauge. Once we get that gauge, we will be sure to pass on the information to the Minister of Finance (Mr. Gilleshammer).

ORDERS OF THE DAY

House Business

Hon. Darren Praznik (Government House Leader): Madam Speaker, I think if you would canvass the House, you should find leave to call for The Essential Services Amendment Act for second reading, after which I will then be announcing a standing committee for tomorrow morning to hear that bill. That is part of the arrangements that House leaders have discussed for the handling of this particular piece of legislation. The request I received from the opposition House leader (Mr. Ashton), was to call a standing committee tomorrow morning to deal with it, for ten o'clock. I will be doing that following second reading, after which we will be going into Committee of Supply.

As well, Madam Speaker, there will be some other announcements with respect to standing committees that we are just in the process of confirming. So if you could please seek leave to call Bill 27.

Madam Speaker: Is there leave to call second reading of Bill 27? [agreed]

* (1430)

SECOND READINGS

Bill 27—The Essential Services Amendment Act

Hon. Eric Stefanson (Minister of Health): Madam Speaker, I move (by leave), seconded by the Minister of Family Services (Mrs. Mitchelson), that Bill 27, The Essential Services Amendment Act (Loi modifiant la Loi sur les services essentiels), be now read a second time and be referred to a committee of this House.

Motion presented.

Mr. Stefanson: Madam Speaker, I appreciate the co-operation of the House on this very important issue today because today I am introducing an amendment to The Essential Services Act to include the ambulance services of the City of Winnipeg. The request to amend this act to include ambulance services was made by the City of Winnipeg.

The Essential Services Act, as members may recall, was introduced in 1996 in order to ensure that services essential to Manitobans could continue to be provided in the event of a withdrawal of services by government employees. The act was amended in 1997 to include health facilities and Child and Family Services agencies at the request of not only the health facilities but representatives of families, of residents of personal care homes, who were impacted by a 1996 personal care home strike.

As a result of the 1996 health sector strike, it was felt many Manitobans were placed in a vulnerable position because the union did not negotiate an essential service agreement with the personal care home employers that it was striking. The act at that time put into place a process for the parties themselves to attempt to conclude an essential service agreement voluntarily. But if an agreement could be reached, the provisions of the legislation which provides for a mandatory process where it is designating essential services applies. It is my

understanding that the ambulance employees union and the City of Winnipeg have not agreed to an essential services agreement in the event of a strike of ambulance service employees.

I just want to read from the two letters that I received from the mayor of the City of Winnipeg. The first one was dated May 13, 1999, addressed to myself as Minister of Health re collective bargaining between the City of Winnipeg and the Emergency Response Services Employees Association of Winnipeg. It goes on to say: "Please be advised that the City's ambulance workers, represented by the Emergency Response Services Employees Association of Winnipeg, may be in a legal strike position following a strike vote to be taken on May 17, 1999. I am advised that these employees are not currently covered by The Essential Services Act and the city has concerns that, in the event of a strike, it will not be able to guarantee the provision of essential services with consequent risk to the population. Under the circumstances, I am requesting that the necessary steps be taken to amend the legislation to cover the provision of ambulance services by the City of Winnipeg. Yours truly, Glen Murray, Mayor."

Also, on May 18, I received a follow-up letter—that is today, Madam Speaker—again to myself from Mayor Glen Murray, the City of Winnipeg, again the same topic, the collective bargaining between the City of Winnipeg and the Emergency Response Services Employees Association. It goes on to say: "Please be advised that the City's ambulance workers voted to support strike action and are therefore in a legal strike position at this time. In the circumstances, I request that you initiate the necessary action to amend The Essentials Services Act to ensure that essential ambulance services provided by the City of Winnipeg are maintained. Please note that we have not been able to achieve a voluntary agreement on essential services with the Emergency Response Services Employees Association of Winnipeg union. Yours truly, Glen Murray, Mayor."

So, Madam Speaker, the intent of this amendment is to include ambulance services under the scope of the legislation to ensure that these services which are essential to the citizens

of Winnipeg and the people of Manitoba are not placed in jeopardy as a result of a strike. This bill adds the City of Winnipeg ambulance services to the definition of employer under the act to ensure that these services also fall within its scope.

So, Madam Speaker, again, I thank members for their co-operation today on this issue, and I encourage everybody in this House to support this very important piece of legislation.

Thank you very much, Madam Speaker.

Mr. Gary Doer (Leader of the Opposition): In addressing the bill, I would point out, Madam Speaker, that on the one hand we have received very short notice on this bill, and, on the other hand, we recognize the public interest that must be dealt with.

I am just going to speak for a moment because I am trying to deal with the merit of the issue before us, because we have already agreed to giving leave at first reading, obviously, and second reading and to proceed with the debate with an understanding on the committee timing, as well. This, of course, is important.

There are two principles that we have to deal with in this Legislature that are enshrined in our laws and in our traditions. One is the principle of providing medical services to our citizens. Citizens who need access to medical services in our view is a very, very important principle that this Legislature must deal with. The other important principle is the issue of free collective bargaining as part of a free society. Therefore the issue is very much a dispute between a medical service provided to the public and the way in which that medical service is being dealt with in a dispute. It is very important that we achieve a balance between those two principles and are able to achieve both principles with the solutions we put forward in this Legislature.

Madam Speaker, we therefore respectfully believe that the public interest and balance can be better achieved by an alternative that we will be proposing at committee in the form of allowing The Fire persons Arbitration Act—let me quote the exact act, The Fire Departments

Arbitration Act, I am sorry—to be utilized for purposes of the dispute.

First of all, I believe there is an occupational correlation between the ambulance attendants and drivers and the firefighters. In fact, sometimes they perform very similar duties in their roles and their functions that they fulfil to the city of Winnipeg.

Madam Speaker, the minister is quoting from the letters from the mayor. The mayor is the head of a government. He is also responsible for management. There is a balance to resolving disputes between the public interest, which is paramount, the workers and management. That is why in the past, to resolve similar disputes, this Legislature under The Labour Relations Act has provided for an arbitration system that is binding on the parties, hopefully not to be used but rather as a way in which the parties will agree at the collective bargaining table to a solution that will allow us to ensure that services are provided to the public.

Our solution, Madam Speaker, actually guarantees more of the workers will be providing services to the public than the kind of vague notions contained within The Essential Services Act. The proposal that we are putting forward as an alternative, The Fire Departments Arbitration Act, is also a system we used for police officers and school teachers here in Manitoba. I would suggest very strongly to the minister, the advantage of this proposal that we are making is obviously better for the public and more balanced between the workers and management. Why is it more balanced? Because The Essential Services Act of Manitoba does not provide a remedy. It does not provide a way of resolving a dispute. It only provides the definitions of who is covered and who is not.

You know, this government before, a couple of years ago, when former Mayor Thompson requested that a former collective agreement be overturned—and I think many councillors disagreed, including Councillors Vandal and Murray, at the time—this Legislature said no, we are not going to break that balance by overturning a collective agreement negotiated under The Labour Relations Act, even though they did so for their own employees.

So we think our solution: Does it meet the test of providing medical services to the public? Yes. Does it meet the test of allowing the city government to maintain the services to the public? Yes. Does it allow a way in which the ambulance employees can get an arbitrated and fair settlement? Yes. Has it been tried and true in the province of Manitoba over decades of experience? Yes. So we suggest to the minister opposite that this Legislature is co-operating in a serious situation, but—Madam Speaker, I am closing now—I just wanted the minister to hear my arguments. You know, I think that just because the city requests something, and I know the member opposite was a former deputy mayor—sometimes this Legislature can hear what the city is saying but also use their own experience to apply a more balanced solution. We have to, in this province, represent the public interests, the management interests, and the workers' interests, and we suggest The Fire Departments Arbitration Act will do all three in the most reasonable way.

Thank you very much, Madam Speaker, and we would ask the minister to pay attention to that proposal and give it some attention here in Manitoba. Thank you.

* (1440)

Mr. Gary Kowalski (The Maples): Yes, I will just say a few words because I do not want to delay this proceeding to committee, but it is a bill and an issue that I have interest in. I was on the Winnipeg police force when we still had the right to strike, and I remember my concern about going to strike in one year. I remember walking over from the Concert Hall to the chamber of City Council and singing Solidarity Forever. I cannot believe I actually did that, but I did.

But I remember that at that time when the Winnipeg Police Service bargained to give up its right to strike, and this was something that both the union and the employer wanted, and I believe, and people who have longer memories and longer history here, that the firefighters, their union and the city wanted binding arbitration.

I think what the Leader of the Opposition (Mr. Doer) has suggested here is that we tell

them they want binding arbitration. I think that is a little bit different. I have heard a request from the mayor for essential services. I have not heard anything from the union. I have not received any—[interjection] well, the Leader of the Opposition says he has heard from the union. That is no surprise to me. That is no surprise. I read Bernard Christophe's union magazine, and I guess the new NDP still has strong ties to the union movement here in Manitoba.

But I am concerned—and I understand that under second reading we are supposed to be talking about the broad principles of the bill—that if the official opposition is bringing forth an amendment on binding arbitration when this Legislature has not been asked to do that, as opposed to how it came about in the police service and the fire service, maybe it will not be as strong. The other thing is that I find it confusing that when the Nurses' Union were offered binding arbitration, I did not hear the NDP encouraging the nurses to accept binding arbitration, so I find an inconsistency in their position. Now they are telling the ambulance attendants that they should take binding arbitration, but I did not hear them telling the nurses to take binding arbitration when they were offered that in the last contract.

Yes, I think it is very important. I remember the one time when the Winnipeg Police Service took a strike vote, and it looked as if we were going on strike. I was fully prepared to cross the picket line because I said no person in Winnipeg was going to be put at risk because my wallet was not thick enough. I said I would go on strike on principle, for example, to not allow one-person cruiser cars that I believe would put the citizens and the police officer at risk. The same here, I do not think any ambulance attendant should be putting the citizens of Winnipeg at risk because their pocketbook is not full.

So I agree that we need something to keep the ambulance attendants on the street, but we have to do it in a fair way. I would like to hear from them in committee, whether they want binding arbitration, and possibly we will, but no one in Winnipeg should be put at jeopardy because someone's wallet is not thick enough. Thank you.

Mr. Steve Ashton (Thompson): Madam Speaker, I, first of all, want to thank the government House leader (Mr. Praznik) for contacting me this morning on this matter. I appreciate the approach taken by the government House leader because it certainly was crucial in giving us the opportunity to discuss this matter and come up with the agreement that we have to deal with this matter today and go into committee tomorrow morning.

I want to put on the record, too, that the government House leader (Mr. Praznik) was the first one to make us aware of this. I think, also, the Minister of Health (Mr. Stefanson) made our Health critic aware of this. I do wish that the City of Winnipeg had, perhaps, given us some notice of this in advance because that might have assisted in what we are essentially looking at here, which is looking at dealing with the current situation, and a fairly significant request.

I do note that the city does make other requests for legislative action, which the government does not always agree with, and we are in the position now, as legislators, with an impending strike. There is no set time for the strike, but we have a potential strike. We are now sort of having to scramble somewhat, given the circumstances.

I think it might have assisted greatly if the city had made us and the opposition—and I assume the Liberal Party was not aware of this either—they had perhaps officially made us aware of their request because the letter that I received—I received two letters, pardon me, today. One was dated May 13. I want to put that on the record, but I would note to the city that when it comes to requests such as this, it requires the co-operation, if not necessarily agreement, but certainly requires the co-operation of all three parties in the House. I would suggest to the city that the next time that, if they have any suggestions, they perhaps do that.

That being the case, I also want to stress again that we are pleased the minister has agreed to hold the committee hearings tomorrow. We wanted to have some time to consider this bill and some time to develop the alternative we are proposing. I want to point out, by the way, that we—and I know there was some reaction from at

least one of the members when we indicated we had contacted the union. We contacted the union and the city. We contacted both parties to this dispute. I believe that was the appropriate thing to do, even though we were not informed of it. That was essentially to try to obtain a balanced picture of what has happened.

I want to stress that that is an important principle, Madam Speaker, and something that we in the New Democratic Party feel strong about. We are dealing with, as our Leader pointed out, both health care, something that we are very strongly committed to, and also the collective bargaining process, something we are very strongly committed to. I think at times what is required is assurance that one does consult widely, and then, obviously, as members of the Legislature and as parties in this House, we have to make decisions. We have to decide, obviously, the right balance of, in some cases, potentially conflicting principles.

What we propose, we believe actually is in keeping with both principles. Our proposal would ensure the continuation of ambulance services, period. I do know, by the way, that this approach that we are looking at, we did raise this, I know—certainly, the union will speak for itself tomorrow. We have raised it with both sides. We feel this is the appropriate way to proceed.

I want to point out the difference of what we are dealing with. If we simply pass the amendment that the government is looking at, what we will essentially do, I believe, is make it far more likely that there will be a fairly immediate strike situation. On the one hand, you will have the essential services portion in place; you have a 94 percent strike mandate from the union, and I know that only from what I have read in the paper. You obviously have a major disagreement between the two parties.

I believe the issue was the parity of treating ambulance workers the same way as firefighters and not trying in any way, shape, or form of getting into who is right or who is wrong, because in the collective bargaining process, that is not the point.

The collective bargaining process is about keeping people talking, trying to keep a process

moving towards resolution. I would suggest that our proposal is superior to the only other proposal we have before us. I appreciate what the member for The Maples (Mr. Kowalski) was saying but, you know, essentially we have been asked by the city, and it has been agreed to by the government, to deal with either Essential Services Act or no Essential Services Act amendment.

We feel that would not be in the best interests of any of the parties involved. That is why we are trying to come up with an alternative proposal. I know opposition parties often are criticized for putting forward proposals that are—that we do not put forward proposals. In this case I recognize again, just to reflect on what the member for The Maples is saying, we do not know quite frankly what the reaction of both sides will be in this, but we do not have much choice other than move it now.

We have been asked to give leave, that it is a pending strike. It is either The Essential Services amendment proposed by the government or this alternative. That is one of the reasons there has not been this other buildup.

I would actually encourage both sides to the dispute to look at our proposed amendment. We will be preparing it for tomorrow. I would encourage them publicly to look at that, because we believe this is one possible solution, as I said, not only to the dispute itself, but possibly a way of avoiding a potential strike situation, which will be very difficult for all parties involved and certainly the public. I want to put that on notice that that is the crucial thing that we want to see.

* (1450)

I also want to note, Madam Speaker, that I do believe it is important for the government as well to perhaps encourage this discussion, because I think, to a certain extent, as I pointed out, there is some inconsistency here. The government on this issue is just saying, yes, we will do what the city wants, but on many other issues completely refusing to do what the city has asked for, including, by the way, and rightly so, the request from the city under the previous mayor to roll back the contract. That was not appropriate. That would have been abuse of the

legislative authority of this Chamber. I would suggest, in this particular case, that this is not the best way of proceeding.

I realized the city was attempting to negotiate, as was the union, an essential services agreement, and that did not happen. But to ask, on the eve of a strike mandate, a pending strike, for us to deal in the Legislature with a process that normally takes some time I think is an indication that there has been a lack of perhaps some forward thinking somewhere along the way with some of the parties involved, particularly, in this case, perhaps the city itself.

That being said, we obviously are dealing with a request. Our view was at least to, not indicating that we necessarily are going to support this bill, but we felt it was appropriate to deal with it today and deal with it forthwith and deal with our alternative.

I want to just finish, Madam Speaker, because I think this is an example of where it is important I think to have an understanding of all sides of the picture. I know our Labour critic will be talking about this in a moment but, you know, I really think this is the very situation. I just want to put on the record that it is interesting because, on the one hand, we are accused of being the friends of unions, and obviously we are proud of our connection with the labour movement, and of course Glen Murray certainly is well known to members of the New Democratic Party.

So here is a classic example where we are probably in a better position than anyone to try and think out ways in which not only the individuals but all parties in this dispute can be satisfied, because I want to stress again that we are not just concerned that the city and the ambulance drivers reach an agreement, we are concerned obviously about patients and medicare. So in a lot of ways what you need is a balanced approach, a creative approach.

I want to put on the record, by the way, that one of the sad comments here is that this government took out one of the provisions a number of years ago that did provide an alternative, final offer selection, supported, by the way—the member for The Maples, it is before

his time—the Liberals. We fought and we did get it delayed somewhat, but we have often argued that we believe strongly in free collective bargaining. We also believe in the right of workers particularly to find alternate solution mechanisms. The police, the firefighters, the teachers have gone that route, and it has worked relatively well.

By the way, nothing takes away from the collective bargaining provisions that take place. Collective bargaining is quite strongly undertaken in all those particular circumstances. The bottom line is that it does not mean you cannot have collective bargaining and potential alternatives to strikes. In this particular case, we have proposed an alternative resolution mechanism. It is consistent, quite frankly—and I would say this publicly to all parties involved. We would suggest that there is certainly, and we are not getting into salary disputes, is an equivalence here between firefighters, as we see them, and ambulance drivers. We believe it makes no sense to treat firefighters and ambulance drivers differently under different acts and in different ways, Madam Speaker. That is why we want this debate, and in committee tomorrow we will be moving an amendment that would specifically bring the ambulance drivers under the same provisions that firefighters are currently under.

We believe it is the best solution, Madam Speaker, and we would strongly urge not only the government to consider this, but the city, the ambulance drivers and other members of the public. We look forward to their presentation tomorrow, and we hope over the next 24 hours there will be some open-mindedness here and that we can come up with a creative solution to what potentially could be very difficult circumstances for everyone involved and particularly for the public of Manitoba.

Thank you, Madam Speaker.

Mr. Daryl Reid (Transcona): I am pleased to rise to add my comments on Bill 27, The Essential Services Amendment Act, which the Minister of Health (Mr. Stefanson) tabled in this Chamber just before Question Period today.

Madam Speaker, I think we need to go back a short period of time ago, back when The

Essential Services Act came into being in this province and the debate that was taking place at that particular time. I can remember in a committee of this Legislature one evening when I think we were debating Bill 26 which was an amendment to The Labour Relations Act in this province, the Manitoba Health Authority came before committee and told the then Minister of Labour, who is now Minister of Justice (Mr. Toews), that the government should consider implementing an essential services act in this province that would take away, in effect, the right of employees of this province, who at that time had the right to strike, deeming them as part of the essential services of our province.

Madam Speaker, the Minister of Labour at that time then took that understanding, and I know he asked several questions at that time, took it back to his cabinet and caucus, and what do we have the next session? We had the essential services bill tabled before this Legislature, which essentially took away the rights of members of the public who work in the health care field, in particular, but a variety of areas within the health care sector, took away their ability to exercise their rights under the free collective bargaining process that we accept in this province.

So we knew at that time that the minister, who is now Minister of Justice, said that there was a better way that he had to look at dealing with lockout or strike situations that would protect, he said, the life and limb and never gave any consideration, which was surprising to me at the time, to the process that was currently in place under The Labour Relations Act in this province that would allow for binding arbitration, and any minister, any person in this Legislature, I would hope, would know that The Labour Relations Act does provide for the process of binding arbitration, should the minister deem it in the best interests of the public. So, Madam Speaker, we think that at this time the government could have chosen to utilize that particular process.

I go back to the comments that were made by the member for The Maples (Mr. Kowalski) here a few moments ago when he talked about whether or not the union, in this case representing the paramedics in the city of

Winnipeg here, wants indeed to have binding arbitration as part of the process. Well, I can tell the member for The Maples and his colleague that all it would take would be to pick up the phone and ask members of that particular union and perhaps some of the city councillors whether or not those two parties had talked about binding arbitration. I can tell the members that, yes, I picked up the phone, I talked to those people, and they did tell me that binding arbitration was a recommendation before those negotiations and that it was the City of Winnipeg, in fact, that rejected that particular proposal. So, Madam Speaker, that binding arbitration process was on the table, and it was the city that rejected the binding arbitration process.

Yet to the members, all I suggest to you is that all you have to do is pick up the phone and ask them if they want the binding arbitration process as a part of a creative solution to the problem that we have facing us today. I think it is a workable solution. I think that it will allow for some resolution of the issues that are in dispute between the two parties, and I do not mean to get involved in the middle of that particular dispute. I do not think it is appropriate for me, in my place here today, to be involved in the actual negotiations which should be done at the negotiating table.

I would expect, though, that there would be some fair play and resolution of this matter and that there would be an opportunity to have the parties come to some kind of an arrangement with respect to this problem that is facing both of them.

I know if you look at The Fire Departments Arbitration Act that we have currently on the books in the province here, that we believe, as my Leader has already said, that this is one way to implement the binding arbitration process here in the City of Winnipeg, that will, we believe, solve the problems that the government has been asked to address by the City of Winnipeg.

Now, I look back to the various problems that the City of Winnipeg has encountered in past. They have made suggestions to this government to take certain legislative steps. I know my colleague the member for Thompson

(Mr. Ashton) referenced the City of Winnipeg and Mayor Thompson wanting to legislate away a collective agreement that was in force at the time with the civic employees.

The government at that time, rightly so, said, no, that they were not going to take that step. We think that the government, when you get a request from a municipality in the province, including the City of Winnipeg, you have to look at it in the clear light of day and recognize the courses of action that are available to you, not just jump at a solution that you deem to be the quickest and most expedient to solve the problem, but to look at one that will actually resolve the problem that is outstanding.

* (1500)

What you are doing here today is just saying to the people who are in a legal strike position right now, we are taking away your right. There is no solution, no remedy to the problem that is out there with respect to the negotiations that are ongoing. All this is going to do is cause it to fester and boil over and not cause—what we want to see is a solution to the problem so that the public is not affected, so that the essential health care services that are provided by the paramedics in our province are continued and that the patients and the people of Winnipeg are not put at risk by the withdrawal of those services. We see binding arbitration as a solution to that.

In this legislation, The Fire Departments Arbitration Act, it is my understanding that there would be notice given by either of the parties and, having read through this legislation, that notice would have to be given by October 1 prior to the contract expiring. In that sense, where there would be no agreement by either of the parties, either of the parties could then by December 31 of that year, three months later, apply in writing to the minister and then the minister would be in a position to appoint an arbitration board.

Now, we know that this legislation would require about five minor amendments to The Fire Departments Arbitration Act to amend the clauses in there with strict reference to firefighters or firemen, which seems to me not to be gender specific, but you would think that they

would have rectified that in the past, but we will leave that one aside for now. In this case, perhaps that would be an amendment you could make at the same time, make it nongender specific and also reference paramedics.

Now, it is interesting to note that the City of Winnipeg, through their actions on the City Council just recently, blended the two departments, the ambulance services in the City of Winnipeg with the fire services department.

Well, I am not in a position to pass judgment on whether that is a good or bad thing. I leave that to them. They are another level of government providing that service. I am not going to second-guess the reasons because I do not have all of the facts for the reasons those decisions were made, but I do know that if you are going to blend those two departments together, it would seem reasonable to put them under the same act, legislation, deeming that to be where the binding arbitration would take effect.

I would expect that they would have considered that, but I know that since it was on the table and the city rejected it, and I am not sure why they rejected it, but I do know, my understanding is that the councillors rejected it. The union had put it on the table for binding arbitration, and my understanding is that the council rejected it.

Now, the member for Inkster (Mr. Lamoureux) can perhaps do like members on this side did and call the city councillors and call the union members to find out their points of view or perhaps when they come to committee tomorrow morning, ask them questions with respect to binding arbitration. But we see that this is a reasonable way to settle the differences that the two parties might have.

Now, we know that there are other essential services that are in this province, not only health care, but we have our police force in the province here, and I know the member for The Maples (Mr. Kowalski) referenced that a few moments ago. We also have our teachers who are prevented from striking in the province of Manitoba under The Labour Relations Act, and there has been some talk by teachers in this province about going back to some limited right

to withdraw their services in this province. This government has chosen not to follow that course of action, and I would think that this government would see that that would be a fair and equitable way of solving this dispute that we have between the ambulance services, the paramedics in the city of Winnipeg, and the City of Winnipeg civic government.

I think what we need to do is we cannot always just give carte blanche approval to any request that comes before us, and having read through the two letters that were sent by the City of Winnipeg, signed by Mayor Glen Murray, one dated May 13, relating to collective bargaining between the City of Winnipeg and the Emergency Response Services Employees Association, and another letter addressed May 18 to the Minister of Health, both of them to the Minister of Health, asking the province to enact essential services legislation to limit or take away the ability of the employees in this case, their ability to take free collective bargaining action, we think that is the wrong way to go and it would be better served if we had gone to binding arbitration.

I think what we as legislators need to do, we need to give reasoned consideration to the request that has come from the City of Winnipeg from the mayor and council members. I imagine the mayor has council support for this, but we need to give reasoned consideration to that request and to choose the most appropriate course of action that is fair not only to the City of Winnipeg Council but also to the employees who are involved on the other side of this particular dispute.

We should not just accept at face value, as the member for The Maples (Mr. Kowalski) appeared—and I do not want to put words in his mouth, but appeared to do when he accepted at face value the request coming from the mayor and council. We think that there is a better way to resolve this dispute through the binding arbitration process, and we suggest to members of this House that the government look at that option very seriously. It is our understanding that when it goes to committee tomorrow, we will be talking to any members of the public who wish to come out and make a presentation to the committee, that those so wishing, we will ask

them about options that are available and why they would not have considered those options, perhaps proposing our solutions as well, where we can find a reasonable solution to the problem that is outstanding, and that is through the binding arbitration process.

So with those few words, Madam Speaker, we recognize that it is important to protect the life and limb of vulnerable Manitobans who may require in emergency situations the services of the Winnipeg ambulance service and the employees who provide that service, but we also recognize, too, that there are principles that are involved in this process where we can bring about a reasonable and fair and equitable solution to the problem, not through the imposition of The Essential Services Act but through the binding arbitration process that would allow for a resolution of this problem

Madam Speaker, we look forward to this bill going through to committee tomorrow morning and to having a further debate on this particular piece of legislation, Bill 27. Thank you.

Mr. Kevin Lamoureux (Inkster): Madam Speaker, I, too, just wanted to put a few words on the record on this bill. In the past, I have had the opportunity to speak on the essential services legislation and would in part at least draw a partial conclusion in the sense of why it is that at different times we have to look at bringing in changes that are necessary to essential services legislation. I would think there would be enough expertise and bureaucrats who would have the know-how to talk about the different types of services that the public needs to see put into place, so that we are not doing it in an ad hoc way.

In this particular case, maybe it is as simple as the City of Winnipeg approaching, when we had the legislation previously, indicating here is the type of services that we would like to see brought into Essential Services and the provincial government itself saying here are the types of services that we believe needs to be brought into Essential Services.

The reason why I say that is because ultimately to bring it up while in the midst of a labour crisis in any sector kind of, I think, does a

disservice, that ideally the time to do it is, in fact, well in advance of having to settle some of these labour negotiations that are out there.

But having said that, Madam Speaker, one has to look in terms of what is being requested of the government of the day. I was intrigued by the comments made by the member for Transcona (Mr. Reid). We, too, have placed a call in trying to get more information on this bill because, like the member for Thompson (Mr. Ashton), we received information today also on it.

I guess there is always political discretion that has to be used at the different levels of government, but one of the things that I think should be respected is that if you are trying to get things through the provincial Legislative Chamber, as a courtesy, opposition parties or all members should be notified as early as possible so that we can carry out, to the best of our abilities, our responsibilities in terms of being able to do the homework that is necessary.

The member for The Maples (Mr. Kowalski) brought up, I thought, an excellent point when he made reference to the fact that the police and the fire departments respectively came to the conclusions within the negotiations to have binding arbitration. Well, it would appear that binding arbitration was something that was not agreed upon between the city and the ambulance workers. If that is, in fact, the case—and I was a bit confused by the earlier comments from the member for Transcona (Mr. Reid)—that there was no agreement, I think then we have to look at what our responsibility is as legislators.

* (1510)

I think it should be very clear, and made very clear, that the first priority is people who are going to be receiving that service. What we should be doing is accommodating what is in the best interests of the users, the patients, the Winnipegger or the Manitoban who needs this service. That was the argument when we brought in the essential services legislation that these are the people who have to be at the top of our mind in making sure that the services that have to be there are going to be there in some way and to not jeopardize the lives of

Manitobans. We take that responsibility very seriously. That is the reason why we would like to see this bill ultimately go to committee.

We agree with the opposition House leader (Mr. Ashton) and the government House leader (Mr. Praznik) in terms of having the committee meeting for tomorrow as opposed to today because of notifications and potential of presentations. It will be interesting to see what, if any, presentations to the binding arbitration argument or potential amendment are going to be brought forward. I would think that, if you have both sides agreeing that binding arbitration is what they would like to see, then I think it would be a responsible thing for us as a committee then to look at passing an amendment of that nature. But if we do not see that consensus coming from the city, I think then there is a responsibility for us to look at The Essential Services as being the answer to resolving this particular issue.

I myself in the past have argued for binding arbitration. I can recall when we had the emergency strike with our doctors. In some cases, in some areas, I think that we need to fight for binding arbitration, but it is not necessarily the answer to everything. We had our largest labour dispute, potential dispute, with respect to our nurses. I had understood that in fact they were offered binding arbitration. In this particular case, you have the union that saw fit that it was not necessary to have binding arbitration, and it worked out well. It worked out well in the sense that we ended up getting Wally Fox-Decent.

I am an optimist. I hope that the union and the city will, in fact, be able to address the many different issues that are on the table, but, failing that, we have to do what our responsibilities are. At the very least we have got, and I have seen both letters from Mayor Glen Murray and respect the fact as the mayor, at least in part, the assumption is that this is in fact what the City of Winnipeg, City Council wants to see happen.

We look forward to seeing what sort of representation is made at the committee level. It will indeed be interesting to see ultimately on the whole issue of binding arbitration what sort of representations will be made on binding

arbitration, because if in fact, as I say, there is a consensus towards moving in that direction, I would be inclined to suggest to him that that is by far the way to go, but we have to hopefully see that consensus.

With those few words, we are quite prepared to see this bill go into committee.

Madam Speaker: Is the House ready for the question? The question before the House is second reading, Bill 27, The Essential Services Amendment Act; Loi modifiant la Loi sur les services essentiels. Is it the will of the House to adopt the motion?

Some Honourable Members: Agreed.

Madam Speaker: Agreed? Agreed and so ordered.

House Business

Hon. Darren Praznik (Government House Leader): Madam Speaker, a couple of announcements. I would actually call today the Standing Committee on Law Amendments to meet tomorrow at 10 a.m. in a committee room assigned by the Clerk. A notice will go out to members of that committee. I understand that there will be some committee changes by both Whips that will follow my motions.

I would also announce today that the Standing Committee on Public Utilities and Natural Resources will meet on Tuesday, I believe it is the 25th of May, 1999, at 10 a.m. in Room 255 of the Legislative Building to consider the Workers Compensation Board's 1996 and 1997 five-year operating plan; the Annual Reports of the Workers Compensation Board for the years ending December 31, 1996, '97, and '98; and the December 31, 1996, '97, and '98 reports of the Appeal Commission of the Workers Compensation Board.

Madam Speaker: The Standing Committee on Law Amendments will meet tomorrow, May 19, 10 a.m., in a room to be announced by the Clerk's office. The Standing Committee on Public Utilities and Natural Resources will meet Tuesday next, May 25, 10 a.m., Room 255, to consider matters relating to the Workers Compensation Board.

Mr. Praznik: Madam Speaker, the Standing Committee on Law Amendments is being called for the purposes of considering The Essential Services Amendment Act, which received second reading this afternoon.

Madam Speaker: Bill 27 will be considered tomorrow morning in the Standing Committee on Law Amendments.

Mr. Praznik: Madam Speaker, I believe the Whips have committee changes, and then I will be moving a motion to move into Committee of Supply.

Committee Changes

Mr. Edward Helwer (Gimli): I move, seconded by the member for Charleswood (Mrs. Driedger), that the composition of the Standing Committee on Law Amendments be amended as follows: the member for Kirkfield Park (Mr. Stefanson) for the member for Rossmere (Mr. Toews); the member for St. Norbert (Mr. Laurendeau) for the member for Turtle Mountain (Mr. Tweed); and the member for Sturgeon Creek (Mr. McAlpine) for the member for Charleswood (Mrs. Driedger).

Motion agreed to.

Mr. George Hickey (Point Douglas): I move, seconded by the member for Broadway (Mr. Santos), that the composition of the Standing Committee on Law Amendments for Wednesday, May 19, 1999, at 10 a.m., be amended as follows: Wellington (Ms. Barrett) for Selkirk (Mr. Dewar); Crescentwood (Mr. Sale) for Elmwood (Mr. Maloway); Transcona (Mr. Reid) for St. Johns (Mr. Mackintosh).

Motion agreed to.

* * *

Hon. Darren Praznik (Government House Leader): Madam Speaker, I would move, seconded by the honourable Minister of Justice (Mr. Toews), that this House now resolve itself into a Committee of Supply to consider of the Supply to be granted to Her Most Gracious Majesty.

Motion agreed to.

**COMMITTEE OF SUPPLY
(Concurrent Sections)**

EDUCATION AND TRAINING

Mr. Chairperson (Gerry McAlpine): Order, please. Will the Committee of Supply please come to order. This afternoon this section of the Committee of Supply meeting in Room 254 will resume consideration of the Estimates of the Department of Education and Training. When the committee last sat, it had been considering item 16.1. Administration and Finance (b) Executive Support (1) Salaries and Employee Benefits on page 46 of the Estimates book. Shall the item pass?

Ms. Jean Friesen (Wolseley): Mr. Chairman, I think the minister had a number of things to table. I wondered if we could begin with that, a number of things that he was going to table from yesterday.

Hon. James McCrae (Minister of Education and Training): Mr. Chairman, yesterday we talked about students in care of child welfare agencies. I am going to table the Guideline for Registration of Students in Care of Child Welfare Agencies.

This protocol was developed in response to requests from the field so that services and educational programming could be better developed for children in care. There continues to be ongoing dialogue with Education and Family Services and agencies in school divisions to implement the protocol and have everyone become knowledgeable and skilled in using the protocol to support children. So I am going to table that today.

The honourable member asked about the FAST Program, Families and Schools Together. This program is a four-year pilot project that has now completed its second year. The evaluation process is underway with criteria which include a look at outcome measures for families involved in the program. We look forward to the completed pilot with four years of evaluation data to determine the effectiveness of this model.

The FAST Program is a school-based program targeted to children between the ages of

four and nine, the K to Grade 3 levels, who have been identified as at risk of future social, academic and substance abuse problems. Once those children have been identified, the school approaches the child's parents for agreement to become involved with the FAST Program. The program is available to the entire family after regular school hours. The duration of the program is approximately eight weeks but also includes monthly follow-up sessions called Fastworks for a two-year period.

While participating in the program, families work together on projects aimed at developing a positive image of the school system and at stressing the overall importance of education. The province and the Winnipeg Foundation are funding partners.

FAST employs an evaluation methodology that includes four quantitative measures and one qualitative measure. One is the revised behaviour problem checklist and assessment instrument used to screen behaviour disorders in schools. The checklist contains six subscales that measure conduct disorder, socialized aggression, attention problems, anxiety withdrawal, psychotic behaviours and motor excess. Parents and teachers complete this checklist for the children identified as at risk.

There is the family adaptability and cohesion evaluation scales. This scale rates a family's level of adaptability, or ability to change, and cohesion, which is the degree to which the family is connected. Thirdly, social insularity subscale of the parenting stress inventory. This scale measures parents' perceptions of social support, thus linking. There is the WITTE parent survey. Selected questions from this survey are completed by parents to determine the level of contact between the school and parents and the involvement of the parents in school activities.

Then there is Families and Schools Together, a program evaluation by family. This is an open-ended questionnaire that provides families with an opportunity to explain the impact of the program on their lives. As of September 30, 1998, the FAST Program had been introduced at four schools, those being Machray, Margaret Park, Glenwood and

Lavallee, resulting in the completion of six eight-week cycles. During the reporting period, FAST Program graduates included 55 families, 85 parents and 147 children. In the fall of 1998, Wellington School became the fifth school to implement the FAST Program. That is what I have to say about that.

Mr. Chairman, the honourable member also asked about programming for gifted and talented students. Parents who have a student who is gifted or talented need to work in partnership with the school team to identify the ways in which the best possible program can be developed to meet the student's unique learning needs. Schools and school divisions have the responsibility of meeting the needs of all students. The programming for gifted and talented students remains under local jurisdiction. Programming initiatives for students who are gifted and talented fall under the responsibility of the local jurisdictions. Manitoba Education and Training provides a formula grant for Level I programming. This includes support for students who are gifted or talented. School divisions utilize the funding allocation of Level I in various ways based on the identified needs in their divisions. The majority of school divisions provide support to students who are gifted or talented in the context of the regular classroom, providing a learning environment that is enriched and challenging through diverse instructional strategies.

New Directions initiatives support the need for a rigorous and challenging educational program through numerous support documents. These include: success for all learners, differentiating instruction, differentiating instruction of bibliography, a thinking framework, teaching thinking across the curriculum and Senior 3 Visions and Ventures: An Entrepreneurship Practicum. All curriculum frameworks documents contain prescribed outcomes and suggestions for teaching, learning and assessment that encompass the needs of all learners, including those for whom enrichment and extension of the curriculum is appropriate. In addition, the outcomes of each curriculum are presented so teachers can adapt their teaching to meet the needs of students who are gifted or talented.

This format has been widely applauded by schools that use a multiple intelligence approach to teaching. Elements such as greater attention to problem-solving and the use of technology are integrated into all curricula as they are developed. This provides another means in which the student who is gifted or talented can be challenged. Standards testing has a range of questions that include some that will challenge the student who is gifted or talented. In addition, the standards testing will enable schools to identify as early as Grade 3 students who are meeting and exceeding expected outcomes in English language arts and mathematics.

Some divisions have developed policies and support for students who are gifted or talented. Here are some examples.

In Winnipeg School Division No. 1, the division includes in their ADAP a section on gifted and talented programming. The goal outlined in this section is to provide appropriate instruction in educational services particular to the needs of gifted and talented. The division also outlines program goals such as student identification, professional development and curriculum support.

* (1540)

In St. James-Assiniboia School Division No. 2, in Grades 4 to 12, there are assigned co-ordinators to support teachers. In addition to many division-wide extracurricular programs, the division has the GATE program for gifted and talented education. The GATE program includes partial pull-out of the regular classroom.

In Assiniboine South School Division No. 3, they first addressed the needs of the division with a document developed locally entitled Services for Gifted Children, 1984. The document provides a philosophy and material resources. This support is the basis for the division's challenge program for gifted and talented students. A specific policy was not adopted. The division feels that students who have outstanding capabilities and those who are capable of exceptional performance should receive accommodations and services to meet their needs and realize their potential.

In Fort Garry School Division No. 5, there is an elementary program co-ordinator for enrichment who provides program support for school-based initiatives.

In Tiger Hills School Division No. 29, this division outlines an action plan for enrichment, gifted education in their ADAP. The division piloted an action plan from 1992 to 1997. The division provided training to staff to increase the division's capacity to provide enrichment to gifted students. The model gradually built on the division's resources until all schools in the division had incorporated some form of enrichment programming.

In Turtle Mountain School Division No. 44, they included in their annual divisional action plan a section on the gifted and/or talented program. This outlines a philosophy and the programming principles. The outline was developed by a divisional committee which supports a pull-out program for students who are gifted. This is one of the divisions I had the privilege to visit.

I also visited Winnipeg School Division, and I have been in St. James-Assiniboia School Division. I have been to Fort Garry School Division. Assiniboine South, I am going there tonight. Tiger Hills, I do not think I have visited yet, but Turtle Mountain I have, and they have some great schools in places like Killarney and Boissevain. They have a superintendent there who would maybe be known to the honourable member, in the person of Jerry Storie, the former Education minister in the province of Manitoba. He is the superintendent down there in Turtle Mountain School Division, a very progressive area of the province. I met with teachers there and I met with students. I had a very educational and enjoyable time there.

In Frontier School Division No. 48, up until June 1998, the division had a 0.5 staff year of a consultant, a 42-hour training program for teachers in divisional policy approved by the board. After the fall of 1998, the division reallocated responsibility for the education of gifted and talented students to the area special needs staff. The division provides the ongoing resource of a consultant to assist teachers in incorporating best practices into daily

instruction, so the department continues to support the approach used in all new curriculum where the enrichment of students and the diversity of learner needs are met within the context of the classroom and the school.

The honourable member also asked about transitions from school to adult day services, the Supported Living Program. The number of students who have individual transitional plans will vary from year to year based on the number of students leaving the school system. The honourable member asked, I think, how many there were and the answer is that it varies. The Supported Living Program typically projects between 75 and 90 individuals each year who will meet eligibility criteria and require day services upon graduation from school at age 21. The transition planning process has identified 93 individuals who will require day services in 1999-2000.

The department expects to be able to serve all of these graduates with new resources required to serve 58 of these individuals. The balance of 35 individuals is expected to be served through vacancies created by movement to paid employment or movement to alternate services due to deteriorating health and aging.

The day services component of the Department of Family Services Supported Living Program provides for a range of supports and training to assist adults with a mental disability to participate in the community through day program activities that can be broadly characterized as follows: first, supported employment and follow-up services support individuals in jobs at competitive wages in community settings; second, services with a vocational focus develop, maintain and maximize an individual's vocational and social skills that may lead to competitive employment. Services may be delivered in a day service facility or in a community setting. Third, individualized developmental services develop, maintain and maximize an individual's personal care skills, emotional growth, physical development, socialization opportunities and communication skills.

Services may be delivered in a day service facility or in a community setting. The age of

eligibility for day services is consistent with the age at which an individual loses his or her right to attend school under Section 259 of The Public Schools Act. Individuals become eligible in July of the calendar year in which they reach 21 years of age.

The Family Services department expects to fund day services for about 2,220 adults with a mental disability in the year 1999-2000 at a total cost of approximately \$16.2 million. The 1999-2000 budget included a \$2-million increase for day services to expand programming, as well as to increase funding levels to service providers by 5 percent. The Valley Rehab Centre Inc. at Winkler and Versatech Industries Inc. of Winnipeg are examples of large, more traditional day services focusing primarily on facility-based vocational services with approximately 110 and 270 participants respectively. Both agencies simulate a light manufacturing and packaging environment. The Valley Rehab Centre focuses on woodworking, packaging and assembly and the corresponding sale of goods produced. Versatech also is engaged in packaging and assembly as well as recycling of paper. Project SAM Inc. of Portage la Prairie provides more community-based vocational services and is successful at securing and supporting paid employment for individuals eligible for day services supports. That is approximately 30 participants. Activities include lawn and property maintenance, residential snow removal and flyer delivery.

I hope that is responsive to the matters raised previously by the honourable member.

Ms. Friesen: Mr. Chairman, I just want to clarify something with the minister about the material he tabled which is labelled the Guidelines for Registration of Students in Care of Child Welfare Agencies. I was working from a Children and Youth Secretariat document which I think referred to foster children. Is this the same document? The words "foster children" does not appear in this one, either in the title or in the general description. Foster children are not necessarily—I know I am in the middle of a sentence. I will just wait for the minister to clarify that, and then I have some further questions on this line, thanks.

Mr. McCrae: It is the same document.

Ms. Friesen: Mr. Chair, I want to ask one follow-up question on talented and gifted. The department has a general working definition of children who require modified programs in school. Does the department have a working definition of talented and gifted? For example, the department, I believe, says 5 percent approximately across the province or possibly even within a division is what they would consider within the range of modified programs, 5 percent of students.

Does the department have a working definition, a working percentage of talented and gifted?

Mr. McCrae: No, but we work from the knowledge that there is in the literature that suggests that about 2 percent of the population are gifted, but we do not have a clear-cut number to offer the honourable member as to how many.

Ms. Friesen: Mr. Chairman, is there a working definition for how money is allocated then within the Level I funding for talented and gifted students? Are divisions working on the same principles? Are there comparable allocations across divisions?

Mr. McCrae: Maybe I will ask the honourable member just to put her question again very simply for us.

* (1550)

Ms. Friesen: The minister indicated that talented and gifted funding at the moment is allocated in Level I of special needs funding. The special needs review is suggesting that the minister make a different kind of allocation. I am interested in what the past practice has been so that when an amount of money is allocated in Level I funding to a particular division, how does that division and under what definitions does that division operate to allocate money to gifted students? Are all divisions operating on the same principles and are those principles available from the Department of Education?

Mr. McCrae: The present situation or the previous situation has been that gifted students

are included in the Level I categorization. When it comes to reporting from the school divisions, gifted children are included as one category along with the other categories. That is the present situation, and the special needs review is suggesting something differently, and that would be something that the department and the partners we are working with will have to address.

Divisions have the flexibility to allocate Level I funds based on the programs they design. They then report the expenditures based on the definitions in the FRAME report. The definition in the FRAME manual indicates that programming that is provided that is beyond what the regular programs can offer for individual students. I hope that answers the honourable member's question.

Ms. Friesen: Are divisions required to have programming for gifted and talented children?

Mr. McCrae: Divisions are required to provide an education to all the children who are covered under The Public Schools Act, so that includes children who are gifted and children who have other special education requirements.

Ms. Friesen: How many divisions do offer programs in gifted and talented students?

Mr. McCrae: As I pointed out previously, Winnipeg School Division No. 1 provides services for gifted students and School Division No. 2 St. James-Assiniboia, School Division No. 4 St. Boniface, School Division No. 6 St. Vital—this is as identified in the FRAME report—also School Division No. 13 Agassiz, School Division No. 15 Hanover, School Division No. 18 Rhineland, School Division No. 24 Portage la Prairie, No. 26 Garden Valley, No. 33 Dauphin-Ochre, No. 35 Swan Valley, No. 38 Birdtail River, No. 42 Souris Valley, No. 44 Turtle Mountain, No. 48 Frontier and No. 49 DSFM.

Ms. Friesen: Mr. Chair, that seems to be less than half the school divisions of Manitoba offer that kind of programming. In looking at the special needs review recommendations, how will he be taking that into account, in particular, in determining equity and funding across school divisions?

Mr. McCrae: In each division there are a certain number of dollars made available to each division under the funding for education from the province. They also raise money for their operations through the special levy on the property tax, which is the subject of discussion in the House and will no doubt be part of the lower tax review announced in the throne speech and mentioned again in the budget brought down by the Minister of Finance (Mr. Gilleshammer).

Each division would implement programs differently, as I indicated earlier. Assiniboine South, for example, has a different approach than the one in St. James. This provides divisions with the responsibility and the flexibility to program for their uniquenesses. I named some districts for which funding is made available on the basis of identified and categorized children. That does not mean, as the honourable member has implied, that all the other divisions do not provide various types of enriched opportunities for gifted children in those divisions. The list that I gave to the honourable member simply outlines amounts made available, because the divisions in the cases I mentioned have categorized certain of the gifted children in the Level I category.

* (1600)

Again, I say to the honourable member that does not mean that other divisions simply have no programming for their gifted children, because that would be quite an incorrect statement. Some call it enrichment, and because they do not call it gifted, then they do not report it. So therefore they do not receive funding because I assume they—well, they just have not. So that those who have identified children in a categorized way have received funding because presumably it requires additional funding to make that programming work, so that each division would have something that reflects their particular requirements.

The special education report did not specifically recommend that there be legislated or mandated gifted programming. But it did recommend that we specify funding for gifted children, and we are indeed looking at that recommendation.

Ms. Friesen: Mr. Chairman, the final section of proposals from the special needs review looks at and recommends, in fact, a number of actions that I think have been recommended to the government before. In fact, after the last election, in the Postl report, there were recommendations for single-window access for students, for full-service schools where the school is the physical site for service delivery, for the versions of the child profile information system linked to cross-sector funding, and the intersectoral co-operation to provide consistent and accurate information to parents about the school system. I think versions of that and the fundamentals, the assumptions behind that, were all included in the Postl report in recommendations made to the government.

I know the minister is a former Minister of Health and will be familiar with that, and perhaps he will be able to tell us what progress the government has made in the past four years, or three years, on those recommendations for services to children through schools and through the bringing together of community and school resources to serve the child.

Mr. McCrae: Well, I have no doubt that in response to the Postl report, which I, by the way, brought forward as Minister of Health, although Dr. Postl did all the work, you would need literally a catalogue to respond accurately to the honourable member's question. I propose that we put together that catalogue, whether it takes one sheet or 20 sheets to do that. I think there has been significant progress made for the children of Manitoba since the very good work done by Dr. Brian Postl, so I will undertake to bring that forward.

Even then I would have to offer a caution that my fear is that we might not have a complete list of all the services that are being provided to children, some of which existed prior to the Postl report, some of which have been changed since the Postl report, and some have been brought into being since the Postl report. We do, indeed, support intersectoral co-operation. It was the present administration, after all, that brought together the Child and Youth Secretariat. It was this present administration that brought us the Proactive report on special education for Manitoba children. We

commissioned that report. We co-operated in the work. We have recognized the tremendous opportunity Manitoba children have in Manitoba with the economy going the way it is and with the government laying out a climate for economic growth. We can see that there would be many, many opportunities. The tragedy would be if we did not respond to those students who risk not getting a fair piece of the economic action in the future because they did not get a good enough opportunity in school and in their early lives, because that is when it is clear that intervention and assistance can make such a difference.

There are many examples. We have put on to the record, references to many of the initiatives that we have undertaken. We know that in the special education report, once those recommendations are implemented, the catalogue of programming for young people in Manitoba will be significantly increased, so we have much work done and much work to do. I do not think that we would ever be finished because, as long as new issues come on the scene, new responses are going to be needed.

Special education teachers and special education planners and divisions tell me that in the '90s there has been a virtual flood of new circumstances coming into the school system, children with problems that we really have not been able to identify in the past, and now we are able to. Even those we could not identify in the past, I do not think we responded in a way that maximized the opportunities for these young Manitobans. We want to see school-linked services. We have those kinds of services now. We need to share databases and pay attention to issues related to confidentiality, but, I mean, I refer to programs like Baby Think It Over. We have got our child care in schools policy, which is much improved over any previous child care in schools policy in the past. We talked a while ago about the FAST Program, we have talked about the Family Navigation Project, initiatives related to fetal alcohol syndrome. The protocols we have talked about already. We have got pilot projects going on in schools.

We need to look at various models. Each model that we look at, if it is deemed to be a good approach, it is certainly something we can

implement, but it may not be implemented in exactly the same way in every circumstance because we simply do not believe that you can have a one-size-fits-all type of programming for our children, so within the available resources, we need to be resourceful.

If you want to know about resourceful people, you need only talk for five minutes with special education teachers and assistants to know that these are extremely resourceful people. They have some excellent advice to offer. We can hope that the advice they give us has broad application, but I think we have learned enough to know that no one idea will work the same way with all the children so we have to be flexible.

I know the Minister of Housing and Urban Affairs (Mr. Reimer) would agree with that statement because in his own constituency there are children with myriad issues that we need to address. There are in my constituency, too, and in the constituency of the honourable member for Wolseley (Ms. Friesen). So I think what we need to do at this point is to recognize that special education is probably, for the duration, going to be something that will require attention year in and year out.

* (1610)

Even if we arrived at the point where we could say that we have responded in full measure to every last recommendation in the Special Education Review, I would bet that in the very next school year, we would have challenges that the implementation of that report did not fully address. So we need to build into our system a recognition on the part of everybody that this kind of flexibility, resourcefulness and creativity is going to be the status quo from here on in. There is never going to be a day when the job is completed, as much as I would like to think that it will come and we will be able to announce that someday; that we have completed the implementation of every part of this report and then immediately thereafter new challenges will be upon us.

Manitoba Education supports better collaboration within government at the local level. Various communities have developed regional and intersectoral committees. Under

the direction of the Children and Youth Secretariat, professionals from other departments have been invited to training events that have shared relevance such as the multisystem training program called Sharing the Caring. Many protocols have been developed with intersectoral collaboration such as the EBD and the URIS protocols. I hope that gives the honourable member a flavour of the direction this government wants to take us.

You know for, oh, what, seven, eight years now, at least five years, it seems to me maybe even more than that, my deputy and I cannot agree on that one, but I wonder who is going to win that argument. Well, whether it is five years or seven years or whatever, for a number of years, we have been working in a more corporate way so that each of the human services departments of government are required to work together in the development of the annual budget.

This approach, while it was difficult at first to get everybody used to talking about what one department was hoping to get out of a budget in the presence of a bunch of other departments, while that initially was quite an exercise, quite a new way of thinking, quite a different way of thinking, and there may even have been a little resistance, even on the part of some ministers, especially if you are from a department that might have to give up a little bit in favour of some other department. In the end, I believe incrementally each year, we ended up with a slightly better result than the year before, which tells me that was the right thing to do.

Flowing from that approach, it was felt that the Children and Youth Secretariat would have to be the vehicle that we could use to help bring departments together and to help bring out the best and the brightest in those departments to apply their minds to issues related to families and related to children in our province.

The establishment of the Children and Youth Secretariat, to me, having been one of the ministers involved in that, was a clear recognition on the part of the government, a clear indication too that no longer would we go about in our totally delirious assumption that everything was okay in our department and so every-

thing was, therefore, okay. It was simply a way we once did business in this country and in this province, and it was time for that kind of change in thinking, a paradigm shift, if you like. It was important.

Even today, I bet you there are people in the various departments who will have recollections of difficult decisions being made, but at the end of it all, I think there is an acknowledgement that our children deserve us to put our heads together rather than work separately. So I think that the quality of what goes on in our schools, the quality of programming delivered by the Department of Family Services or Health or Justice or the Seniors Directorate or any of those, the quality has been enhanced by the fact that we are working together. Those best and brightest that I mentioned are working together rather than separately. I think we have some programs that I have referred to.

If I have not covered everything, and I do not think I have, we should maybe make a note and talk about it a little more next time we get together so that I can give the honourable member perhaps a more responsive, a more detailed response, it might take a little longer, but I hope not, but a detailed response to the questions that she raises. I think I will stop there. I will undertake to bring forward perhaps a more, it may be more complete, maybe not, but at least we will check over all of the different program initiatives that have come forward and maybe bring them to the attention of the honourable member the next day.

Ms. Friesen: My question asked for a progress report from the government on the Postl report, which was introduced four years ago, and which the special needs review seemed to think needed reiterating. I understood the minister to say that he would be tabling something next time which would give the progress report that I suggested, particularly dealing with the cross-sectoral authorities and the single-site service and the single window for accessing services for children.

There are two recommendations I believe that apply to the Children and Youth Secretariat. One is that the URIS manual be completed and distributed. I wonder if the minister could give

me a progress report on that and how much of that is in fact his own department's responsibility and where the responsibility for that lies. The other is the department's participation in the special needs review recommendation that the mandate of the Children and Youth Secretariat be clearly articulated and more widely publicized. It certainly seems to be reflected in the body of the report, a requirement that that happen. I am interested to know who is going to take the lead on that and what mechanisms they will use for doing it as well as some information and responsibility for the completion of the URIS report.

*(1620)

Mr. McCrae: The Special Education Review recommends that the URIS manual be completed and distributed. The lead for the development of the URIS manual was the Children and Youth Secretariat, and there is a committee for this. It is chaired by the Department of Family Services. The Department of Education and Training has a representative on that committee. I recognize that anything related to the Children and Youth Secretariat should indeed be publicized. I just hope that if we did that and spent any money doing it that we would not be subject to the same kind of criticism that has been forthcoming from the official opposition with respect to the \$500,000 expenditure in health to keep Manitobans up to date on the improvements that have been happening in the health care system.

It seems like if you do something like that, as the song used to go, you are danged if you do and darned if you don't, sort of thing.

An Honourable Member: Sing it for us.

Mr. McCrae: I cannot remember the tune or else I would perhaps. No, you do not need that today, the point being that I would like all Manitobans to know of the existence of the Children and Youth Secretariat. The honourable member is recommending that there be publicity about it, so we will have to take that one under advisement, because I do not know how much money is in the budget for publicity on this particular topic, if any. If not, where would we take the money from to do that? Those questions I am not able to answer today.

However, the mandate of the directorate is an important thing to be understood. Actually, this URIS policy committee is going to involve more than Family Services and Education because the Health department is involved as well, and working groups will be developed to establish specific policy issues.

There are draft terms of reference for the two committees of URIS which have been developed by representatives of the three-partner departments. They will be forwarded for review and approval to the lead department. They are drafts just in case the honourable member is thinking of asking about that or asking for them. I do not know if I want to do that at this point; being draft, it may be a little early. But certainly as it becomes appropriate for us to share information with the honourable member, we are quite anxious to share as much information with her and her colleagues as is appropriate in all the circumstances. I expect that the final document will be something that will be in the honourable member's hands when that becomes available.

Mr. Peter Dyck, Acting Chairperson, in the Chair

Ms. Friesen: I think we need to be precise in noting the questions that are asked. I asked the minister how he was going to fulfill the recommendations of the special needs review on the Children and Youth Secretariat. I would not presume to make any recommendations to the minister on how he did that. I was merely asking for a report on how he was going to do that.

Perhaps the minister could tell us in what way the current advertising in health does address this particular recommendation. Is there anything about the Children and Youth Secretariat in the recent health advertising that the government has undertaken?

Mr. McCrae: Mr. Chairman, I certainly appreciate the advice of the honourable member about precision, and I know I certainly try very hard to do that. I guess we should follow our own advice from time to time too in terms of what is being asked for. With respect to the Special Education Review, I come back to recommendation (e)(1)(i) which says that the

role and mandate of the Manitoba Children and Youth Secretariat be clearly articulated and more widely publicized.

I do not know at what level it is justifiable or not justifiable at this point, what levels of expenditure would be appropriate in letting Manitobans know what their government is doing in the area of services for children and youth. I guess you could argue either side of that matter. You could suggest that large amounts of money should be expended so that children who are not accessing and families who are not accessing services that benefit children, simply because they do not know of their existence, would certainly benefit if they, through the publicity about the Child and Youth Secretariat and their programs, became aware of those programs. Then there would be a benefit.

I am sure it is open for debate and discussion as to how this should happen. How do you get to families, some of whom are scattered and even transient? How do you get to them when maybe they live in circumstances such that if you were to place something on television, maybe they do not own a television set, maybe they do not read the newspapers, if through things like BabyFirst you are able to get to young families to make them aware of the existence of the Child and Youth Secretariat, what is the best mechanism to do that? This is something that has bothered me for a long time. It seems to me that in Health, for example, the people who need health services the most or preventative services, preventative health issues, wellness issues, the ones that need it the most are the ones that access it the least, the ones who know about it the least.

Even the Manitoba Centre for Health Policy and Evaluation makes it very clear. I remember Frank Maynard was at one time deputy minister of Health and they ran an article on him down east, with his picture in it, that suggested that if you are rich, then you are healthier. It is not a suggestion; it is a fact. As a matter of public profile, the more well-heeled the neighbourhood, the longer the life expectancy of the people who live in that community. The more likely that the members of that community have of a higher education, the less likely it is that the members of that community are finding themselves at the

pleasure of Her Majesty in our penal institutions. There is less likelihood that people who are in high income brackets will be in trouble over drug abuse or suicide or alcoholism; all of those indicators, all of those not-so-positive indicators are less prevalent at higher income level-type communities.

* (1630)

Therefore, these are also people that are most literate, the most informed about what is going on. As you go down the income scale, the results come out quite differently but in quite direct proportion to the income level, all the way to the lowest socioeconomic levels of our society where you have the highest incidence of alcoholism, suicide, substance abuse, families in difficulty, people running into difficulties with the law, all of those things.

Now, that group is the least likely to be aware of what all the government programs are, what all the programs are in the school division, for various reasons. It is not their fault. In some cases some people are struggling to keep the food on the table, keep the family fed. Both parents are working. Sometimes there are not two parents involved; one of them is gone or not available for whatever reason, leaving the single parent with extremely heavy responsibilities. They are so busy, they are just not able to make themselves aware. Or maybe they just do not know how to make themselves aware of all of the government programs that exist. They may feel a lack of empowerment which leaves them in such a condition that they are not likely to even ask anybody what services might be available for themselves or for their children.

So I can recognize the need for publicizing as widely as possible information about programming, but I have also got enough experience to know that targeting is not a bad idea—targeting resources to areas of known need. I realize that you have to have a public health system that is as equitable and equal in all of the five principles of medicare as possible so that you have a statewide, state-run system that is equally available to everybody to the extent you can do that, given geography, that sort of thing. On the other hand, when you are coming out with Family Services programs or Education

programs to meet specific needs, I am in favour of targeting resources to areas that need it. We hear people talk about children living in poverty circumstances in our province. What are we doing about that? You do not address that by establishing programs that are accessed by everybody, because programs are accessed by a lot of people anyway. You do not need overall the programming that is available to everybody. You need programming that is targeted to where the need is.

I am in favour of that as a general principle. I remember visiting the Health Sciences Centre one time, the Children's Hospital, and being told that a number of the children coming to that hospital are from remote communities where diet is definitely an issue, and we had young children having all their teeth removed. This is a pretty sad story. Why is that? Not because they are born unhealthy. These children are not given—sometimes they are born underweight, that is a fact. Sometimes from the moment of conception there is a problem with nourishment. In any event, at tender ages, otherwise normal children should not have to be coming to hospital to have all their teeth removed because they are rotten from inappropriate diet or improper diet or not enough diet, not enough nutrition.

That was enough to shock me into understanding that there are issues in our Manitoba population that we need to be addressing, not only as parents but all the way to the level of the government of Manitoba. At that time, Brian Postl was already hard at work on his report, and I thought at the time, I remember thinking, well, it is a good thing Brian Postl is hard at work on his report because these children and others are not getting a fair chance.

Somebody is, either by omission or commission, robbing these children of the chance to have a good life. We have tremendous opportunities here and it is really upsetting to me that there is an inequality of access to those opportunities because of things being done or not being done that are beyond the power of these young children. It is heartbreaking.

So, this is all said to underline my agreement that the work of the Child and Youth Secretariat should be clearly articulated and

widely publicized, but how? How is the best way for us to do that? I know that I do not fail to do things simply because of criticism. If that was the case, maybe I would not do anything as a minister or as a member of the government because somebody is going to criticize. That is the wrong reason to stop doing what you are doing. Some people criticize for all the wrong reasons. They do not put the needs of the children ahead of whatever other agenda they are working on.

It might be interesting to the honourable member to know that we have a very strong committee, the overall committee which is providing the interdepartmental response to the Special Education Review. We were very pleased that Carolyn Loepky is taking on the responsibility of heading up this committee. As the report on special education came to the Minister of Education, clearly it is appropriate that education take the lead here. Carolyn Loepky is doing that. We also have Eleanor Chornoboy from the Family Services department. Eleanor is the director of Children's Special Services. We also have Doris Mae Oulton, who is the chief executive officer of the Children and Youth Secretariat. We have Marj Watts from the Department of Health. She is the director of interdepartmental and intradepartmental affairs. Adrien DeRuyck is the deputy superintendent for the Manitoba Youth Centre for Department of Justice. Adrien is on that committee as well. A provincial specialist with the Department of Education & Training, Candace Plouffe is also on the Special Education Review interdepartmental response subcommittee.

Now, this committee will be spearheading or leading the whole government and the whole system. I mean, this is the Special Education Review interdepartmental response committee. These are the government people. The people in this committee, Ms. Loepky in particular, are going to have to find the best ways—and I know she has got all these subcommittees already either set up or in the setting up stage—to bring in the various special education administrators and get their input and some of their staff too right to the level of the teaching assistant. That was the process used in getting the report written. That is going to have to be the process used in getting the report implemented too.

It certainly is not simply for the sake of trying to be inclusive. It just seems that being inclusive is always a good way to do things. The top-down approach that is recommended from time to time, I look at it very carefully, but I just do not think, even as much as I believe the people on this committee are well chosen and knowledgeable experts in the field of education and special requirements, I just never really think that all of the best ideas reside in one place. I think people on the committee would likely want to agree on that point. It simply has been tried and has not worked well enough, because there are too many falling through the cracks. You can take that approach and you are going to have good programs, but there are people who are going to be missed.

* (1640)

That is why, for example, you have to have a whole lot of people in a government caucus because, as I have learned in my years in this business, there is always a time when every opinion in the room might be very useful in developing a strong consensus on important issues.

So, I hope that has been precise enough for the honourable member. If not, no doubt she will tell me.

Ms. Friesen: I wanted to ask the minister about some general issues in this section of the department. I was a bit puzzled at the beginning where it says: The statutory responsibilities of the Minister of Education and Training. I notice that the Mennonite university act and Brandon University are not included. Sorry, Brandon is, but the Mennonite university I do not think is. Now, is there a reason for that? Has it not been proclaimed? I thought it had. Page 7 of my book.

Mr. McCrae: The honourable member asks a good question here, and we will get an answer in about five minutes for her. If she would like to go on to another one, she will get an answer.

Ms. Friesen: This section of the department represents the minister in national-international education matters. So I am assuming that this section of the department is also the area that has

represented the minister on two recent agreements, the Labour Force Agreement with the federal government and the Millennium Scholarships. I wondered if the minister would table the two agreements that have been made with the federal government. Perhaps he could tell me if there are other agreements with the federal government that had been made in the past year that he is prepared to table.

Mr. McCrae: We will take that question under advisement. If the honourable member wants to, Mr. Eliasson, the deputy minister for that part of the department, is just down the hall. I think he is just down the hall, so we will try to get him in here to assist us in dealing with those questions.

Speaking of the Millennium Scholarship agreement, I was very, very happy to be part of that. That is one of the reasons why we like to be in public life, I guess, sometimes. This is a federal initiative which is much appreciated. All the critical things that I can say about the federal government seem to disappear when they wave \$10.8 million a year for 10 years in front of your nose, and offer it to your students when you know students are struggling to get through post-secondary education. Even though this year the federal government's budget focus was on health, which is a welcomed thing, to have them back to the table, I mean, we sure need a lot more of their dollars on the table, because they are putting back only a fraction of what they have taken out, causing us no end of grief, not only in the health area but in post-secondary education as well.

Even if we do not want to forgive federal governments for that, we can at least celebrate that there will be thousands of Manitoba students benefiting from the Millennium Scholarship Foundation, and its activities and its money. It is extremely significant. I was happy to join Mr. Norm Riddell [phonetic], executive director of the Millennium Foundation, in announcing the program because with that scholarship it puts us over the top any way you want to look at it.

In college education, we are already the most accessible for ordinary, average Manitobans. Our tuition levels are at the lowest level in the country. In our universities, our tuition levels are either third or fourth overall.

Certainly it is third if you take into account the tax credit that is uniquely offered here in Manitoba to Manitoba post-secondary students. So I have mixed feelings obviously about things like this, because it is not nice for Manitobans to have \$263 million removed from our ability to finance needed services in the health and post-secondary education sectors. It is not nice to take all those millions away from Manitobans, and then, of course, we are left at the mercy—we have had to make that up and we have done so, which has not been an easy thing to do, to backfill all the dollars taken out of our system by the federal government. That has not been easy.

But now to see the federal government returning in some small measure to the table is encouraging. I hope it is a trend that will continue. I do not say it to be overly critical because I believe the federal government has had its challenges. It has decided to change its ways and stop living on borrowed money and their grandchildren's future. The federal government has agreed to stop doing that, which is something I support. So I do not want to be misunderstood here, because I know that the federal government has significant challenge. Yet they have a responsibility for health and post-secondary education under the Canada Health and Social Transfer, so I am not going to complain too loudly when they begin to return money to the Health coffers, but what about Education?

That is the next question. Every time there is a dollar on the table, there is always a question of, well, where is the next dollar going to come from and where it is going to be directed? I am very interested, and I have made this known to my federal colleagues. I think the Premier is going to be doing the same thing, probably rather more effectively than I am able to do, make it clear that post-secondary education is one of the keys to the future of a prosperous and successful and happy Manitoba.

So I am dropping that hint at every opportunity, that maybe next budget we can get some continued support for Health, but some returned support for post-secondary education so that we can address more effectively, even more effectively, I should say, because I think colleges and universities are addressing as effectively as

can be reasonably expected, given all the exigencies of modern-day life here in Canada. I do believe we would like to have more federal participation. Having said all that, I appreciate from the bottom of my heart the extension of this scholarship program for at least 10 years, making it \$108 million that Manitoba students are going to be able to access through scholarships and bursaries, either on the general side, which is based on need, or on the merit side, which is based on having earned scholarships.

* (1650)

Mr. Chairperson in the Chair

Now, I see my deputy minister for this part of the Health department, Mr. Hugh Eliasson, is joining us.

Floor Comment: . . . Education.

Mr. McCrae: What did I say?

Floor Comment: Health.

Mr. McCrae: Health? Did I say Health? That was because we were talking about Health a minute ago, a couple of minutes, 15 minutes ago.

We will, of course, be making available to the honourable member the agreement with the federal government regarding the labour matters as well as the one respecting the Millennium Scholarship foundation agreement. With respect to the Mennonite university not showing up in the Supplementary Estimates, that was not intended that way. That is an oversight. That document was put together fairly quickly, near the end, at least, near the end, I say, in order to get it—

Ms. Friesen: In order to give me two hours notice, I know. I appreciate it.

Mr. McCrae: Well, that does not sound like appreciation. You see, it was only moments before that we made that available that the House leaders worked out the list. As the honourable member knows, and I know this because I was a House leader, once between the years 1988 and 1990 and the second time in the

years '97 and '98, I know that the government House leader keeps prodding the opposition House leader, when will you give me the first, when will you give me—if you look in the rules, you will see that the way it is done is that the House leaders get together to devise this list for the examination of the Estimates. The government House leader cannot do a darn thing until the opposition House leader gets the ball rolling.

Well, my experience, and this is not any criticism of anybody, least of all the opposition House leader, with whom I enjoy an excellent working relationship, that first move has to get made by the opposition. So to speak critically or to say that two hours notice or to draw attention to that in the way the honourable member has gets me feeling defensive, because the fact is, I got that supplementary information to the honourable member just as quickly as I could after learning of the order of Estimates review.

Ms. Friesen: I think election schedules had a little more to do with it than the minister would allow in his answer. Certainly I think he knew that if Estimates was to take place, then Education Estimates were to be part of it. I understand the minister to say that he will be tabling the two agreements that I asked for with the Millennium Foundation and with the federal government.

I wanted to ask the minister about the Council of Ministers of Education, now that he has both deputies here, but I believe the Council of Ministers has been addressing post-secondary education. I wonder if the minister could give us a summary of the agendas and the kinds of discussion that have taken place as they affect Manitoba.

Mr. McCrae: With respect to the Council of Ministers of Education, Canada, of which I am a member, I will be sharing with the honourable member information about the projects that are presently underway with the council and the members and officials. Now, the honourable member knows, I think, how that system works. There must be hundreds of people involved in all of the activities related to the work of the council, but I would be happy tomorrow to bring forward for the honourable member a status

report on what is before it, what it has been doing lately, what it is hoping to do in the near future, and that type of information.

Ms. Friesen: I wanted to ask about the national testing programs that have taken place in Manitoba, if the minister could give me a summary of what has taken place in the past year. I know that he has released some of the results, but I do not necessarily think that they have been tabled documents and hence sort of part of the continuous public record. So I wondered if those results could be tabled.

Mr. McCrae: Yes, we will include that type of information when we discuss this with the honourable member tomorrow.

Ms. Friesen: Thank you, Mr. Chairman.

The minister has made an agreement with Morris-MacDonald School Division for training Biana Keewin [phonetic], and the press release that the minister had suggested that changes would be required in regulation. I wonder if the minister could just give us the details of that.

Mr. McCrae: I am going to ask the honourable member if she can recall what I have said about regulation because we are not interested in regulations that are not needed. I might at some point—I could see myself, or hear myself, saying something to the effect: I wonder if any regulatory change is required to help facilitate this unique sort of thing. If that is what it was—

An Honourable Member: Mental meandering.

Mr. McCrae: Okay, mental meandering, as my penultimate predecessor or double penultimate, or whatever it is, predecessor suggests. I do not know at this point, and I certainly will bring myself up to date. I do not know of any regulations coming forward, this, I believe, to be a somewhat unique arrangement that exists. Because of that, it occurred to me at some point that, oh, I wonder if any regulations might be required. If there are, I will certainly share that with the honourable member, but I do not know of any right off the top of my head.

Ms. Friesen: Off the top of my head, Mr. Chairman, I cannot remember the exact wording,

but it was, I think, in the last paragraph of the press release indicating that this would not take place immediately as, i.e., the next day, but that there would be certain changes that would be needed, and I wondered what kinds of changes. Is it regulation? Is it changes to The Public Schools Act? What level of changes did the minister, or whoever wrote the press release, think was required in this?

I know that there have been other occasions where training has been subcontracted, and the department may have dealt with it in different ways at different times. So I am wondering if the department is setting out a general policy here of the subcontracting of training from public school divisions. That is my general issue.

Mr. Chairperson: The honourable minister has 40 seconds to respond.

Mr. McCrae: Very quickly, in my 40 seconds, I do not know of any regulatory changes that are required with respect to this specific private-public arrangement. However, the landscape is changing so fast because of the opportunities presented to us by technological change that one simply does not know today—I do not know today what accommodations might have to be made for useful education opportunities in the future. That is all I can say at this moment.

With respect to this specific one, I do not know of any regulation change needed at this point.

Mr. Chairperson: Order, please. The hour now being 5 p.m., committee rise.

INDUSTRY, TRADE AND TOURISM

The Acting Chairperson (Peter Dyck): Good afternoon. Will the Committee of Supply please come to order. This afternoon this section of the Committee of Supply meeting in Room 255 will resume consideration of the Estimates of the Department of Industry, Trade and Tourism.

When the committee last sat, it had been considering item 2. Business Services (c) Manitoba Trade, the first part (1) Salaries and

Employee Benefits, on page 103 of the Estimates book. Shall the item pass?

Mr. Tim Sale (Crescentwood): Mr. Chairperson, I want to spend some time, as the minister probably expects, on exploring the reasons for the changes in our patterns of trade with the world, with the NAFTA countries and with the United States specifically. I raised this in my opening remarks, and I am sure the minister has had some chance to review the data from Manitoba Bureau of Statistics.

I would like to start by asking whether the minister could shed some light on what has happened to the structure of our exports to the rest of the world, which have plateaued. In real dollar terms, they are up only slightly from 1990. In nominal dollars, they are up about \$500 million, a little under \$500 million, \$470 million or so. In real dollars, of course, it would be quite a bit less than that. In effect, the peak year was 1997, but 1998 was below 1996 as well. In statistical terms, it is probably true that from 1995 onwards essentially it is really a flat picture. I am sure that if we did the standard deviations on it that those four years would all be within one standard deviation probably, although I have not done it, but it looks like it probably would be.

So could the minister explain? I do not mind if he needs to take a long time to do this, but if he could explain why our trade pattern with the rest of the world has lagged so far behind trade with the United States, essentially allowing us to slip into a record trade deficit this year.

Hon. Mervin Tweed (Minister of Industry, Trade and Tourism): I am advised that some of the reasons for the numbers that the member is referring to is the fact that, because we are a large exporter of raw agricultural products, the reduced commodity prices that we have seen worldwide have certainly impacted the numbers that he might be referring to. We have seen a downturn in the Asian market which has affected us somewhat in some degree, but the increase in the U.S. market, there has been a strong U.S. market. It has been encouraged by the NAFTA agreement that we have in place. Obviously, because of the closeness in proximity to our

countries, it becomes a natural that we would be trading with the U.S. With the NAFTA agreement it has heated up that position. It is also for companies in Manitoba particularly that are just getting into the export industry, the U.S. is a perfect market for them to start with. It is again accepting of our products. It recognizes the quality of the products that we are producing. Because of the closeness it is certainly a first option for new exporters in particular.

I would like to point out that Manitoba has seen an increase in our value-added exports. We have certainly found that there are more firms in Manitoba active in the foreign markets in that particular area. The nonagricultural exports to non-U.S. markets have actually risen by 131.6 percent since 1994. I think that is a strong indication of the fact that Manitoba is diversifying, is moving into the value-added portion of agriculture. Our manufactured exports to non-U.S. countries have also increased since 1994 by 135.8 percent. When we are doing the numbers, and we looked at particularly the commodity prices in Canada that are down, certainly provinces and provincial governments are being asked to accept some of the responsibilities with the federal Farm Aid Program, the AIDA program that we have.

We do note that Manitoba, because of its positioning and because of its willingness and desire to get into more value-added, get into the ag value-added goods, has actually done quite well in this industry or in this market compared to say our neighbours in Saskatchewan, who have stayed more in the commodity, the producing of raw commodities and the export of those goods. When the economy does take a downturn, Manitoba has actually fared quite well in that area just simply because of its ability and willingness to diversify.

* (1530)

Mr. Sale: In the agricultural exports, are the value-added exports included in agricultural exports or are they in nonagriculture?

Mr. Tweed: I am advised that they would be under the nonagricultural.

Mr. Sale: When I looked through the various areas where we have sent trade missions at some

significant expense to Manitoba, I am sure this minister has not had a chance to go on any trade missions, but I am certain he will avail himself of the opportunity if there is time for him to do so. We do not seem to have produced, as far as I can see, any significant improvement in those areas that we have gone to have major trade missions with.

It seems that the minister's explanation is that the cyclical nature of commodity prices is really the determining factor because most of what we export to those non-United States markets is either agricultural products or value-added agricultural products and not a whole lot else. That would seem to be borne out by the statistics on the nine years trade trends report which shows that our agricultural product export has grown significantly in each of the markets, but our nonagricultural exports have not grown very much at all except in the case of the Pacific Rim where, I assume, that the growth is largely due to products of an agricultural nature but which have had value-added and therefore are showing up not in the agricultural but in the nonagricultural.

So really, it looks like most of what we export to the non-NAFTA countries is either value-added agricultural exports or agricultural exports. So commodity prices are really the determining factor more than anything else. Would the minister agree that that is the primary force at work and not whether we have been there as traders, as trade missions?

Mr. Tweed: I would suggest to the member that probably as long as I can remember, and not knowing his age probably as long as he can remember, commodity prices have had a tradition of being cyclical. We have certainly seen economies of many of the countries in the world that were producers of the raw product. The grains of the world rise and fall with the economy around it and the prices of the commodities that we are producing.

What I would like to say is that I think everyone recognizes that we are in a world and in a time of transition. We are seeing not only what we produce as the raw product but the encouragement, particularly of this government, to get into the value-added. I think it has

probably served us well and, into the future, it will continue to enhance our opportunities.

I do know that we are seeing more exporters from Manitoba now getting into the market, I guess particularly in the value-added industries. As far as the trades and the trade missions that we do, yes, certainly they are not inexpensive to do, but we have to be able to go out and identify the markets for our exporters. This increases the amount of exporters that are willing to look at these markets, and if we can provide them with the knowledge and the expertise, then we can perhaps assist them in developing their businesses and their exports to a greater value. In doing so, it helps us and also lessens the reliance of the province on the raw commodity itself.

I am a firm believer that, like everything—having been in sales most of my life—sometimes the dollar I spend today is an investment for the future. It is not something that we can always judge or see a rate of return the very next day. It is the residual returns that come year after year as the companies that we are encouraging to do more exporting become more confident, become more capable. Probably as they grow as companies and mature as businesspeople in the export world, they will have less and less input from us as a province, because they will have been able to identify and recognize their markets. At the same time they will be helping us because they will be continuing to grow.

It is, again, just something that I think is very positive. Certainly the province has put an emphasis on it, in the value-added export side of it and nonagricultural exports. I think we recognize that those are opportunities that we should be developing and taking advantage of. Because of that emphasis on value-added exports and nonagricultural exports, again to non-US markets, we have seen that increase in the years '94 to '98 by 131.2 percent. So, it would suggest to me that we are moving in the right direction. We are progressing. If you were to say are we satisfied, I would like to think that my department would never be satisfied with what we are doing, hoping we could do better and present better opportunities and more opportunities.

I find it quite interesting coming from an agricultural background and community that the people who I see out there that are second-, third-generation farmers who, again, 15 years ago if you would have asked them what could government do, what would be the one thing government could do to solve the financial problems that you are in today, they would have said just raise the value of the commodity that we are selling, and we will be okay.

I think today if you asked that same group—and actually, it is not the same group. There are some that are still there, but it is more apt to be sons and daughters of these people who would suggest show me an opportunity where I can add some value and opportunity to what I am growing. I want to create a few more jobs in my community. I want to not be reliant on a world market for a commodity that I am producing and how I can add value, but also help me first establish and develop an export market.

* (1540)

Usually when they come to us, their first market that they see as their best opportunity right now is the U.S. market. We would, I think, be negligent if we did not suggest to them that we can help them in the U.S. market. Certainly, the opportunities are presenting themselves daily. What we are seeing is that these young entrepreneurs, these young exporters and not-so-young exporters are saying: Once we get our toehold in the industry and once we understand a little more of how we are doing and what we are doing, the world is our market. I think we are going to see that develop more and more in the very short future.

Mr. Sale: Mr. Chairperson, what is the fastest-growing export that we have had in the last decade?

Mr. Tweed: I am advised that the fastest market right now, fastest-growing market is in bus manufacturing.

Mr. Sale: Mr. Chairperson, where would I find that in the trade report, under what heading? Would it be under the heading of vehicles, et cetera?

Mr. Tweed: I am advised it will be under motor vehicle parts and accessories. Oh, excuse me. I am sorry, Mr. Chairman, it is the Manitoba Bureau of Statistics, 1997 Foreign Trade. It actually shows a chart on page 14. It would show motor vehicles on the bottom line as being, in dollars, the largest increase.

Mr. Sale: I wonder if I could see that chart just for a moment. It is a public report; it is really okay. I think the minister misunderstood my question. That is why I wanted to see the chart. I was asking what was the fastest growing export over the past decade or so in Manitoba's exports. I think what he was showing me was the amount that that was in a particular year.

Mr. Tweed: I am wondering if I might ask the member to allow us a day to get him the 10-year average and I can bring it back to committee.

Mr. Sale: I think we can probably save the minister and staff the time. I think if they look they will find that it is electrical energy which has gone up by a multiple of about 12 in the period 1989 to 1997, entirely due to the Limestone exports to the Northern States Power pool. I wonder if the minister could suggest to his Premier that, instead of slugging, a decision which has resulted in the most rapid significant growth other than some very small things which do not amount to a hill of beans, the electrical energy exports to the United States have grown from \$24.5 million in 1989 to \$309.8 million in 1997, and I believe they were higher again last year. I think they went up to the \$350-million region. It comes under the heading of mineral products for some strange reason, but it is electrical energy.

So, just a little observation that, perhaps the minister might suggest to his Premier that slugging a decision that resulted in the most rapidly growing area of our exports and the complete payment for a dam in American dollars that was brought in a billion dollars under budget, on time, and is now being paid for by our most rapidly growing exports perhaps would be just a good high-road suggestion he might make to his Premier, instead of always taking the low road that he has the instinct to take.

Mr. Tweed: I know that the honourable member for Crescentwood always likes to take

the high road, and, as previously stated, if he would be as considerate, I would certainly like to analyze this document and bring back the numbers tomorrow. It is for me probably the second time I have had an opportunity to look at it, and I would be happy to make a comment on it tomorrow.

Mr. Sale: I think that would be fine. I had hoped that he would extend this report to 1998. I do not have one for 1998, but the number is available in the 1998 year ended trade report which came out about, I do not know, three, maybe four, five weeks ago. So sure, that would be helpful.

What I would like to ask the Premier—or the Premier, not quite yet—would like to ask the minister to comment on what looks very much to me like a structural trade deficit with the United States that is growing, not shrinking. It does go up and down but the trend, when you plot it on a trend line, is clearly up. So the trade deficit with the United States is shrinking.

The trade surplus with the rest of the world, which used to come closer to offsetting the deficit and allowed us in '90, '91, '92, for example, which were recession years, to have deficits of only \$250 million, \$37 million and \$19 million respectively, it is now at the point where our total deficit last year was over a billion dollars for the first time in Manitoba's history. It looks to me like this is not simply a cyclical phenomenon but increasingly a structural phenomenon which presumably is why the Premier (Mr. Filmon), in 1995, in his election literature, promised to reduce the export dependency on the United States market and to broaden our exports so that we were not trade dependant to the extent that we are with the United States. We are not less trade-dependant than we were when this government took office. In 1990, 60 percent of our exports went to the United States. In 1998, 78 percent of our exports went to the United States.

* (1550)

So it is very clear that we are in a continental trade pattern which makes our economy and the livelihood of Manitobans increasingly dependant on the willingness of the

United States to buy from us, and on the level of the Canadian dollar obviously because the Canadian dollar's value vis-a-vis American dollars is a critical issue in exports. The Alliance of Manufacturers & Exporters has said that if we get much over 73 cents, 74 cents, which many economists think we should be at already in terms of purchasing parity value, we would lose our export advantage, and we would then be vulnerable to a very sharp deterioration in the Manitoba economy because we are so trade dependent with that one enormous economy to the south of us.

Would the minister comment? I would be happy to have a document tabled discussing this issue because I think it is probably the most serious and most underdiscussed issue in Manitoba's economic discussion that we are now, for all intents and purposes, a client state of the United States. We are more trade dependant than most American states are on the United States economy. So we are going in the wrong direction in terms of broadening our relationship with the rest of the world. We continue to import the same percentage of goods from the United States that we did at the beginning of the period. It is 85 percent now, and it was 85 percent in 1990. But, as I said, our exports have grown by some 30 percent in the nine years that I have been looking at, from 1990 forward. That, I think, has to be a worrying statistic to the minister and to his staff. I would appreciate his views on that.

Mr. Tweed: I would probably, like everyone else, say that Canada and Manitoba have a challenge in diversifying our markets. I do not believe in 1995 that I ever heard the Premier make a commitment to reduce our business export dealings with the United States, but I would suggest he probably made a commitment to expand other markets so that we could continue to grow the export industry that is out there.

I think that our job is really to help Manitoba businesses to continue the successful export to the U.S. market but also, at the same time, help them develop new and better ways of expanding that boundary. We have certainly seen, in the last couple of years, the significant slow down, I would suggest, of the Asia Pacific

countries and some South American economies. I think, for that reason, it is not surprising that we would find Manitobans chasing after or trying to increase their penetration of the U.S. market. It is certainly that when you have a slow down in world markets, our exports have continued to grow. I think that is a positive sign. I guess, again, it depends on whether you are looking at things from whether the glass is half full or half empty. It is a perspective that people choose when they are making comparisons. It does satisfy everyone's arguments, depending on what side of the argument you would like to be on.

We find that Manitoba's companies, again, look to the United States for their first experience in the market simply because of the closeness. I would also like to suggest that when we look at the United States we do not look at it as such as one country. We try and look at the United States in five regional markets that we break down so that we can try and develop strategies and positions, so that when we see one region of the country, similar to Canada, we certainly know that the Maritimes market suffers from time to time because of the commodity pricing that they have. That will fluctuate upwards. Then we have western Canada battling the low commodity prices for their raw product. When we look at the United States, we look at it in the same way. We try and approach each of the regional markets. We try and identify and recognize their economic cycles so that we can move in and take advantage of the opportunities that are there but also prepare our exporters for a market slow down so that they can, again, refocus and take another look at another region of the U.S. market. It has been a strategy of Manitoba Trade. I think it has worked very well, and I think the numbers would certainly support that.

I guess I always think that when we are exporting the numbers that we are in the province of Manitoba, we always have to be aware of the market, and we always have to be aware of things that are out there that can affect or impact, but rather than talk about, not to deny its importance and that we should not be aware of it, but I think it is also important and appropriate that we talk about the fact that we have an extremely strong export performance,

again, depending on what side you want to look at it. I look at it as a positive thing. I think that the more we export our products, the more jobs we create in our province, the more wealth we create within our province, and by doing that, we create other opportunities. We create a better business network for our exporters who have gained that valuable experience through the American market.

I think that we also have to look at the significant increase in the ratio of Manitoba exports to the U.S. versus the U.S. imports into Manitoba. I think this ratio is a reflection. It is on the value of Manitoba products sold to the United States. For every dollar's worth of goods Manitoba brought in from the United States, in 1989 the export-import ratio was 72.7 cents, which means that Manitoba sold the U.S. an average of 72.7 cents for every dollar's worth of goods it bought from them. In 1995, the export-import ratio was 75.4 cents, and in 1998 the export-import ratio was 81 cents, or in essence Manitoba sold 81 cents for every dollar's worth of import.

So I think, again, the perspective that you are looking at, you can probably put the down side on it. I think from my point of view and my department's point of view and the government's, we are proud of our export numbers. We continue to search and find new markets. We are dealing with different countries on a regular basis trying to find out their strengths, and no doubt they are doing the same to us. When our export companies get comfortable with the idea of export and start to grow and want to grow, I am sure that the government and Manitoba trade will be there to assist them and help them develop those plans so that they can continue to grow.

Again, I cannot emphasize enough the fact that when these companies do that, which we are seeing in a lot of the companies in the province of Manitoba, they are creating wealth. They are creating jobs for my children, for my children's children and opportunities for them to stay at home and work in the province and create an economy that shows across not only western Canada, not only all of Canada but in North America that we are willing to adjust, we are willing to continue to change.

I quite often think of a task force that I served on very early in my tenure as an MLA when we were speaking to a young Japanese woman. She was explaining to me that in their language they did not have a word that described change. I said, well, okay, what terminology do you use? She said we use the word "opportunity." I said, you know, that to me summarizes really what has been happening in Manitoba for the last probably seven or eight years, probably even longer, but just the fact that Manitobans are no longer waiting for something to happen and then reacting to it. What they are doing is they are going out there and making the changes, creating the changes, creating the opportunities.

The export numbers that we see clearly indicate that they have been very successful at it, and I think as a government it is incumbent upon us to continue to encourage them to do so. We certainly encourage them to continue to expand those markets and not become reliant on an individual market, and I think that they are doing that. I think as time progresses, we will continue to see those successes, and it will be good for all of Manitoba.

* (1600)

Mr. Sale: Mr. Chairperson, first, no one has been critical of the level of exports. Thank goodness we have had the level of export growth that we have had because the import level has been faster in terms of the creating of the deficit. Now the import-export ratio, yes, it has been improving in most years, and at some point in the distant future I suppose one could project, using statistics, that there might come a day when it was balanced. But the Manitoba economy pays for the trade deficit every year, and that is the big number that I am concerned about.

While we are waiting for that import-export ratio to get better, we have got a real deficit in real dollars this year of \$1.4 billion. I will be getting for the minister Premier Filmon's promise in the 1995 election which obviously was not to reduce exports; it was to broaden the base of our exports so that we were not so export dependent on the United States. That is the issue. The issue is dependency on one economy

that is so big that essentially our entire Canadian trade with that economy is relatively trivial to the total American economy.

Mr. Chairperson in the Chair

Would the minister not agree that in fact the low Canadian dollar in lots of ways penalizes us because essentially our exports are worth less than our imports, and that this continued harping on how our Canadian dollar is helping exports is a very unbalanced way of understanding the problem that we have got? In fact, the Canadian dollar being low is importing into our economy a whole lot of inflation, particularly in the medical field, in the drug pharmaceutical field, any imported vehicles. When we look at our manufacturing exports in that same report I was referring to, if you look at the total value of manufacturing exports versus manufacturing imports, you will see that both have grown by almost exactly the same amount.

So while we are manufacturing more, and manufacturing more with smaller numbers of people, in fact we have tripled our manufactured goods exports, and we are now just back to the same number of employees we had in the manufacturing field in the late '80s, about 62,000-64,000 staff in that field, but we are making three times the value of goods that we were in 1989. The trouble is all the stuff we are importing to build those things with has also tripled in costs. So the low dollar is not the panacea that many people seem immediately to think it is. I am wondering if the minister could comment on that.

Mr. Tweed: Mr. Chairman, I would just like to put it on the record and just perhaps give some explanation, but when you look at the data from the 1998 Statistics Canada publication, it includes the estimates of service trade flows. We find that if we examine Manitoba's overall trade performance, and by overall I would suggest we are talking about covering both goods and services, I think it shows a very positive statement for the province of Manitoba in the sense that, in the years from 1987 to 1996, Manitoba has actually recorded an overall international trade surplus in all but two of those years. The comments by the honourable member, when we look at the numbers and we

add in on the international side, if we add in goods and services, the table would suggest that as current as 1996, which is the last year of the reporting, it would show Manitoba in an actual trade surplus of \$554 million.

I think that he had made some comments about the low dollar. I guess what I am seeing from this side of the table is the fact that with the increase in manufacturing opportunities and the increase in export opportunities, what we are doing in the province is actually adding jobs to the province. They are good jobs. They are well-paying jobs. They are creating more opportunity for communities to participate, to be a part of the export system. Again, I think that Manitoba is certainly a leader in many of the areas. We have a very strong economy right now. It is going to lead to increased imports. The other thing that I see that enhances that is when you have the exports that we have right at this particular time, we see a certain, well, actually a remarkable increase in private-sector investment in Manitoba. As I stated earlier, a good majority of that is in the manufacturing process.

Manitoba's private sector is coming off seven years of steady consistent growth, from '92 to '98, in new capital investment. Our growth in new private capital expenditures for those years totalled 73.4 percent, and when you compare that to Canada, it shows Manitoba, and I quite often think it was not that long ago that when we referred to Manitoba, we referred to Manitoba as perhaps a struggling, some would even say a have-not province, but when we compare our private capital expenditures, a growth rate of 73.4 percent compared to Canada at 39.3, it certainly gives us reason to be optimistic. It is the third best among all the provinces.

We have to be aware that when we continue to grow, our manufacturing industry, our segment of the industry, that a lot of the equipment that we are purchasing for these facilities is actually imported. The machinery—I think of the Isobord that we discussed yesterday, the actual plant that produces the board was imported and I understand somewhere in the \$45-million to \$60-million range, and it has to be imported because we need it and it is

included. When you look at imports of machinery and equipment in constant dollars, it increased by over 150 percent between '92 and '98, and it did account for approximately 18.2 percent of our total imports. To me, that is a positive sign. That is a positive sign for the future performance, because our manufacturing sector is rising to the challenge. It is meeting the demands out there. It is meeting the export demands, and hopefully will continue to do so.

Mr. Sale: So essentially, the minister seems to be saying that he is not overly concerned with the change in the pattern of exports and imports from the rest of the world, where our exports to the rest of the world, excluding the U.S.A., have grown by something in nominal dollars of maybe 35 percent, whereas our imports have approximately tripled. He is basically I think saying that he believes that our economy has changed to the point where the services side of that makes up for that difference, and we really do not need to be overly concerned about the \$1-billion deficit in manufactured and raw materials, because that is being overtaken by a surplus in services. Is that essentially the position that he is taking?

Mr. Tweed: I would never want it to be said that this minister or this government did not always want to be aware of what is going on in the world and preparing and continuing to prepare its populations for that change. I think what we have to recognize is that it is a period of great change right now. Things are happening at a faster rate than probably ever before in our history. I recognize, and I think the honourable member would recognize, that we cannot, as a province, change the world economy. But what we have to do is ensure that the companies in our province and the government are adequately prepared to take advantage of the opportunities as they present themselves.

* (1610)

It is surprising to me, and I think the numbers will support it, that the growth in the service side of the world market is just expanding, probably far quicker than we had estimated. What we are doing is trying to create that balance where we have goods and services. With the service industry being as strong as it

has, it has certainly put us in a very positive position. As I say, according to the table, when you combine the two, goods and services, it does show us in a very positive position in 1996. As I stated earlier, it shows us actually with two small deficits in two of the years from 1987 to 1996.

I think that what we have been doing as a province has been assisting these Manitoba companies to prepare, to be ready for the export markets, but also to be prepared for the changing markets. It is not just the hard goods that people are buying or exporting around the world. It is services. I think, with our help, and with the leadership shown by the business people in the communities of Manitoba, that they are very well positioned to take advantage of whichever of the markets are stronger at a given time.

Mr. Sale: Mr. Chairperson, I wonder if the minister would be willing to table that information. I believe it is from a Stats Can report. I do not remember seeing it recently, but I am sure it is useful information. I would be interested in looking at it.

Mr. Tweed: Mr. Chairman, if I may, I just have some notes scribbled on mine, but I will get him a clean sheet and provide it before the—pardon me. We have one here, and I will table it now. How is that for service?

Mr. Chairperson: That is excellent. We will get copies of that sheet that you have supplied.

Mr. Sale: Mr. Chairperson, the minister talked earlier about the 1995 campaign commitment that was made by the Premier (Mr. Filmon). I would just like to read it into the record so that he knows what the commitment was. It comes on page 14 under the heading of Export Diversification. It talks about Manitoba exports—

Mr. Chairperson: Order, please.

Mr. Tweed: If I may just, I might ask the member to table the document.

Mr. Sale: I am not going to table this document. It is yours.

Mr. Tweed: Okay. Well, I just thought it would be relevant to the discussion.

Mr. Sale: I would be glad to give you a copy of this page. In fact, I could do that, but it is our only copy. It has been so popular. Here is a copy of the relevant page. Mr. Chairperson, the key sentence is on page 14. Our economic strategy is to expand world trade and diversify Manitoba exports, which were then 73 percent dependence on the American market. In the ensuing years, it has grown to 78 percent.

So I simply was pointing out that the commitment made in 1995 has not been able to be met. The reason may well be that that is the structure of international trade, that is the result of the structure of NAFTA and all those other forces, but I simply wanted to point out that we have not been successful in lessening our dependence on a very large economy that is a very capricious trading partner. I simply do not feel very comfortable with that degree of dependence.

I think if the minister wants to move on, we could move on to the next areas. We could pass this area.

Mr. Tweed: There are some things you just cannot leave unspoken. I think again, when we talk about our economic strategy, it is very clear. The member has read it correctly into the record. Our economic strategy is to expand world trade and diversify Manitoba exports. Exports mean jobs, and I would challenge the member to provide me with any information that might suggest that we have not done this.

Mr. Sale: Well, I do not think we have to debate this for a long time. That is essentially what I have been saying, that the promise in the platform was to diversify, that the reality of the performance has been that we are increasingly dependent on one market, the United States of America. I think any prudent businessperson or economist or trade official, including the minister's own officials, would say, if they had their druthers, they would rather not be quite so dependent on one market for exports. They would rather have a breadth of dependencies so that when the United States has difficulties, as it inevitably will at some point in the economic cycle, we may be trading successfully with other economies that are not completely in sync with the American economy. So the whole point of

broadening your RRSP holdings or your business dealings or your markets is to eliminate the risk associated with overdependence.

The Premier (Mr. Filmon) correctly saw that risk in 1995, and he committed to do something about it. Unfortunately, in the ensuing years we have become more dependent, not less, on the American market. That is clear. The data are there. It is regrettable. That is simply the point that I have been making. Of course exports mean jobs and of course our exports have grown. The point that we are concerned about is that they have grown mainly with one market. That creates a dependency and a risk that I do not think is welcome.

Mr. Tweed: I guess I just want to make sure that the record clearly states that the economic strategy of this government was to expand world trade. We have done that and we continue to do that. Are we content? I would say not. I would say that every and any opportunity that has presented itself or that we find as a province or as a government or as a department of Manitoba Trade we will explore to the fullest extent to give the population and the people of the province of Manitoba an opportunity to take advantage of those opportunities that are presented.

I think it is very clear that the strategy to expand world trade markets is working. We have diversified Manitoba exports and we have created more jobs. I would just like to be on record as saying that that is happening, will continue to happen, and I look forward to being a part of a government that continues to be a part of that success.

Mr. Chairperson: 10.2. Business Services (c) Manitoba Trade (1) Salaries and Employee Benefits \$1,245,200—pass; 2.(c)(2) Other Expenditures \$2,130,300.

Mr. Sale: Mr. Chairperson, it may be my eyes, but I am looking at the book supplied as Estimates material. I see \$1,245.2 for 10.2(c). I guess that is (a), is it?

Mr. Chairperson: Item 10.2(c)(2).

Mr. Sale: (2). The next figure in my book is the sum of Other Expenditures of 2,380.3, which

does not seem to be the same as the Estimates book.

Mr. Tweed: Mr. Chairman, if I might help for a point of clarification. I understand you have the supplementary. The \$2,380,300, if you go to the actual Estimates of Expenditure, that is a combination of (2) and (3) under Manitoba Trade, \$2,130,300 Other Expenditures plus 250 Grants.

Mr. Chairperson: I would like to thank the minister for clarification.

Item 10.2(c)(2) Other Expenditures \$2,130,300 plus (3) Grants \$250,000 come to that total as shown in the other book.

Mr. Sale: I should have brought my book with me, but I see what has happened here.

Mr. Chairperson: We can proceed.

Mr. Sale: Yes.

* (1620)

Mr. Chairperson: Item 10.2(c)(2) Other Expenditures \$2,130,300—pass; (3) Grants \$250,000—pass; (4) Less Recoverable from Rural and Urban Economic Development Initiatives (\$1,000,000)—pass.

(d) Telecommunications Marketing (1) Salaries and Employee Benefits \$328,500—pass; (2) Other Expenditures \$460,000—pass; (3) Less Recoverable from Rural Economic Development Initiatives (\$198,200).

Mr. Sale: Mr. Chairperson, what is the recoverable here and why are we recovering into this appropriation?

Mr. Tweed: I am advised that the number represents about 25 percent, which is the Rural Economic Development's cost-sharing portion of this initiative.

Mr. Sale: Mr. Chairperson, is the assumption here that some of the smaller call centres are located outside of Winnipeg and REDI has a mandate outside of the city and that is the rationale? Is that what we are talking about?

Mr. Tweed: If I could, Mr. Chairman, we have a gentleman, Mr. Steve Demmings. He is the executive director, Manitoba Call Centre Team, and I would ask him to join us at the table. I am sorry I did not do it sooner. I am advised that the contribution and participation from Rural Development is with the intention of creating and developing call centres in rural Manitoba as well as in the major cities.

Mr. Sale: I thank the minister for the answer. TeleSpectrum Worldwide merged recently with another American telecommunications call centre, essentially operation. TeleSpectrum in the past year and a half or so has had an extremely volatile history, I am sure as the minister and staff know. They have opened centres, closed centres, centres have apparently failed. This centre almost closed at one point and then it rebounded and again has a—at least the last time I talked to anybody there—fairly large number of employees again. Does the minister believe that TeleSpectrum is stabilized at this point or is it still in a, let us say, developing situation?

Mr. Tweed: Mr. Chairman, I am not sure I would want to comment on the viability of any particular company in the province. I can tell the honourable member that the province has benefited from this company's participation in the provincial economy. We have benefited through the taxation, through the creation of jobs, through the opportunities that it has presented, but at this point in time I am advised that we do not have a financial stake in this company, and I am not sure it would be fair for me to make comment on the success or nonsuccess of this particular company.

Mr. Sale: Mr. Chairperson, there are a number of what I would call high-end or very good call centre jobs in places like the CN, Air Canada, and Royal Bank Direct, to give three examples where staff are highly trained. There is a good career path for them. In some cases they are unionized and have the protection of a unionized work environment. One of the issues when we visited some of those centres is the question, well, two questions, one of the availability of adequately trained staff that the company can then train in their own particular area but people who come in with the kinds of skills that are

needed. Could the minister comment on whether our post-secondary institutions or secondary institutions are providing appropriate training for people in the quality jobs that are primarily involved in inbound calling centres?

Mr. Tweed: Mr. Chairman, I am advised that the Call Centre Association has taken it upon themselves to develop and are very involved in the producing of a curriculum for the training of the call centres. I think they have seen that as a priority in their association, and I am lead to believe that the curriculum that they are developing has been very successful and is continuing to develop along that path.

Mr. Sale: Could the minister indicate what college or colleges are currently using this curriculum?

Mr. Tweed: I am advised that Red River Community College are working with this curriculum and successfully.

* (1630)

Mr. Sale: The call centre industry is like any other industry that is relatively recent, certainly recent in its explosive growth. Any industry undergoing that kind of change always has problems, structural problems, problems with regulation, problems with staffing. Are we currently meeting the needs of the members of the association in terms of available staff that provide a stable workforce, because as I am sure the minister knows, the turnover rate in some aspects of the call centre business is still extremely high?

Mr. Tweed: I am advised that the association itself, when it was first established by the representatives of the call centre organization, was basically originally set up to deal with that particular issue. I just quote here from my note that one of their main common goals was to ensure a sustainable reliable labour pool and develop a certified curriculum of studies. I understand that the curriculum has been developed and, as previously stated, is being used by one of our community colleges. We are advised by new companies that are coming to Manitoba and seeking people from the labour pool to fill the jobs that are being created, at this

point in time are being met. I am also told that since the introduction of the call centres into Manitoba that over 8,000 jobs have been created.

Mr. Sale: Does the department or the industry association maintain turnover numbers in terms of the approximate staff retention numbers or turnover numbers, I guess two sides of the same issue?

Mr. Tweed: I am advised that the call centres maintain that number independently of the association.

Mr. Sale: Of the centres that we have an involvement with like Faneuil, AT&T, Trans-tech, GWE, some others, Angus Reid more recently, and I guess another one to be announced shortly or sometime soon, does the government maintain any kind of turnover numbers? Is that of concern to the government?

Mr. Tweed: Mr. Chairman, I am advised that as part of the agreement and arrangements that we enter into with many of the call centre companies, we do an audit on the jobs more to match to the obligation number, not so much to deal with the turnover. At this point, I am not aware that we keep a record of actual turnover of employees.

Mr. Sale: Mr. Chairperson, in the industry it is thought that if you can keep your turnover below 20 percent a month, you are doing pretty well in terms of employee turnover. Of course, that is a staggeringly high rate of annual turnover. I know there are some people who find this absolutely the right kind of job to do. They stay with it for years, and they find it a good job. But it is a tough job for many people, and the turnover rate is still extremely high, which is why we view these jobs, particularly in the outbound marketing area, in companies like Faneuil and TeleSpectrum, where they are essentially selling all the time and the refusal rates are running at 96, 97 percent. I think they feel that if they get 2 percent or 3 percent hits it has been a good evening, and that is an awful lot of stress for people who are constantly being refused and sometimes very rudely.

Are we still running in the outbound centres at that kind of level of turnover, 20-25 percent a month?

Mr. Tweed: Mr. Chairman, I think when you look at any industry that is new and developing, probably the companies that are involved in the call centre industry, certainly—again, just thinking of my own experience and business experience—if these companies are spending the dollars to train, it would be certainly, I would suggest, in their best interests to maintain that. I think you are always going to have some turnover that is directly related to improved opportunities after the training is completed. We currently do not have any numbers that would indicate turnover, and I guess then you would have to probably go into the reason for turnover: Was it a better job? Was it lost interest? Were there several varying reasons?

It has just actually been brought to my attention. Rather than get into the specifics, I can tell you that the type of people that are getting an opportunity to find a career or a career path that may take them on to bigger and better things—and hopefully it will—and if they are satisfied, hopefully they will continue at that job, but there is a company that has helped 150 social assistance recipients gain valuable work experience. To me, when you give people that opportunity, it just enforces my thinking that the opportunities created by the call centres are doing very much what they proposed to do. They are creating jobs, giving people the opportunities.

I had the opportunity just in the last, oh, it would be in the last six weeks, I would say, that we toured a couple of the call centre facilities in the province in Winnipeg, and I was totally taken by the professional demeanour of the entire facility. The people were working in very, very good conditions. The quality of the layout of the floor, the equipment that they were using, the ergonomics that they applied to the work stations that allowed the employees to be standing, be sitting, to get up and move around, I think the companies have recognized that to maintain the quality and the good employees these are the kinds of things that they have to do for the people they employ. We are certainly seeing every indication that these companies recognize that and are continuing to work to develop those types of properties or programs that will enhance the employment opportunities.

* (1640)

Mr. Sale: Mr. Chairperson, does the government have a priority on any particular kind of call centres that it is attempting to particularly attract, or is it open to any and all with no particular priority?

Mr. Tweed: In developing a business and in developing opportunities for the people in the province, I think it has to be noted that the province has been in the call centre business now between five and six years. I think if you travel, not only in Canada but perhaps North America, maybe even beyond, you will find that Manitoba has, because of their strong concern and development for education and training, for developing a curriculum, for developing the programs, that we have developed a very strong reputation for attracting these types of businesses. I think now that we have done that, our reputation, we also have perhaps as good an infrastructure as anyone in the competitive market that we are going after.

We are now able, because of all that, to focus our attentions. We are certainly looking more towards the inbound calls that are coming in, which apply again in the areas of technical service, customer services. I think our position now is to highlight those areas and try and go out and attract those types of centres to our communities now.

Mr. Sale: Just a last question in this area, Mr. Chairperson, in our tours of some of what I would say the best centres, maybe it was the CN, or the Royal Bank, or Air Canada—I think Faneuil has a very good physical set up. I am not sure which ones the minister was through, but it might have been one of those. In all of those though, particularly CN, Air Canada, to a lesser extent some of the others, disaster recovery and standby came up every time we talked with the management. I know CN maintains a centre, I am not sure whether it is in Pennsylvania or Ohio, as their hot standby. These are all mission critical systems that cannot be down, period. I mean the whole CN system is controlled essentially from the old Eaton catalogue building, which is kind of an interesting rebirth for that building. It used to ship stuff all over the world, or all over Canada,

from the catalogue building. Now we ship electronic signals all over Canada from the same building and control all the freight.

There is some talk of having a recovery location in western Manitoba. I think the concern is which grid the location would be, which electrical grid the location would be dependent on. Is there any anticipation that there will be a Manitoba recovery centre, or is it the feeling that such a centre has to be physically more distant from Winnipeg than a Manitoba location would allow?

Mr. Tweed: I think when you are in this type of industry, it is certainly a wise decision by the company or a company to have that secondary. One of the companies, and I will put on the record, that we toured was the Air Canada call centre. In talking to the manager there, we discussed the situation during the ice storm in Quebec. He said that they had rerouted all the calls that were coming into Quebec into Winnipeg. I should correct. I am not sure if he said all, but many of them. What he suggested to me was that they always try and set their system up so that they do have an opportunity to forward it to another call centre or to another area that will answer and look after the requests of the people coming in.

I think it is probably a company decision that would dictate that. Then they would make those decisions based on the investment and where they see fit that it would best suit their needs. I would just, and more for interest I think and for the sake of the member, when we talk about the opportunities that having the reputation that Manitoba does, the Royal Direct call centre that is coming into Manitoba or is here in Manitoba has invested \$10 million in Winnipeg. Apparently they are hoping to employ approximately 700 people by the year 2000 because of our strong reputation and the training and the quality of the people that we have here.

This was a company that came to Manitoba without being convinced by us that this was the place to be. They came because they knew it was a good place to be. I am only guessing, but I believe that their location is at the Grant Park mall, which you might be a benefactor of in the

constituency. Does it fall under the Inkster constituency? I am sorry, Crescentwood.

Mr. Sale: Well, the minister probably knows there were days in my past when I was a Liberal, so that is not an unforgivable slight. The centre is in the old Crescentwood riding, which now does not exist. It is now in the Lord Roberts. I was pleased to be at the groundbreaking and at the official opening for that centre. I would agree with the minister that that is what the staff said, that is what the president of the Royal Bank said. In fact, the former minister is here reading.

He will remember that at the official opening, we were paid a visit by Lily Tomlin. I must say that the chairman, John Cleghorn, of the Royal Bank was a most gracious recipient of a practical joke. I am not entirely sure that conversation was all scripted. I rather think that some of the things she said and some of the things that he responded with may not have been in the script, as it was very funny. It was quite a good exchange, I thought, Lily Tomlin in the form of Arvel Gray, if I am not mistaken. I thought for Canada's staid bankers, who are not usually given to that kind of public display of wit and humour, it was quite fun.

So, yes, it is a good centre, and they are good jobs, a stable workforce and low turnover in that centre, in my understanding, and there is a career path for those people, which is not the case in some of the low-end centres. So it is a very good centre. Pass.

Mr. Chairperson: 10.2. Business Services (d) Telecommunications Marketing (3) Less: Recoverable from Rural Economic Development Initiatives (\$198,200)—pass.

10.2.(e) Industrial Technology Centre.

Mr. Sale: I think that in the main the centre provides some useful functions, particularly in its library and its resource function to Manitoba businesses. There are some aspects of it which are unique. The minister refers to them in some reports, for example, its ability to test paper-break-open tickets, lottery tickets—to assure the security of those systems. It is quite a unique function. It is not entirely clear why it needs to

stay in the public sector, because it is a fee-for-service system. Anyway, it is there.

The main thing I just want to explore, I really just want the minister to explain this little red kit that we ran into a year ago. I am sure the minister is aware of it. He has seen it. It is called the Innovation Report. It consists of a cute little box, a printed report, a CD and a video. With all due respect to the producers, the quality is not wonderful. The video, audio and CD quality, at least on my computer, is not what I would call high level. It is not bad, but it is not great.

How in the world did we come to let the contract for \$260,000 to Rescom Interactive when the industry knew that Rescom was in trouble when the contract was let, and it got deeper and deeper into trouble as the months went by after the contract was let?

* (1650)

Mr. Tweed: Mr. Chairman, if I may, and just only for clarification, I think the line that we are on is ITC, the Industrial Technology Centre. I suspect that the line that the honourable member would like to deal with is under Economic Innovation and Technology Council, EITC, which is subappropriations 10.4.(b) and 10.4.(c).

Mr. Sale: Mr. Chairperson, I am just referring to the note: The centre formerly functioned as part of the EIT Council. ITC will provide services, et cetera.

I do not mind where we do it. We can pass this if you want to do that and come to it in due course.

Mr. Tweed: If that would be okay, we do have a person on staff that we would like to bring in, if there are questions, particularly on the ITC, and we can bring him in. He is not here today, I guess that is what I am saying.

Mr. Chairperson: Item 10.2.(e) Industrial Technology Centre \$851,300—pass.

Item 10.2.(f) Health Research Initiative \$3,000,000.

Mr. Sale: Mr. Chairperson, the announcement, I think it was yesterday, of an additional million dollars in this area, I presume that is what we are looking at here in terms of this increase.

Mr. Tweed: Yes, it is, Mr. Chairman. What we have found is that, with the receivers of these funds going out and competitively attracting new industry and new development, that their costs of operation increased. So we tried to reflect that in this year's budget.

Mr. Sale: Mr. Chairperson, I am just wondering how the minister and his government got a hold of our platform. I am puzzled by this, because I certainly support this increase in support for research and development. I am just sad that we did not get to announce it ourselves instead of having you announce it for us.

Mr. Tweed: Mr. Chairman, I would love to stand up and take all the credit for it, but I think I would have to credit my predecessor for his forward thinking, seeing opportunities for the province and helping government make the right decisions. Again as much as I would like to say I initiated it, I cannot. Mr. Downey should be congratulated and my increase is merely recognizing the good work previous.

Mr. Chairperson: 10.(2)(f) \$3 million—pass. 10.(2)(g) Manitoba Centres of Excellence Fund.

Mr. Sale: Is this an open-ended federal provincial agreement under the Networks of Centres of Excellence Initiative or is there a time limit on it?

Mr. Tweed: I am advised that there is no time limit.

Mr. Sale: Does the government have any role in directing the particular areas? Does it sit on the grants council or is it simply funding and the grants are awarded on a completely independent basis?

Mr. Tweed: I am advised that the provincial government senior policy advisor for science and technology allocates approximately 20 percent of his time in the management of the MCEF with minimal support and assistance

from other RES and finance administration staff as required.

Mr. Sale: Mr. Chairperson, what is the jurying process for sorting out which projects are funded and which are not?

Mr. Tweed: I am lead to believe that we do not have a part in the decision-making process, but certainly we encourage and offer advice to the federal government and federal department based on our economic priorities so that they are aware of it and hopefully they will link the two together.

Mr. Sale: So in the actual selection process, is this a peer juried process or is it a federal government staff directed process?

Mr. Tweed: Mr. Chairman, I would be prepared to provide for the member a detailed description of the process. I understand it is quite detailed, the formula, and I would be happy to share it with the member.

Mr. Chairperson: 10.2(g) Manitoba Centre of Excellence Fund \$450,000—pass;

Resolution 10.2: RESOLVED that there be granted to Her Majesty a sum not exceeding \$22,614,400 to Industry, Trade and Tourism, Business Services for the fiscal year ending 31st day of March, 2000.

Is it the will of the committee to call it five o'clock.? [agreed] The time being five o'clock, committee rise.

HEALTH

Mr. Chairperson (Marcel Laurendeau): Committee will come to order. The staff can enter the Chamber at this time. Resolution 1.(b)(1) on page 83. Does the member for Flin Flon have leave of the House to come and take the seat at the front? [agreed] The honourable member for Flin Flon may take the seat up front. Staff can enter.

Mr. Gerard Jennissen (Flin Flon): It is great to be given the opportunity to ask a few questions of the Minister of Health. I really would like to start by basically repeating the

questions I asked today about the fact that the special care unit at the Flin Flon Hospital was closed this weekend, and that causes me some grave concern.

It is not an intensive care unit. It is a special care unit, which I guess is one grade lower than intensive care. We are talking about a city with mines and the potential for some dangerous situations to occur. Hopefully not, but it is possible. It was brought to my attention that this weekend one lady phoned and said she was seriously ill, I believe it was on a Wednesday, late Wednesday evening, came to the hospital Thursday in the wee hours of the morning, and I am now going by recollection. It was a heart condition. By Friday she was told the special care unit was no longer operational, was put in an ambulance, and the ambulance took her to the Flin Flon airport that is approximately, I am guessing, roughly 30 kilometres away and then medivacked her to The Pas to the Grace Lake Airport, then put on the ambulance again and brought to The Pas hospital. She was discharged, I believe it was, that Sunday but was not happy with the fact that she was expected to take a cab home to Flin Flon from The Pas. That is a distance of roughly 150, 160 kilometres.

Finally she was allowed to take the plane from The Pas back to Flin Flon, but had to pay for her own cab ride from the hospital to The Pas airport, which is a \$40 cab ride. So she was not very happy. First of all, the fact that there was no special care unit operational in Flin Flon, secondly that she had to shell out a portion of money. Her basic concern was, she says, and I found this fairly straightforward and honest of her: I am not afraid to fight for my rights, but a lot of older people, shyer people, quieter people would not put up any kind of a struggle. She says they would be shoved into the corners of this system.

* (1530)

So I guess what I am asking, Mr. Minister, first of all, about is whether you could clarify just what is going on in Flin Flon.

Hon. Eric Stefanson (Minister of Health): I thank the member for Flin Flon for his question here in Estimates. He did ask me this question

just an hour or so ago in Question Period, and I do have a little bit more information that I can share here this afternoon.

As he knows, the Flin Flon General Hospital does operate a two-bed special care unit staffed by qualified, trained nurses. The hospital is obviously currently experiencing a shortage of nursing staff who are qualified to provide the specialized care for those patients requiring admission. The shortage can obviously be attributed to the whole issue of recruiting more nurses, particularly in some of our northern communities. This specific unit, the two-bed special care unit, was closed as he has indicated on Friday, May 14, 1999, on a temporary basis. I am told at that time there was no appropriately qualified staff available to provide support to the unit. The decision to close the unit was made following consultation with the medical staff and nurse managers for the safety and security of patients. Patients requiring special care were to be stabilized in Flin Flon using our emergency services and, in some cases, were to be transferred to another facility depending on the nature of their illness.

I guess two points I would like to make is that, if they incur a cost as a result of that, I have had a discussion with our department that obviously that whole issue should be looked at, that there should not be an additional cost to individuals as a result of a temporary closure of facilities that would normally be in their community. It really comes down to the issue of the \$50 fee being waived in the case of individuals that are affected by this. I would encourage any individuals who had some additional costs, as the member has pointed out, relative to a cab fare to bring that information forward and have that reviewed by the department. Certainly when something like this happens, the intent is not to then have the individuals incurring additional costs as a result of not having the service.

The issue really here is the issue of nurses. Again, as the member for Flin Flon has heard me say on other occasions in this House, we do need more nurses in Manitoba. The budget that we just brought down includes some \$32.5 million for 650 nursing positions that have to be filled in Manitoba. Obviously, many of those nursing

positions are in communities outside of Winnipeg, communities like Flin Flon in this case. That is why we have set up a \$7-million fund to help us do just that. The whole issue of a nursing shortage, as he knows, is not unique to Manitoba. In fact, it is facing virtually every province in Canada, but, at least here in Manitoba we now have a collective agreement that has been ratified by a 75 percent vote of our nurses, 40 out of our 42 facilities, which is certainly something we are pleased with. We are now able to even more aggressively go on to some of these other important issues—utilizing our \$7-million fund to recruit and retain more nurses, and certainly that is an issue that we are working to address in the community of Flin Flon.

Mr. Jennissen: First of all, I would like to clarify. I believe I heard the minister say then that the Northern Patient Transportation fee of \$50 in these cases would not be levied and any extra costs that would be incurred because it was an unforeseen happening. If the person was supposed to be in the Flin Flon hospital, they would not be stuck with this extra cost?

Mr. Stefanson: On the \$50 Northern Patient Transportation fee, yes, that is to be waived. Any additional costs incurred outside of all of the other costs that are picked up under that program, the member cited a specific example, I believe, of some cab fare from The Pas, I think he said, that should be brought to the attention of the regional health authority. We will be having discussions with the regional health authority about covering any other costs, reasonable costs that were incurred as a result of this service not being available in Flin Flon.

Mr. Jennissen: I thank the minister for that answer. The minister raises the issue of a nurse shortage and that it is fairly global. I believe that is quite true, but it is specifically dramatic in northern Manitoba. I think it is maybe even more that we are short nurses, but we are also facing nurses in the hospital that are burning out, that are overworked doing extremely long shifts. I believe the morale could be better. That is certainly an issue. Maybe that is an outgrowth of the fact that we have a severe nursing shortage.

I was going to ask the minister not only to address that point, but how much of that \$7-million fund for recruitment or retention of nurses would actually be devoted to the Norman Regional Health Authority. Is there a particular formula or amount of money set aside for recruiting nurses?

Mr. Stefanson: The \$7-million fund is not set up on a regional basis. It is there province-wide, but the committee itself will certainly have some priorities, whether it be in the area like specialty nursing requirements or whether it be in certain regions of our province. That is all part and parcel of what the committee is there to address. I think, as the member from Flin Flon knows, it is a six-person committee. They are all nurses. Two of them are appointed by the Manitoba Nurses' Union. Two are appointed by the employers, and two are appointed by the government directly, of which Sue Hicks here with me, our associate deputy minister, is one of the two.

* (1540)

The whole issues relative to nurses, when I met with nurses, they raised several issues. Certainly the issue of fair compensation, fair pay, has been one issue. I am pleased that the collective agreement has now been ratified by a 75 percent vote, even though there are still two facilities to be returned to address some issues. Again, we are prepared to continue to address the issues that I have heard and we have heard from nurses. The whole issue of recruiting more nurses, that is why the \$7-million fund is in place, putting in place more permanent positions for nurses.

In this Legislature, this legislative session, we are introducing some legislative amendments to our various nursing acts, which will be introduced shortly, doing a number of things to address those things that the member refers to to eliminate some of the pressure on nurses in the workforce relative to their demands and their requirements. Again, I think he heard me the other day in the House cite some statistics from, I think they are called CIHI, the Canadian Institute for Health Information, chaired by one Michael Decter, a former Manitoban. It showed statistics on nurses per capita. The good news

for Manitoba is on a per capita basis. We have the most registered nurses including Quebec west, so only the Maritime provinces have a higher per capita distribution of registered nurses. Having said that, literally all of Canada, certainly from Quebec west, all of those provinces need more nurses. That is why we are seeing provinces like B.C., other provinces have nurse recruitment funds and so on. So we are definitely committed to bringing more nurses into the workforce to address the very issues that the member from Flin Flon is raising here this afternoon, Mr. Chairman.

Mr. Steve Ashton (Thompson): I have a number of questions, and actually one of the first questions I would like to ask is following up from the question of my colleague. Certainly the nursing shortage is a major concern in northern Manitoba. It is a concern, incidentally, not only of the institutions under our health authorities, basically provincial jurisdictions, but also very much a concern in federal jurisdiction as well in terms of medical services. I have been in touch with the Medical Services Branch, for example, in regard to the situation in Nelson House and in Split Lake, and my northern colleagues have raised a concern in other northern communities.

What I wanted to ask was a couple of questions. I will maybe sort of phrase them now so the minister can respond to them in series. One is basically if there has been any consultation with Medical Services Branch because they are very similar problems?

Second of all, there have been some significant changes in nursing education in recent years—the initial shift away from LPNs, although that seems to be reversing itself; the move from RNs to bachelors—and that has affected, for example, nursing training. In northern Manitoba, for example, we had the Northern Nursing Program, which is an RN program. It was essentially closed down. There were three satellite programs set up between the University of Manitoba and Keewatin Community College in Norway House, Thompson and The Pas. My understanding is that that has been reduced to two—in this case, The Pas and Norway House—in terms of intake. Something, I think, is unfortunate. I think Thompson actually have the highest intake, but certainly it does not

seem to fit in with the desperate shortage of nurses. So what I would like to ask is on that element of it, what is happening at the education and training level?

I would also particularly like to add a question as to whether we are dealing with one of the problems, and that is that there are different requirements for nurses. For example, nurses working in nursing stations. In fact, the remote nursing programs, I believe, there used to be one in Dalhousie that is no longer in place. There is one, I believe, in McMaster in Hamilton. So you ended up with a rather bizarre situation of nurses from Medical Services serving communities flying to those cities to take remote nursing, something that has not been available. You ended up with nurses, for example, under the previous Northern Nursing Program, who would not have the qualifications to work under Medical Services in a nursing station.

So, I am wondering, once again, if there is any comprehensive strategy working with the Medical Services Branch and with the First Nations community that are increasingly having jurisdiction over health care, that, hopefully, can get a single strategy on the nursing shortage in northern Manitoba rather than the various strategies that sometimes do not seem to be very well co-ordinated and sometimes actually even act at cross purposes.

Mr. Stefanson: I thank the member for Thompson for those questions.

On his first one, about the issue of consultation with Medical Services Branch, I can tell him, yes, there is ongoing consultation and discussion on this whole issue of the need for more nurses, in many cases on reserve, and obviously there is also, as we were discussing, the need for nurses in many of our northern communities.

There is not a joint strategy as such, but in response to, I think it was the member for The Pas (Mr. Lathlin), asking questions about some of the kinds of things we are doing, we have indicated very clearly the \$7-million fund that has been established. In fact, because the member for Thompson knows that money has

been set aside in a separate fund being held in trust by the Winnipeg Hospital Authority right now for the committee, the six-person committee, to be accessed and utilized. That can be used to bring nurses right across our province, including our First Nations communities, so we do continue to consult and dialogue with Medical Services about this entire issue of doing everything we can to provide more nurses, not only on reserves but in communities that require more nurses.

I guess just sort of on that same issue, Mr. Chairperson, we are providing some funding to the University of Manitoba to support nursing education program to prepare nurses to work in nursing stations. Also, positions have been reclassified to bring the salary scale in line with rates paid by the federal government for similar work. I think many are hopeful that the transfer of the nursing stations to the band councils will proceed quickly, and that once that transfer is completed, other issues of importance in terms of job security and so on should make it easier for the band to recruit new staff to fill vacant positions.

Mrs. Myrna Driedger, Acting Chairperson, in the Chair

His second question on nursing education, again the Faculty of Nursing at the University of Manitoba has become very aggressive in terms of recruiting more individuals into the nursing program. I think last year they had a 23 percent increase. They have certainly set fairly aggressive targets to bring more nurses into that program, and they are very optimistic that they can be successful in doing that. That is one vehicle to help us provide more nurses right across Manitoba.

Again, as he is familiar with, we just recently announced the expansion of the licensed practical nursing program. Their intake this year will go from 90 to 190 in the province of Manitoba. They will have six intakes: two in Winnipeg at the Misericordia, two at Brandon, and they will have two rotating sites in other locations across Manitoba. So, on the education side, we have the Faculty of Nursing, we have the LPN Program at Assiniboine Community College, both becoming very aggressive in terms

of attracting more nurses to the profession through their program.

* (1550)

We have taken other initiatives to help provide services. I think all members in this House are supportive of the recently announced midwifery program which, by the end of this year, will bring 20 midwives into the system in Manitoba, again providing a very important service, and that will be a service that will be provided throughout our province with, again, the North being an important part of the delivery of that service.

I would suggest a number of steps are being taken, whether it be through utilizing resources to attract and recruit nurses to the profession, what our educational communities are doing, the Faculty of Nursing in the Assiniboine Community College, and a number of initiatives are underway to address what is a very important issue is to bring more nurses into the profession, to keep nurses in the profession, to provide more nurses in its entirety in the province of Manitoba.

Again, I am certainly pleased with the kinds of initiatives and the kind of response we are getting in this province, recognizing that this is a national issue. It is certainly not an issue unique to the province of Manitoba.

Mr. Ashton: I would like to ask some further questions on another shortage that is obviously of major concern in northern Manitoba. In doing so, by the way, I want to indicate that I recognize some of the national dimensions, the problem with the nursing shortage. It is much worse in northern Manitoba potentially, particularly given the impact of some of the cuts that have taken place in our hospitals. The Pas, Flin Flon and Thompson have had significant cuts in the number of beds and staff, most recently in 1995, and that did result in the loss of a number of nurses. I know many nurses who are quite disturbingly in a situation of leaving the profession, because of the stress that they are faced with. I hope that will be part of any comprehensive strategy. I recognize the underlying dynamics.

I want to focus on the shortage of physicians, which is a major, major problem for northern Manitoba and for other communities throughout rural Manitoba. In Thompson, just to give some background to the minister, because I recognize he is relatively new in the portfolio, we have faced periodic shortages, but in recent years it has been a particular problem with the decline of the number of fee-for-service physicians. That was aggravated a number of years ago, the closure at the time of the Burntwood Clinic. At that time the mayor of Thompson, myself and others were pretty much involved in lobbying for four funded physicians. The member for Brandon West (Mr. McCrae) was the minister at the time. I do want to give the minister some credit. He was very forthcoming with a response. We were able to get the four salaried physicians at salaries that were certainly competitive with what Medical Services pays to physicians. That is important, because obviously you cannot recruit in isolation of what other employers are paying.

We also, in this past fall, were involved once again with a fight to get four more salaried physicians. This had been proposed by the RHA. I gave the process some time to go forward but got frustrated with the delays. Particularly, just so the minister is aware, there are people in my community that have to wait three weeks for a medical appointment and up to six months for a checkup. I can give the minister numerous cases where people have, for example, had to drive to Winnipeg to see a doctor. I almost do not know where to stop in terms of outlining just how much of a problem it is for people in my constituency.

A woman who transferred to Thompson, who had breast cancer—she is in remission—but has had difficulty in even finding a doctor that she can go to for her periodic checkups. Believe you me, it is a major, major problem. What is particularly concerning for people is if they do find a family physician, there is a huge turnover. Many people just do not have a family physician. What that means is they have to go to the clinic at the hospital, and that puts pressure on the hospital, puts pressure on the patients, puts pressure on the doctors and nurses. It is a very, very difficult situation.

Now what happened in the fall was we ended up with a rather strange exchange between the then-minister, previous minister, in which the previous minister was quoted in the front page of the Thompson Citizen saying: Well, there really was no shortage of doctors. There were lots of doctors out there, and if there was any problem it was coming from the local community.

What I found strange about that was the minister did approve two positions, two of the four funded physicians. What I would like to ask the minister, recognizing that he is new in the portfolio is why the department chose to, first of all, approve the two physicians, which is certainly welcome but not the four, and whether the department is looking at further initiatives in terms of the doctor shortage? I will maybe leave the question at that, because I am also quite prepared to make a number of suggestions.

I do believe there are ways in which we can deal with this. I recognize it is a national problem, but most places in Canada you can get a family physician. You do not have to wait three weeks for an appointment or six months for a checkup. There is a root structural problem. It is not fair to blame the community of Thompson or surrounding communities. There has been a lot of effort by the mayor, the city council, the medical manpower committee of council, others. I have been involved with this.

It is a rather strange situation. I have had people ask why elected officials are getting involved in this sort of thing. The real reason is because up until recently if we had not done that, we would have ended up with a much more difficult situation. So if I can just focus in on why the two, not the four, although two is certainly better than nothing, and if there are any further follow-ups that are being looked at—by the way, there are problems with a shortage of specialists but the real problem right now is with the shortage of family physicians.

Mr. Stefanson: First of all, I have had some general questions on positions during Question Period and so on. I will not take a lot of time talking about that, but I think as the member from Thompson knows, I have indicated on

various occasions that the total number of physicians in Manitoba actually has remained quite stable. Having said that, I certainly recognize that there have been some pressure points in terms of providing physicians. In fact, some of the statistics I have are over 128 positions have been recruited to rural Manitoba on the conditional registry since 1995 alone. In the North in particular, the province and actually the Northern Medical Unit entered into agreements in September of '97 to provide a locum tenens program which I think the member is familiar with. It provides some relief, replacing the northern practising physicians while they are on leave and so on. As of March of this year, 22 locums have been provided for physicians working in medical practices of less than three doctors and wishing to take vacation or educational leave.

Mr. Chairperson in the Chair

* (1600)

Having said that, I really just said that to give the member a perspective of the province-wide and how some of these issues are in fact being addressed. On the very specific question he asked about, four salaried positions for Thompson and the Burntwood RHA, I gather, and only two being approved, then he has outlined some, given us some sense of his view of waiting periods and need. I am certainly prepared to go back and review that entire issue and obviously have a discussion with the community and with the RHA to assess the issue of need and waiting times, and review this entire issue of two being provided and two not being provided. So I guess I am telling him I am prepared to look into that issue and determine whether or not some action, some further action should be taken.

Mr. Ashton: Mr. Chairperson, I certainly appreciate that. I do want to commend the previous, previous minister, the member for Brandon West (Mr. McCrae) who did take a direct interest in that. I appreciate the minister's willingness to do that. Now that we apparently have some time between now and another event, an election, I would certainly encourage the minister to come to Thompson and meet with the RHA and others, because I think we may be able

to provide, collectively as communities, some suggestions on that.

What I wanted to ask on that theme, one of the paradoxes we are dealing with doctors, in a way is we are seeing a number of trends. A number of years ago, we were told we had too many physicians. If you remember, there was a restriction in the number of spaces in medical school. That always struck me as sort of one of those situations where it may have been true overall, but the problem again has been the allocation of physicians. The minister says that the number of physicians has not changed. Part of the problem potentially is—and I do not want to get into this debate that the previous minister and others have had, and the MMA have had, about whether there are too many in Winnipeg. I will leave that aside.

Just assuming there is enough, it is clear there are not enough physicians in rural and northern Manitoba. I am wondering if there has been any consideration given to deal with some of the structural elements. First of all, I mentioned the reduction in the number of spaces. I know it was a national agreement at the time that resulted in that, but has there been consideration to adding additional spots or designating specific spots specifically for rural and in northern Manitoba, for example, reinstating even the number of spaces that were eliminated?

Basically, we are in a situation where we train doctors—and the minister may correct me on this—but as many as two-thirds of the doctors are leaving the province from those who graduate from medical school. The use of salaried positions is helping keep Canadian-trained doctors in communities in rural and northern Manitoba because more and more younger doctors are looking at that. They want a life. They do not want just to be in a treadmill situation as a doctor. So, there may be some ways we can deal with that.

Essentially what we have been relying on in northern Manitoba are doctors, especially doctors from South Africa, and we have been very fortunate. We have had very excellent doctors, but there are some very specific

circumstances that have led to the number of doctors willing to come to Canada. There are specific circumstances where they have come to Manitoba in terms of their ability to qualify and receive accreditation within Canada. Also, the average length of time which the doctors have been staying in the North has not been that extensive. I am not arguing against South African doctors. Quite the opposite. I mean, if it was not for South African doctors, we would be in a really serious situation in many rural and northern communities.

I am wondering, in addition to dealing with the situation in medical school whether the minister is looking at other, not only recruitment strategies but retention strategies because there is an element of both. By the way, I also accept some element of involvement of local communities. I mean, that has been clear in Thompson. It has been clear with the RHA. That has been identified as a concern. People want to increase the retention rate because that obviously reduces the recruitment requirements.

I do appreciate that the province has been playing a role in identifying doctors. But, I point out that many of the doctors who are on the roster are doctors who have merely indicated their interest in coming to Manitoba. They may have listed five or six other provinces. So that list that is often floated, it does not necessarily mean you have—you know, if there is 120 doctors on that list, it does not mean that is 120 doctors ready, willing and able to come to Manitoba at any given point in time.

I realize it is a fairly general question, and I would certainly welcome a general answer from the minister, any initial thoughts he has. I just reiterate again that if he is willing to come to Thompson, I am sure he will, on this particular issue, receive a lot of feedback, and I think a lot of constructive feedback, as well, from the RHA, from the city council and from residents of Thompson, and by the way, surrounding communities because it is important to note that communities such as Wabowden, Thicket Portage, Pikwitonei, Northern Affairs communities have no physicians at all. So, obviously, that is the hope, that if there are enough physicians, that those services can be provided in their community.

Mr. Stefanson: A pretty open-ended question, which I appreciate. Yes, I do look forward to going up to Thompson. I have been working on just that, trying to work it into our House schedule and so on here. [interjection] I am sure I will get co-operation from the member for Thompson in terms of working on that. But, seriously, I received correspondence earlier from the mayor about some of the issues the member has raised, and I very much would like to get up to Thompson and meet with individuals involved in health care and community representatives.

In terms of some initial responses, he asked about the number of spaces through the Faculty of Medicine, and, interestingly, that is an issue that we are reviewing. He is right, that several years on a national basis it was reduced right across Canada. My deputy and other deputies are now discussing that exact issue as to whether or not we should be increasing the number of spaces and enrollments. Our initial reaction is that we should, but we are working with other provinces on that issue.

The member referred to the number of graduates who leave the province. I had a question earlier today in Question Period about that kind of an issue. That is an issue that we are addressing literally right across the board to work at keeping as many of our graduates as possible. I referred today in Question Period to some success we are having with anesthetists, and we certainly plan on continuing to address doing the things that we can do to keep more of our graduates in the province of Manitoba.

* (1610)

We have had significant success in attracting South African doctors to Manitoba, and we also have had good success in keeping them in spite of some of the coverage. Certainly the stats that I am prepared to return with show that we are doing a good job of keeping our South African doctors in the province of Manitoba.

In terms of our students, we have some initiatives. We have a rural summer employment program, again to try to get our students out into rural and northern communities, to experience that with the view that when they do graduate, they will stay in those communities.

We continue to look at initiatives that we can put in place to help to incent, getting that exposure and potentially setting up practice outside of Winnipeg. I think what we find is most individuals who experience it end up quite enjoying it, whether it is northern Manitoba or other parts of our province. It is a matter of getting them to experience it and then working, as the member says, with the community to ensure that we then keep them in our communities.

So I am always open to any suggestions that members have of what kinds of things we can be doing within that whole framework to continue to give incentive to our students, our graduates to stay in our province, to put in place mechanisms to make that happen.

When you look at practitioners in total, again, just to provide some more general information, I guess, the summary was done, the data for all of Canada was done, in 1997. It says here that Manitoba was one of only two provinces to experience an increase in the total number of general practitioners/family practitioners. Manitoba recorded the highest percentage increase in general and family practitioners, while six other provinces had declines. Manitoba ranked first in Canada for the highest percentage increase in general practitioners in 1997, again recognizing that getting the national comparisons often take a year or two, and that certainly is the most recent we have in terms of family practitioners and general practitioners.

I think, as the member for Thompson (Mr. Ashton) knows, there is an initiative, a family medicine residency program for education and training of family physicians in rural Manitoba. Manitoba Health provides some 85 percent or \$3.28 million of the committed operating funds for this program through a block funding arrangement. The program is delivered at three sites: St. Boniface General Hospital, Seven Oaks, and the Parkland Residency Program in Dauphin. Again, there have been various initiatives within that program to address the very important issue that the member raises.

So I would suggest we are taking a number of steps to provide the solutions to ending up

with more doctors in rural and northern Manitoba, whether it be accessing our South African doctors, utilizing our educational program, but there is still more to be done. So we are prepared to look at the issue of more spaces. We are prepared to look at more incentives or initiatives to encourage people to practise medicine in rural and northern Manitoba.

Mr. Ashton: I appreciate that. I am particularly pleased to hear that the issue is on the table in terms of increase in the enrollment at medical school. I will go one step further. In addition to what I have already suggested, which is that we look at designating spots for people willing to go into rural and northern Manitoba, I think we need to once again ask in terms of the faculty selection process that there be even more of a consideration to not only the willingness of people to practise in rural and northern Manitoba, but I think to a large extent getting more students from rural and northern Manitoba into medical faculties. I would note there has been some shift towards that quite significantly over the years. I am not saying this in isolation, but I do know from people I talk to who have gone through medical school, one of the biggest barriers to people practising in rural and northern Manitoba is exactly what the minister identified, and that is the fact that people do not have the exposure. This is where some of the programs the minister has talked about do help. But the reality is, I feel, people who know that rural and northern Manitoba has a good quality of life to offer are far more likely to go to medical school and come back. The people who know that best are rural and northern students.

I know the minister with his own rural background, family background and whatnot, will know that. Really one of the difficulties you run into, if you have graduates who come out who have no interest in locating in rural and northern Manitoba, it does not matter how much you offer financially by way of an incentive, it just is not good enough. If you look at what the average practice will provide you, say, in Winnipeg, if someone can make \$100,000 or \$80,000 or \$90,000 at a walk-in clinic in Winnipeg, you cannot get them to come up north for \$135,000-\$140,000, which is what the salaried positions have been.

As I mentioned, the fee-for-service system increasingly is not the employment option of choice of medical graduates. A lot more Canadian-educated doctors are interested in salaries than were ever the case before. So it is ironic, because it used to be this was the subject of a lot of philosophical debate. Now it has become more of a market issue in a lot of ways. Whether one likes fee-for-service or one likes salaried positions, or a mixture of both, the reality is that certainly in the market of today increasingly we are looking at salaried positions—not strictly. There are still doctors by choice who will work under the fee-for-service situation.

So I am wondering if the minister can perhaps give us some of his thoughts on the selection process and the idea of designating spots for rural and northern Manitoba. By the way, what I am hoping is that we will change the mentality that, I mean, I know there was snow in Thompson on Monday, but we are not Siberia, you know. We have a lot to offer. Maybe I should not have said that here, but you know what I am saying. There really is this negative perception of a lot of people that does not reflect the reality, and I think if we can break that and get people to understand that, you know, even if we could work out some system whereby it is an incentive in a lot of ways, if you are willing to work for five years in a row in northern Manitoba, that you can apply for one of those designated spots. Then it is more of an incentive system than the kind of options that have been tried in other provinces like billing restrictions, that sort of thing, where that is often seen as being punitive by the medical profession.

So I appreciate the minister's views on that, and I realize the minister is relatively new at this. But I think if we can change the paradigm, so to speak, the way we view rural and northern Manitoba and shift it from being something where we are trying to force people to work in rural and northern Manitoba and try and end up with medical students and others who are glad to work in rural and northern Manitoba, I think that is going to increase the number of doctors and the retention rate quite significantly.

* (1620)

Mr. Stefanson: Mr. Chairman, I guess I find myself agreeing with a lot of what the member for Thompson said, and I think there is a direct relationship to the previous question when he asked me about more spaces. I have already answered that question, that the combination of getting more spaces and the ability to look at designating those to individuals from regions of our province, obviously, particularly, northern Manitoba, I am told that the statistics show that actually we receive—how do I describe this? Proportionately, individuals from rural Manitoba who are looking to get into medicine do very well relative to the number that apply. It is just that we are getting fewer applying.

So there is probably an issue there, as well, in terms of the encouragement to apply to the Faculty of Medicine. I will return with more details on that in terms of sharing that kind of information, how many of the total applicants come from rural Manitoba, and if we can break it down to northern Manitoba, how many are accepted. But I am told that rural Manitoba and northern Manitoba fare well on that calculation.

But having said all of that, I do agree that, by and large, people who have grown up in rural or northern communities who experience medicine or whatever other profession have an easier time, are more likely to make the transition to return.

I still like to think we have to ultimately do both, but I think the member is right that there is a greater likelihood of having those individuals go back to Thompson or other communities and practise medicine.

So we are certainly open-minded on looking at that issue. We have had some preliminary discussions within my department. We will be having more discussions with the Faculty of Medicine. It is really back to that whole menu of items that we are talking about here in terms of the kinds of things that we can do to ensure that more people who are graduating from our Faculty of Medicine are staying in Manitoba and, obviously, that they are a significant resource to meet our needs in Thompson.

So we certainly agree with the objective. We are doing some things, and we are open-

mind on these kinds of issues. This is certainly one issue that I have discussed with my deputy, and we are going to pursue with the Faculty of Medicine what kinds of things can we do in that area to access more of our students from northern and rural Manitoba and then do everything we can to ensure that they end up back in rural and northern communities to practise medicine.

I agree with him that Thompson is a great community. We get into this whole thing of perception versus reality. I think as a province we used to experience that to a certain extent. I think that is continuing to diminish more and more right across Canada. But we do, as a province, face that perception, our cold winters and so on. Thompson within Manitoba faces that perception. I think the reality is quite different. We are probably a little biased in this Chamber, but having said that, we could go on at length and talk about the benefits of being in Manitoba or being in Thompson.

I also agree, without getting too sort of philosophical here, when we all look at what we do, money is only one criteria, not discounting that it is a pretty important criteria, but it is still only one criteria. We obviously want to do something we enjoy. We want to do it in a work environment that we basically enjoy and for a whole range of reasons. We want to get satisfaction out of what we do, job satisfaction, personal satisfaction and so on. So there are a number of criteria that influence, I think, why we do what we do. Certainly money is fairly important, but it is far from the be all and end all. So again I think the member is right to encourage people to be in Thompson or other communities. Money can maybe make a little bit of a difference, but there has got to be a number of other variables and factors that come into play, and that is why we need to address these kinds of issues.

Mr. Ashton: I really appreciate the comments of the minister. I would point out that it is not so much a question of the odds of one getting in if one is a rural or northern student. The real paradox for many years was the fact that if you take the proportion of the population, which is 60 percent-plus for Winnipeg, that you are looking at a higher percentage within the

population being in medical school from urban areas compared to rural areas.

It is obvious why. I mean, I went through this myself. I had to leave home to go to university even though there are some opportunities now in the North through FYDE, the First Year by Distance Education program, interuniversities north. It is pretty well impossible to take more than a year or two of studies. That means one has to come into the city. Whether you are from Gimli or from Thompson or from wherever, that means that you have to pay a significantly higher cost for education because you have to pay room and board, unless you are fortunate enough to have family, which I was. Many of my constituents go through that now.

I see that now. My daughter is in her final year of school. A lot of her classmates are deciding on whether they can go to university or not. I will tell you what it comes down to: things like they just had a band trip to California. They had to raise money for that. Some of her friends are saying: I cannot afford to go to university because of the cost of the band trip which was \$1,000.

It is much more of a difficulty in rural Manitoba. You also run into, by the way, under our system parental income is a factor. There are many people that maybe their kids are not eligible for direct student aid once they graduate from high school because the parental incomes are higher, but if you have two or three kids going to university at the same time, it can be just an absolutely crippling debt burden. So that is why we get fewer rural and northern students going to university.

That is why you get fewer rural and northern students actually getting as far as applying for medical school. It is very tough competition, as the minister knows. It is not much consolation that your odds are better if you are from a rural or northern area. The real question is what the breakdown is. The paradox, in a way, is, even if you went by population, even if you went by having, say, two-thirds from the city and one-third from the rural areas, the real need for medical students is the reverse. We are actually in a situation where I would say, out of those

graduating students, what we really need is the vast majority of them to be in rural and northern Manitoba.

So, if you start seeing sort of the way, if you start flipping the numbers around, I really believe that if you had much more of an emphasis on rural and northern students, I think it would be very positive. I would point out, by the way, because one of the concerns that gets thrown back is in terms of standards—you talk to most doctors that qualified in the '60s or '70s, and you look at the marks that were required in those days, actually for any professional faculty, and compare it to today, you will see a dramatic difference. The level of marks is significantly higher than what was required in the '60s and '70s to get in. There is a huge pool of people that apply for medical school every year who do not get accepted, and there is some ability, I think, to take the most capable people still and do that. So the bottom line is, I really think we should make some major changes on that. I appreciate the minister's comments.

Just one final question. On the question of medical schools, what kind of time frame are we looking at? Is this initial discussion? Is there opportunity of anything?

* (1630)

Mr. Stefanson: Mr. Chair, I think the expectation is to be able to have in place more spaces for the fall of 2000, but we have not ruled out the possibility of having it this fall. That is certainly a discussion that the deputy is having both on a national basis and we will continue to have here with the Faculty of Medicine. Obviously, it would be preferable if it could all be put together and accomplished for this fall; but, if not, I fully expect it can be done before the fall of 2000, recognizing that the intake into the Faculty of Medicine is basically once a year and, when it ultimately starts, it is the fall of the year.

Mr. Ashton: I appreciate that. I have been publicly saying for quite some time that this should be done. I was actually the Health critic at the time when the agreement went the other way, and coming from northern Manitoba, I just reminded people of the fact that what may be

the case in an urban area is not the case in rural or northern Manitoba. I will predict right now that if this does proceed, I think it will go a long way in conjunction with some of the stuff we have been talking about in solving the problem. So long as we can get people in those additional spots who are willing to practise, I think that is the case, and what I would even recommend, I talked to a former member of the college on this and a couple of other doctors. They even said this is a golden opportunity if there is a reinstatement of the number of positions. I believe we used to have 30 additional—I am trying to remember from memory how many were cut—20 or 30 back in the early part of the decade.

But either way, here is an opportunity. You know, if you took even just the additional spots and had a special designation, that these were for people willing to practise in rural and northern Manitoba, I think, by choice, you would have not only people from rural and northern Manitoba wanting to do it, but others. I am sure we could negotiate a situation in which people could be committed to a contract of five years, even two or three years, because I actually think if you get people up for a long enough period, that they know this is not just a sort of a quick way into medical school and then they are out and back to where they are, it may be a way of dealing with the structural root problems.

So if this is coming up on the horizon, I am very pleased with it, and I think if some discussions take place, I suspect, by the way, that there will be support within the medical profession as well, too, because I know that while the medical profession has been very opposed to things like billing restrictions, I do not think they are opposed to the reverse side which is incentives. I notice even in terms of the number of salaried doctors, I mean, it is still based on the fee-for-service system negotiated by the MMA, so I think there is potentially some willingness. This may be an opportunity to make a clean break from the structural problems that we have had, and I would certainly encourage the minister in that end.

I think, by the way, there is real opportunity in this area for consensus. I much preferred dealing with the member for Brandon West (Mr.

McCrae) when we were dealing co-operatively than what, unfortunately, seemed to happen a few months ago, and I am not being critical of the minister. I do not believe in that sort of thing when it comes to what is a major community problem. I mean, in the end we did get two of the four doctors, but the exchange of words back and forth between the minister and the mayor in Thompson I thought was unfortunate and did not really create the atmosphere we need, which is—I mean, surely something like the doctor shortage should be an issue that we can get some meeting of the minds on. It is not an issue that only NDPers are concerned about, believe you me.

I tell the minister, by the way, just to put it in perspective, I recently had a constituency survey, and I received back about 350-400 copies of that. Every single survey, except one, mentioned health care being the major concern, and the doctor shortage, in particular, being the No. 1 concern in Thompson. Now, I have never seen that. I have seen issues—you know, we often complain about highways, schools, even health care generally. We have had major hospital cuts, people have marked down, but I have never seen a situation where every survey but one—and, believe you me, I do not think I will share the rest of the surveys because, believe you me, they were not all NDPers. I can tell you, if you had looked at the distribution of answers on other questions, it was a fairly good reflection of the community as a whole. There were even some people agreeing with the government, so that shows you how balanced it was; not that many, just in case the minister gets his hopes up here.

But either way, the bottom line is all but one indicated the doctor shortage was the major concern. I worked with a group of local citizens to have a petition downtown on the doctor shortage, and the anxiety level on the doctor shortage is just incredible. I do not think we realize how much of our system is based on accessing a family physician, so, believe you me, we have to focus in on that, and I am quite encouraged by the minister's tone. I think it is constructive.

By the way, if the minister does come to Thompson, I would be more than happy to meet with the minister and introduce him to various

people in the community. As I said, I have done it before. This is not a political setup, so to speak. We did this with the member for Brandon West (Mr. McCrae). We had a very good meeting in 1994. I did not agree with the end result, the policy, but the minister did hear the concerns right at the hospital itself, and whatever format the minister is interested in, I am sure we could arrange it.

I know we have major disagreements in the Legislature at times on health care policy, but, you know, I think there also is an opportunity on a lot of these issues where, certainly, we as an opposition can do far more than just criticize the government's record but can give some constructive solutions. I will put it on notice right now, if the minister wants to go to Thompson, next week even, I will arrange a pair. Where is the Whip here? Well, he is not here, but I will come with him, so it will be an unofficial pair. I think, by the way, that is important because the North faces unique challenges, not just on the doctor shortage but on other issues as well.

I was out in Westman recently, and a lot of its challenges are very similar to Thompson. I think everywhere in rural Manitoba has some sense of the fact that they need to be treated a little bit differently from other areas. So I am not just saying the North needs the attention. There are rural communities now that are pretty desperate in that end. So I look forward to the minister's visit.

Mr. Stefanson: I do not think there really was a question at the end. I appreciate, as well, the comments, and I will work with the member for Thompson on getting to Thompson very soon, maybe as early as next week if that can be put together, depending on Estimates and everything else. Recognizing he is the opposition House leader, he can probably have some input into what happens with all of that.

One other thing I am not sure that he is aware of is that we have a new dean of the Faculty of Medicine. He is a general practitioner, a family physician. I think if he is not the first one in Canada, he is one of the few to serve as a dean of the Faculty of Medicine.

So he certainly brings a certain perspective to the issue. I think we look forward to working with him on these kinds of issues that we are discussing here this afternoon.

I am not surprised that the member for Thompson's survey showed that health care is the No. 1 issue, even recognizing that they have got some specific concerns in Thompson relative to doctors. When I did the budget consultations, certainly health care came through time and time again as one of the main issues on the minds of Manitobans. That is one of the reasons that we were able to significantly increase our funding to health care in this budget by some \$194 million, a 10 percent increase.

Just while I have the floor, Mr. Chairman, the member for Kildonan (Mr. Chomiak) had asked for some various bits of information. One request that he had made was for the tabling of the chairs and the members of the regional health authorities. I am prepared to table that information, and I will continue to table information as we make it available for the member for Kildonan.

I am being repetitive. The member for Kildonan had asked a series of general issues where he had asked for some information to be tabled. I will continue to do that throughout Estimates. I have two documents that he had asked. One is the chairs and the make-up of the regional health authorities. The other one is the listing of the grants and the transfer payments for 1999-2000. I have three copies of each of these to table here this afternoon.

* (1640)

Mr. Gregory Dewar (Selkirk): I have a couple of questions to the minister related to residents in the Selkirk and the Interlake area who require kidney dialysis. The minister, in the budget or the throne speech, has announced that they are planning on providing more services to individuals in the Interlake who require this service.

I know that I have written to the member for Lac du Bonnet (Mr. Praznik) when he was the Minister of Health in 1997 asking him to provide services at the Selkirk General Hospital. He

responded in July saying at the time that Selkirk did not qualify for a unit. As well, I raised the issue at the general meeting of the regional health authority, which was held in Selkirk late last year. They said at the time that there is a need. They identified a number of individuals in the community that required that service and that they were waiting for funding from the minister's office to proceed. So I would just like to ask the minister today: what is the status of those services and when can the residents of Selkirk see a dialysis unit in their community?

Mr. Stefanson: Mr. Chairman, I am sure the member for Selkirk had an opportunity to see our health facilities capital announcement back on April 16 of 1999. I think that is what he was referring to, in part, with his question. Under the section called Dialysis, there is a provision in this budget for expanding dialysis sites as recommended by the Winnipeg Hospital Authority provincial dialysis program. It says with exact sites and project scope to be determined. I am told that the recommendations will be available to me very shortly on exactly that issue, the sites and the programs, so I am expecting to be able to deal with that very, very soon.

I think this is an opportunity to just highlight that dialysis services have been expanded significantly in the province of Manitoba. They are now provided at 11 sites: the Health Sciences Centre, St. Boniface Hospital, Brandon Regional Health Centre, and local centres like Dauphin, Flin Flon, Morden, Pine Falls, Portage, The Pas, Thompson and Ashern. In fact, if you look at our budget, in the last two years alone, we have increased funding for dialysis services, I believe, by some \$20.4 million, a significant commitment to addressing the very important issue of dialysis and to provide it on a regional basis.

Those are just some of the stats on dialysis services. I certainly could provide the member with a lot more about some of the individual sites, but I think in terms of his very specific question about the community of Selkirk, I am expecting that recommendation very shortly. I would be in a position then to provide information to the communities about what further action will be taken with dialysis services, Mr. Chairman.

Mr. Dewar: I thank the minister for that answer. Could the minister tell us then how many machines he expects will be in operation in the Selkirk Hospital, and exactly when will they be in operation? I have heard that it could be up to a year before we actually have those services operating out of that hospital, so those two specific questions as to how many machines and when will they be in operation.

Mr. Stefanson: I know the honourable member for Selkirk is quite anxious to get more information on this issue, but as I indicated to him, we will be receiving recommendations very shortly. At that point in time, I will be able to come forward and confirm communities and sites.

Obviously, Mr. Chairman, part of that confirmation will also then be the nature of the services in terms of the issues he is asking, the numbers of machines and so on. So I just ask him to be patient for a little while longer, and he will receive further information on the dialysis sites and types of services.

Mr. Dewar: Well, it was in one of the announcements put forward by the government. They spoke about the palliative care units and provincial funding for that. Can the minister enlighten us as to the status of that unit at the Selkirk Hospital?

Mr. Stefanson: I thank the member for Selkirk for that question about a very important service which is just being expanded and enhanced here in the province of Manitoba. To date, individual facilities, to varying degrees, have offered palliative care services, and I certainly will undertake to get further information for the member for Selkirk about the services that are being provided in Selkirk.

* (1650)

What we were able to announce just recently is some increased funding for palliative care. I believe the total allocation was about \$1.2 million. I am certainly prepared to provide additional information, but, if I recall correctly, \$950,000 was allocated to our regional health authorities to put in place palliative care co-ordinators and services right across the province

of Manitoba. Obviously, Interlake will be impacted by that funding and by that support. Again, I will get further information for the member as to the progress that they are making.

So there are really two issues here. There is the palliative care that facilities have already been providing, and I am prepared to get information on what Selkirk has been doing in that area, but there is now the additional funding that is being provided to all of the RHAs to expand this very important service, Mr. Chairman. As well, we have also dedicated capital dollars here in the city of Winnipeg to St. Boniface Hospital for some improvements to their palliative care services. So I will return and provide the member with additional information on this issue.

Mr. Dewar: Mr. Chairman, I would like to ask the minister just a question regarding the Selkirk Mental Health Centre. Is that possible now?

Mr. Stefanson: Well, Mr. Chairman, I do not mind. Obviously, what we are doing, anybody can ask any questions. The agreement with the member for Kildonan (Mr. Chomiak) was again today that the questions would be of a general policy nature, and he expected to get into specific areas, starting, you will recall, I think he said at the subsequent meeting. I do not mind taking any specific questions, but I do not have the staff here with me this afternoon for mental health initiatives. So I would encourage the member to ask the question, but I might need to return with the information.

Mr. Chairperson: I do believe that is what we had agreed to, so if the honourable member would like to ask that line of questioning, if we could wait until we got to that line.

Mr. Dewar: The question regarding the operation of the Selkirk Mental Health Centre, as the minister knows, it is very important in the treatment of mental illness in the province. It is a significant employer in the community of Selkirk as well. There are just concerns raised with me that the government is planning to turn the Selkirk Mental Health Centre into a special operating agency, and that raises a number of concerns for us. Maybe the minister can comment on that. Is that the plan of his

government to operate this centre as a special operating agency or continue operating it as it has over the past?

Mr. Stefanson: The short answer to the question is: no, there is no intention whatsoever to set up the Selkirk Mental Health facility as a special operating agency.

Ms. MaryAnn Mihychuk (St. James): I have two very short and quite specific questions. They relate to the moving of an administrative office on Empress. Is it true that Manitoba Medical is moving from their Empress office?

Mr. Stefanson: I am actually surprised the member for St. James asked me that question or is not aware that actually 599 Empress and 800 Portage Avenue are consolidating in the old Free Press building. That will take place sometime between mid-June, mid-July. The number of employees affected are a little over 500. So that is basically on schedule with that consolidation of those two units into the one unit into the old Free Press building sometime for mid-June to mid-July.

Ms. Mihychuk: There is a parking lot across the street to the east that is along the banks of Omand's Creek. Is that Department of Health, Manitoba Medical? Is that associated with that building? Is that provincial land?

An Honourable Member: He is going to turn that over to the Department of Agriculture.

Ms. Mihychuk: Turn that over to Omand's Creek.

Mr. Stefanson: Yes, that land that the member is referring to is owned by the government of Manitoba, basically administered by the Department of Government Services.

Ms. Mihychuk: Would it be appropriate to perhaps put forward an idea that that would be prime land to go and enhance our green space in the west end? If the province has that ability to free up that space, it would make a difference to that community. I will also raise it with the Department of Urban Affairs, who may have a factor in this, and thank the minister for

providing me the information. Maybe he will do it right now, turn it over.

Mr. Stefanson: I am certainly prepared to pass on the member's comments to the Department of Government Services, who basically administer that property. I did fail to mention, when I talked about the consolidation in the old Free Press building, that again it is just one of many commitments to downtown Winnipeg, the significant renovation of a building that also has some heritage value. Obviously there will now be over 500 employees occupying, utilizing that building and taking advantage of everything that our downtown has to offer.

I think it is a very positive initiative all around in terms of utilizing that fine, old building, getting more employees downtown and consolidating the health care employees into one location.

Ms. Diane McGifford (Osborne): I do have a series of questions for the minister, but maybe I will start by asking something very straightforward, since we only have a little bit of time left.

I wanted to ask a question about the Health Links line from Misericordia Hospital. The reason I am asking it is that recently I had a call from a woman who told me that she had been trying to access that line for about an hour and a half. I understand she could have left her phone number and that call could have been returned, but confidentiality might sometimes be an issue, and in this case it was an issue. I wonder if it is standard for it to take an hour and a half or if this was exceptional or if the minister could enlighten me in any way on this concern.

Mr. Stefanson: I thank the member for Osborne. I am not aware of any excessive delays. We had a chance to be at Misericordia a few weeks back. We went to the Health Links area. The people working in that area are extremely positive about the service they are providing. I am told that the volumes of utilization do continue to grow in that area.

I would hope that this was an unusual circumstance, but I will look into the whole issue of whether or not there are any waiting times,

whether there are any undue waiting times. Then we will as well review the issue that is raised about confidentiality, that in some cases people maybe do not want to leave their name, but that sounds like an unusual circumstance of what I know of how Health Links is working, but we will certainly look into it and report back to the member.

Ms. McGifford: I wonder if the minister could provide us with any details about the Health Links line, for example, how frequently it is accessed and how many people work there. I would be interested in having that information.

Mr. Stefanson: I appreciate that question. It really ties in, in part, to her previous question. When I return with the other information I have indicated I will, I will also return with information on the overall utilization of the Health Links line.

Mr. Chairperson: The hour being five o'clock, committee rise. It is time for private members' hour.

Call in the Speaker.

* (1700)

IN SESSION

PRIVATE MEMBERS' BUSINESS

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

PROPOSED RESOLUTIONS

Res. 8—Extension of Compensation to Include all Victims of Hepatitis C, Acquired Through Contaminated Blood or Blood Products

Ms. Diane McGifford (Osborne): Madam Speaker, I move, seconded by the member for Broadway (Mr. Santos),

"WHEREAS the victims of contaminated blood and their families have suffered, and continue to suffer, human tragedy, pain, and a

variety of losses as a result of the use of blood or blood products; and

"WHEREAS the Provincial Government has a responsibility to reduce the repercussions of the tragedy, implement compassionate social policy, and adopt a leadership position nationally; and

"WHEREAS the dates – January 1, 1986 to December 31, 1991 – adopted by Federal Health Minister Alan Rock as the time frame for compensation to victims of Hepatitis C acquired as a result of contaminated blood or blood products are, Mr. Rock's position to the contrary, both artificial and arbitrary since tests to detect Hepatitis C were available and were used in other jurisdictions long before 1986; and

"WHEREAS the Provincial Government supports this artificial and arbitrary time frame; and

"WHEREAS the Canadian Blood Committee, of which Manitoba was an active member, made a decision in Winnipeg on May 19, 1989 to destroy all records of its 1982 to 1989 meetings, so eradicating critical information, and possibly incriminating evidence, on its positions on, decisions about, and knowledge of contaminated blood and its victims; and

"WHEREAS Justice Horace Krever in the final Report of *The Inquiry into the Canadian Blood System* both recognizes and identifies the many responsibilities of provincial Governments in the contaminated blood scandal; and

"WHEREAS the first recommendation of Justice Krever's report states, "It is recommended that, without delay, the provinces and territories devise statutory no-fault schemes for compensating persons who suffer serious, adverse consequences as a result of the administration of blood components or blood products,"; and

"WHEREAS both the Ontario and Quebec Provincial Governments have recognized their responsibilities in these matters, but the Manitoba Government has failed to do so.

"THEREFORE BE IT RESOLVED that the Legislative Assembly of Manitoba urge the Provincial Government to consider adopting a no-fault compensation plan which would cover all victims of Hepatitis C, infected as a result of receiving contaminated blood or blood products; and

"BE IT FURTHER RESOLVED that this Assembly urge the Provincial Government to consider developing this plan so that primary and secondary victims are included, without compromising other social benefits; access to care and equitable benefits are established according to the severity of the disease; and individuals and groups representing victims are fully consulted; and

"BE IT FURTHER RESOLVED that this Assembly urge the Provincial Government to take full advantage of all funding offered by the Federal Government, including any funds designated for the direct care and treatment of victims of Hepatitis C."

Motion presented.

Ms. McGifford: Madam Speaker, it gives me great pleasure to address this resolution today. Not only have I dealt with the issue of hepatitis C many times before in this House, but it certainly is an issue that I hold near and dear to my heart, having become a friend of many of the persons who are living with hepatitis C and having become an acquaintance of many, well, of a few of those people who do not qualify for the compensation package.

I am familiar with the pain and with the grief and with the destitution and poverty that characterize their lives, so I am happy to put this resolution before the House, and I certainly hope that we will have the opportunity to pass this resolution today, Madam Speaker.

I think the resolution itself puts the case very succinctly. It addresses the issue of the arbitrary time frame, and I will come back to that. It addresses the eradication of critical information, information which was destroyed by the Canadian Blood Committee. In fact, the decision was taken at a meeting held in our city. The resolution points out Justice Horace

Krever's report, his report entitled *The Inquiry into the Canadian Blood System*, and it also points out his recognition of government responsibility in cases of contaminated blood. As well, the resolution indicates that Ontario and Quebec, have or will, are pledged to extend the compensation package, unlike Manitoba. I suppose I should add, unlike many other jurisdictions in Canada, to their shame.

This resolution resolves that the Manitoba government, this government consider extending compensation to cover all victims of hepatitis C. The resolution refers, of course, to those who were infected as a result of contaminated blood or blood products. There are many victims of hepatitis C who were not infected this way, and I do not think we need to go into a discussion of the various ways in which people can acquire hepatitis C. This resolution directs its attention to those individuals who were infected with hepatitis C as a result of contaminated blood or blood product.

The point that I am making here, Madam Speaker, is that the resolution presents logical arguments which outline government responsibility to its citizens, but, on the other hand, I think it is clear, and I would like to say here and on the record, the most important reasons for extending compensation to people with hepatitis C, again acquired through contaminated blood, are not legalistic, but rather they are moral. We should extend compensation on compassionate grounds, because it is the right thing to do. Most Canadians believe it is the right thing to do, and most Manitobans believe it is the right thing to do.

* (1710)

Compensation for all is sound for a whole host of reasons: first of all, it is medically sound; secondly, it is legally compelling; thirdly, compensation was necessitated by government failure. It is a financially sound decision. To extend compensation would not be a threat to medicare, as the previous Minister of Health was fond of saying during our debates in Estimates and in Question Period last spring, when this was an issue in the news every day. Extending compensation would not set a precedent. Quite clearly, it is a socially just thing to do, and I

would like to add again, it was endorsed by Justice Horace Krever in his very lengthy report.

Let me add to these reasons. I want to address the issue of compensation and the fact that it is not a threat to medicare. Again, I want to address it because the members opposite, particularly the Minister of Health, were very fond of saying it was a threat to health care. He raised this bugaboo ad nauseam in Estimates and in the House, but this kind of compensation is an emergency one-time budget item. It will not bankrupt this government; it will not bankrupt the federal government to extend compensation.

The numbers of individuals who were infected before 1986 in Manitoba are extremely small, so the compensation amount is likely to be small. I was speaking to people in the community today, and they figured that, if the number was a hundred, that was probably high and it is much more likely to be less. Most people who were infected with hepatitis C as a result of contaminated blood before 1986 are no longer alive. They are no longer alive because they probably died from the disease that necessitated their transfusion in the first place. Those individuals who are alive probably received their contaminated blood because of surgery, so they were transfused in that way.

You know, I think it is very interesting that Ontario is willing to extend compensation. I am told that recently Ontario offered a preliminary package of \$10,000 to each person who fell outside the January 1, 1986, to December 31, 1991 window, and the Ontario government set aside \$100 million for this initial package. Reports are, Madam Speaker, that the pot was barely touched. Again, one of the reasons is that many of those individuals infected with hepatitis C before 1986 have already died from the disease that necessitated their transfusion, so clearly if these individuals are dead, they do not qualify for compensation.

Awarding compensation to all those infected who acquired hepatitis C, again, as a result of contaminated blood, Madam Speaker, would not be a precedent-setting compensatory decision. The Minister of Health previously argued last year. Some of us might remember, he was very zealous to deny compensation. He previously

argued that such a compensation package, extending compensation without regard to the dates, would open the floodgates, he said, and it would drown us all in litigation, so it was claimed. Of course, his logic was, and continues to be, faulty. Compensation on blood injury does not open the floodgates to compensation for all kinds of medical mishap.

Here I want to underline blood injury and medical mishap. Medical mishaps are usually covered by private insurance. I want to note that a blood injury is a regulatory and industrial failure. It is not a medical misadventure. It is not the doctor who ordered the blood transfusion who is responsible, but the bodies who are responsible for the blood in the first place. So it does not open the floodgates to all kinds of medical misadventures, litigation. The minister was wrong last year and is wrong this year.

Madam Speaker, I want to point out that the federal government has already set some kind of precedent, if we want to talk about precedents for compensation for citizens harmed by the regulatory and manufacturing failures, that is, who received blood borne diseases. I am referring to the case of those who acquired HIV through contaminated blood. There is a compensation package. This province has sanctioned a compensation package for those who received HIV as a result of blood borne disease, so it has happened before. I do not know why it could not happen in this particular emergency.

I want to indicate as well that in these cases past compensation was not dependent on time, Madam Speaker. All individuals affected with HIV as a result of contaminated blood were compensated even before the time HIV testing was available, and yet this government wants to deny compensation to those people who were infected before 1986 on the grounds, and they are very flimsy grounds, because it is a very arguable and arbitrary point, but they want to deny compensation on the grounds that no testing was available, and, therefore, they are not responsible for individuals acquiring hepatitis C as a result of contaminated blood.

I want to add here, Madam Speaker, that Dr. Michelle Brille-Edwards, who is an expert on hepatitis C and on blood borne illnesses, writes,

and I want to quote her if I might: The governments repeatedly portray the situation falsely, pretending that there was a brand-new hepatitis test in 1986, used promptly in the U.S. and not used in Canada. This is done to create the illusion that the government's liability began only in 1986. The facts of the matter are vastly different. The test in question was an old test called ALT developed in 1958. ALT has been in everyday clinical laboratory uses since the 1960s to gauge liver function. People with hepatitis have abnormally high level test results, so can people with other diseases.

She goes on, and I would certainly like to continue quoting her, but I realize that my time is short. The point is, Madam Speaker, that according to this expert we knew all along that infectious hepatitis was transferred and was transferable through blood transfusions. The federal Liberals are certainly culpable, extremely culpable in this matter. They are the ones who set the abysmally low standard.

Anyway, this government, along with the federal Liberals, refuses to extend compensation, although many medical authorities say, and blood experts say, that they knew all along that hepatitis could be transferred through blood.

* (1720)

Madam Speaker, I wanted to spend some time tracing out the history of the hepatitis C compensation issue. I see time is not on my side, so I will not do this. But I do want to say that I have made the point that the Liberal position was quite abysmal. I do want to say that the work that we have done in this House, that the opposition has done in this House, has not been well received. Every motion we have moved, every suggestion we have made, every choice we have offered, every alternative we put forward—and members opposite are always asking for ideas. We have given idea after idea after idea, and they have all been rejected.

The former Minister of Health was adamant in rejecting any idea of extending compensation. Now we have a new Health minister, and I think it is interesting that we do. I think it is to his advantage that he has the opportunity today to set the record straight, to do what Manitobans

want. Madam Speaker, 85 percent of Manitobans do want compensation to be extended, so I think he is very fortunate that he has the opportunity today to vote in favour of this resolution, to do the right thing, to do the moral thing, to do the compassionate thing, to do the caring thing, to set a standard in leadership for some of the other provinces which have not yet come on board.

So I ask the minister to consider today supporting this resolution. Now I am not that hopeful, because it was just a week ago when we asked the minister a series of questions, and I must confess that I was quite disappointed in his responses to the hepatitis questions as last week.

For example, he could not explain why people living with hepatitis C had to wait about a year for an appointment. He could not explain why one victim was left in the hallway. The only kind of medical attention that person could get was hallway medicine. He refused to follow the example of the province of Quebec and access Manitoba's share of the federal government's \$300-million transfer and use this fund to extend compensation, but he has one chance to change his mind—

Madam Speaker: Order, please. The honourable member's time has expired.

Mrs. Myrna Driedger (Charleswood): I am pleased to rise today in response to the private member's resolution on hepatitis C. Madam Speaker, allow me to begin my remarks this afternoon by expressing once again our government's regret that the victims of contaminated blood and their families have had to endure their suffering and loss.

Today we can only take steps to prevent a reoccurrence and to respond to the circumstances of those who have already been negatively affected. In addressing this resolution today, I want to begin by speaking to the events that gave rise to the situation. Then I intend to outline what actions our government is taking to prevent similar circumstances from happening again and to provide assistance to those who have been affected by this tragedy.

Madam Speaker, direct testing for the presence of the hepatitis C virus was fully

implemented in Canada by June 30, 1990. All blood donors have been screened for hepatitis C from mid-1992 with a highly sensitive test by the Canadian Red Cross Society and more recently by the Canadian Blood Services.

The federal and provincial governments are negotiating an assistance package for individuals who were infected by the blood system between 1986 and 1990. The federal-provincial governments are proposing to provide finances for health services, not direct financial assistance for those individuals pre-1986 and post-1990 who were infected with hepatitis C.

This is based on the findings of the Krever inquiry, and because no direct tests were available prior to 1986, as well as the fact that the U.S.A. only adopted surrogate tests in 1986. In late 1997, the federal, provincial and territorial ministers of Health determined that the Canadian Red Cross Society or CRCS Blood Services would be transferred to a new blood agency, the Canadian Blood Services, otherwise known as CBS.

In addition, the role of the Canadian Blood Agency was also integrated into Canadian Blood Services. The work of the transition team was complete by the end of September 1998, and the executive management team was fully in place by October 1998. The Krever inquiry recommended that the Canadian blood supply system should be governed by five basic principles. The first principle, blood is a public resource; Principle No. 2: Donors of blood and plasma should not be paid for their donations, except in rare circumstances; Principle No. 3: Whole blood, plasma and platelets must be collected in sufficient quantities in Canada to meet domestic needs for blood components and blood products; Principle No. 4: Canadians should have free and universal access to blood products and blood components; and Principle No. 5: Safety of the blood supply system is paramount.

With these basic but fundamental principles and values in mind, the mission of CBS was developed. This mission statement, which is fully endorsed and supported by Manitoba, is that the Canadian Blood Services provides a safe, secure, reliable and cost-effective supply of blood, blood products and their alternatives, and

is committed to operating Canada's independent national blood supply system in a manner that nurtures the trust, commitment and confidence of all Canadians.

I would like now to discuss health initiatives in Manitoba because this is an issue that we do take very seriously, and I as a nurse am very aware of hepatitis C and its effects. The first health initiative that I would like to talk about is that hepatitis C is now reportable in Manitoba. Justice Krever, in the Commission of Inquiry on the Blood System in Canada, has recommended that hepatitis C be reportable and that physicians comply with reporting this infection. As of January 1998, hepatitis C is now reportable in Manitoba under regulations of The Public Health Act. Once diagnosed, this will enable those so infected with the hepatitis C virus to receive early consultation, treatment and care.

The second initiative deals with surveillance for hepatitis. The Laboratory Centre for Disease Control or LCDC of Health Canada is formulating an action plan to develop sentinel surveillance sites for comprehensive integrated surveillance of hepatitis in Canada. Winnipeg is one of a few centres in Canada that can offer integrated public health and clinical surveillance. Manitoba is actively pursuing with the federal government the idea of having Winnipeg as one of these sentinel sites. If successful, this initiative would enhance services provided to hepatitis patients throughout Manitoba.

A third health initiative in Manitoba involves the viral hepatitis investigation unit. Manitoba Health will continue to work with the Winnipeg Hospital Authority and the Winnipeg Community and Long Term Care Authority and the viral hepatitis investigation unit to develop a comprehensive care model for hepatitis C, inclusive of hepatologist training. This could result in additional hepatitis clinics at the Health Sciences Centre and/or additional community-based nurses in the Winnipeg Community and Long Term Care Authority to determine risk factors, monitor cases, counsel and provide education to minimize liver damage.

The fourth health initiative in Manitoba includes discussion on an additional hepatologist. It is expected that additional

hepatology expertise will be required to manage the increasing number of cases with increasingly sophisticated antiviral drugs. Manitoba Health has recently approved funding of \$150,000 for an additional hepatologist, a physician specializing in the diagnosis and treatment of hepatitis. There is currently a shortage of hepatologists in Canada. Consequently, recruitment may be difficult, but our commitment remains, and the government will work with the WHA in acquiring these medical resources.

* (1730)

The fifth health care initiative in Manitoba involves enhanced pharmacological treatment. New drug treatment regimes will continue to be introduced for patients with the hepatitis C virus. Manitoba, through the Drug Standards and Therapeutics Committee, will continue to monitor the availability, effectiveness, and appropriateness for coverage under Pharmacare.

I will now address the issue of financial assistance, compensation and the settlement of January 1, 1986, to July 1, 1990, claims. On March 27, 1998, federal-provincial-territorial ministers of Health announced a \$1.1-billion fund to provide financial assistance to Canadians infected with hepatitis C through the Canadian blood system between January 1, 1986, and July 1, 1990.

This package also included assistance for individuals who were infected by a partner or parent who was infected during this period. Applicants must demonstrate that they are HCV infected or hepatitis C virus infected. They must then show that they were transfused or received blood products during the period January 1, 1986, and July 1, 1990, and that they have no previous history of intravenous drug use.

Now, to look back at look-back programs for hepatitis C. Individuals may have been infected with the hepatitis C virus through exposure to blood and blood products without recognizing that they were infected. The federal government is encouraging look-back programs to identify individuals who received blood prior to screening with second generation hepatitis C tests in 1992. For individuals suspected of being infected with the hepatitis C virus, referral to

physicians for additional evaluation, counselling and treatment care would be initiated.

Looking now at the pre-1986/post-1990 group. Individuals infected with hepatitis C through the blood system before 1986 and after 1990 are not included in any offer of financial assistance. On September 18, 1998, the federal Minister of Health proposed a \$300-million transfer to provinces and territories over 20 years to help pay for enhanced health services for the treatment of hepatitis C, especially for those infected before January 1, 1986, and after July 1, 1990. Manitoba's allocation under the federal proposal is estimated at \$7.8 million over this 20-year period.

An undertaking that spells out the shared objectives and terms under which these transfers would occur has been under discussion since September of 1998. Manitoba has indicated to the federal government that we are prepared to support and sign this undertaking. Both the Manitoba and federal governments are committed to ensuring that individuals infected with hepatitis C from blood have appropriate access to the therapeutic health care services they require, a care, not cash, approach. Manitoba remains focused on and committed to care for these individuals and all Manitobans, not cash.

Madam Speaker, to conclude, Manitoba is a committed member and partner of the Canadian Blood Services and will continue to be an active voice regarding the provision of safe and appropriate blood services for Manitobans specifically. Manitoba was a consenting partner to the March 1, 1998, \$1.1-billion announcement to provide financial assistance to Canadians infected with hepatitis C through the Canadian blood system between January 1, 1986, and July 1, 1990. Our position has not changed and our government continues to support this endeavour.

The Manitoba government is committed to ensuring that individuals infected with hepatitis C from blood have appropriate access to the therapeutic health care services they require and will continue to support care, not cash, initiatives.

Manitoba will continue to work towards enhancing our position in regard to hepatitis C

surveillance and the development of a comprehensive integrated hepatitis program which would optimize prevention, education, care, research and support for hepatitis patients in this province. We are committed, Madam Speaker, and I think our commitment shows in the efforts that are being made here in Manitoba. Thank you very much.

Mr. Gerry McAlpine (Sturgeon Creek): Madam Speaker, I was actually hoping that the honourable members over there would have some support to speak to this very important resolution. I guess there are members over there who believe that their only duty here is to come here to vote and not to speak.

But, Madam Speaker, these important issues do warrant very serious consideration and debate. It is my pleasure, and I appreciate the opportunity to rise before the members of this House to speak to the resolution for those infected with hepatitis C through contaminated blood products.

First, I wish to express to those who have been infected and to their families my regret for the suffering that they have endured. It certainly is something that places these people in a helpless position. Tragedies such as this are probably the most difficult issues in many cases that we face as politicians in terms of our understanding of these challenges, and the control that we have is somewhat limited in terms of what is best for the people who are affected by this.

It is unfortunate, Madam Speaker, that this does talk more about money, and money does not always fix these very serious issues. For obvious reasons, it is a very emotional issue. At the same time, we as legislators must continue to approach the issue with compassion as well as rational judgment. I think that the honourable members across the way who have an opportunity to address this and speak to this issue have chosen not to, other than the member who brings the resolution forward.

I think it is incumbent upon all of them to put their ideas forward, so that we have an understanding of where they are coming from, because it is more than, as I indicated, Madam

Speaker, just putting money to this, because money is not necessarily going to fix that. We have noticed that in our health care budgets, that we have increased as a government and as a province by increasing our health care budget by hundreds of millions of dollars ever since we came into government, and putting money into it does not always correct the wrongs that have been created and the challenges that the public meets and especially this very important issue with hepatitis C.

In the honourable member's resolution, the honourable member for Osborne (Ms. McGifford) includes a clause that reads: Whereas the provincial government has a responsibility to reduce the repercussions of the tragedy, implement compassionate social policy and adopt a leadership position nationally.

Madam Speaker, I would like to comment for a few minutes on this clause, because I believe that what she describes here is exactly what the government of this province has done in addressing the issue. I think in many respects we have covered that aspect, and the honourable member fails to recognize that and put those comments on the record.

* (1740)

I think that she has looked at the negative side of this, and she says that she is offering suggestions. But I think there should be some consideration given to what has already been done for this issue here. Our government is working to reduce the repercussions of this tragedy, the reoccurrence, by taking several steps to prevent that reoccurrence if this should happen again and to prevent similar circumstances from arising again in the future.

As the honourable member for Charleswood (Mrs. Driedger) has outlined, the Province of Manitoba has supported the transfer of blood services formerly handled by their Canadian Red Cross Society to the Canadian Blood Services. We have also fully endorsed the mission of the Canadian Blood Services which states that the CBS provides a safe, secure, reliable and cost-effective supply of blood, blood products and their alternatives, and it is committed to operating Canada's independent national blood

supply system in a manner that nurtures the trust, the commitment and the confidence of all Canadians. Madam Speaker, as a blood donor myself, I often think about the consequences of that very issue, that very concern, and I think that those who are making that contribution should not take that lightly because of the effects that it can have on people and recipients.

When you are giving blood, it takes about 10 or 15 minutes usually, and it gives you some time to think of the contribution that you are making and what an important, valued contribution that is to those who are in desperate need. But if that blood happens to be tainted, then that is certainly not what we want to deal with here. So it is so important that the Blood Services agency and anybody that is participating with them should ensure that that blood is uncontaminated.

Madam Speaker, I think that when we talk about the Canadian Blood Services as an agency, I think it also begs the question that with this resolution the honourable member for Osborne (Ms. McGifford) is suggesting that we as a government, it is our responsibility. I think that the Canadian Blood Services agency is to deal with everybody across the country. That is a federal responsibility. That was implemented and imposed by the federal government with their direction and discretion.

I think that from my point of view, I think we as a government and the fact that we have made major contributions to the health care budget, these patients in Manitoba prior to 1986 fall within that scope and will get health care benefits the same as any other resident, although I certainly have a considerable amount of compassion for them, and I look on that with great seriousness. I think all we have to do is to imagine one of our own family members being affected by something like that, and that would maybe bring this message home to a stronger degree and maybe not necessarily place any more importance on it, but I think the reality would be a lot greater.

But, Madam Speaker, I think that with the fact that the federal government has continued to cut back on our transfer payments, I think the provincial government has been very honourable

in terms of the contributions that we have made. For us to be able to do certain things and to do more, I think we are asking in some respects a little bit of the impossible, to take from one pocket and put it into the other.

I think that the federal government has a responsibility that is owed to all Canadians and especially the people in Manitoba and across this country to ensure that those people, after due diligence and examination of the whole aspect, are compensated if that is the decision of the governments across the country. But I do believe that this government, which I have been a part of for the past nine years, has made a generous contribution and will continue to make a generous contribution. This is something that, if there is something that is overlooked here, I think that we should maybe consider what other aspects that we can do with this.

Another step that we have taken to reduce any further infections of hepatitis C, Madam Speaker, and to help those who are already infected is to make hepatitis C reportable in Manitoba under regulations of The Public Health Act, and this will allow infected individuals to receive early consultation and treatment. That is really important from the aspect that it puts an onus on the medical profession. Too often we as legislators are asked to do something based on information that in many cases we do not have any knowledge or experience with. We rely on the medical profession to give us their best advice, and their advice is not always depending on the amount of research and consideration that is given.

In some cases, they do not report these incidents, for whatever reason. There are lots of these people that will, in many cases, regardless of what you do, whether you are talking hepatitis C or any other aspect in terms of diagnosis, they fall through the cracks. The results of that should not fall on government. That is the point that I am making here, but the honourable member, in her resolution, wants it to be all encompassing, and that is not reality. Governments are not in a position to do that. You know, there are certain things that we as government can do.

Manitoba Health is working with the Winnipeg Hospital Authority and the Winnipeg

Community and Long Term Care Authority and the viral hepatitis investigation unit to develop a comprehensive care model for hepatitis C. We have approved funding of \$150,000 for an additional hepatologist in Manitoba, and new drug treatments will continue to be introduced to patients with the hepatitis C virus.

Madam Speaker, I would also suggest that patients with the hepatitis look at other alternatives that may be of a supportive nature whenever possible. Those are things that they can do in terms of their own—nobody knows their own circumstances or feels their own circumstances better than the people who are living with it. I think it is really important that they are in tune with how they feel and what makes them feel good and what makes them feel bad, what they realize is a benefit, rather than relying on the doctor to say to them, well, you look good today or you feel good today and this is good or that is good. I think it is really incumbent upon every one of us to do that, not only those who have hepatitis, diagnosed as hepatitis C.

All of these steps will help us to better manage and to give high-quality care and treatment to Manitobans infected with hepatitis C. Providing the best possible care is how our government is implementing compassionate social policy for those infected with this virus in Manitoba. We realize that the greatest need for those with hepatitis C is to receive immediate, ongoing care and treatment, and our government is 100 percent committed to providing the best possible care available for hepatitis C. This is an approach we share with the federal government, and we continue to work together to finalize the proposed 20-year, \$300-million program of transfer payments from the federal government to the provinces to support enhanced health services for the treatment of hepatitis C.

* (1750)

Madam Speaker, our government is also actively pursuing the national role in monitoring hepatitis C by negotiating with the federal government to have Winnipeg become a sentinel surveillance site for comprehensive integrated surveillance of hepatitis C in Canada. I think our government recognizes a responsibility to

provide this financial compensation to those who were infected January 1, 1986, to July 1, 1990, through contaminated blood products. I think that, contrary to what the honourable member for Osborne has stated, there is logical reasoning behind the establishment of this time frame.

I see that my time has run out, or do I have some more time? [interjection] Okay. With that I would yield to honourable members across the way to put their words on the record. If they really are committed to this, in support of that, I would ask them to speak on this as well.

Mr. Kevin Lamoureux (Inkster): Madam Speaker, I too just want to put a couple of words on the record on the member for Osborne's resolution. I know the issue of hepatitis C is an issue with which she has been very closely identified over the years and it means a great deal to her. Having said that, I have had the opportunity on different occasions in dealing with this very important issue that really affects the lives of so many Manitobans if not directly through infection but indirectly through families and friends and so forth.

There was a great deal of lobbying that was done a couple of years back as governments of all levels tried to come to grips on how best to deal with this critical issue. When the conclusion was a legal time frame and compensation then was handed out for those that fell within that legal time frame, it seemed to appease a good number of people, but there is absolutely no doubt that a lot of people were left out. At the time, I know I had stood and had asked the government to look at having further compensation to complement the agreement that was signed.

Madam Speaker, being very much aware at the time of the arguments, I would have to do more research in order to comment in any great detail on it. So I do make reference to previous speeches that I have given on this particular issue in hopes that individuals that might choose to read what is being said today will recognize that this is in fact an issue that has been before the Legislature, which many members of the Legislature have had opportunity to be able to comment on. I believe, at least on my part, my

personal part, whenever the opportunity has been there, that I have shared words.

We notice that some provincial governments, in particular the provinces of Ontario and Quebec, have seen fit to provide additional compensation packages. We also note that other provinces have chosen not to have compensation packages. I think that there are at least arguments that can be put forward to have the provincial government of the day relook at this particular issue. We have the Province of Ontario, I believe, that has now had a compensation package in place for a while. So it allows us to get some sort of a gauge in terms of participation from individuals in the province of Ontario, see how that program is in fact working. I think that there is merit for the government of the day to get that sort of an assessment.

I listened as the member for Osborne was speaking on the resolution, and not necessarily wanting to preclude what the national government might be doing today or in the future in regard to those individuals that fall outside of that legal description, but I do take some exception in terms of how the member for Osborne tried to politicize it. Madam Speaker, I think that one has to recognize that it is a very serious issue; and, if one attempts to politicize the issue, we could very easily talk about the lack of compassion from New Democratic administrations, whether it was in B.C. or Roy Romanow who played a critical role in coming up with this particular agreement. So we have to recognize that all three major political parties did, in fact, support that original package.

Now, as provincial legislators, MLAs, we can do what we can to ensure that there is compensation to the best of our abilities in whatever form, and I would suggest that there is a need for us to revisit this issue. I have advocated in the past for a need to look at having additional compensation for individuals that fell out of that area, and I hope that the government will. It would even, I would suggest, Madam Speaker, be a good issue going into the next provincial election. What are the different political parties prepared to say in addressing this issue? I like to believe that no political party owns the issue of high morals, common

sense. We like to think that all of us are caring, compassionate people, and will recognize when there is in fact an injustice, and that, when something can be done, we move towards it.

I know as an MLA, I have had constituents raise the issue with me, and when they do raise the issue, one of the things I do make reference to is the member for Osborne (Ms. McGifford) because I know she is likely one of the more ably minded individuals inside this Chamber in dealing with the hepatitis C, and with that particular issue.

Having said that, I will listen to further debate on this particular issue.

Hon. Darren Praznik (Minister of Highways and Transportation): Madam Speaker, I certainly welcome the opportunity to add some comments on this particular subject. Having been a former Minister of Health and having been minister when the issue was negotiated and discussed, I think, to a great deal across the width and breadth of our country, a long period of time. It was one of those issues in which a host of other issues and some very important, fundamental questions about our health care system were brought to the attention of the public.

Although the member for Osborne (Ms. McGifford) then and now comes forward with a resolution to expand the compensation package that was agreed to initially by all provinces, territorial governments and the national government—and which both the government of Ontario and Quebec took a different course—but all other governments put together this position after many, many months of very hard negotiation between us and with the federal government. Many of the fundamental questions about how we handle matters like this and what degree of insurance in essence that we provide beyond that tort liability for actions in our medical system come to the fore in this debate. What I have noticed in that discussion is that, with the member for Osborne and some of her colleagues in their remarks, there has been an absence of discussion of those very fundamental principles. Yes, many times we think we are doing the right thing to react today, but what we do in one particular area has to also, I think, be

extended to other like situations, if that is what we in fact are going to do.

The difficulty with what the member for Osborne proposes is that other individuals who may not be able to garner the public support as this group has would not be treated the same way under her proposal, would not find—

Madam Speaker: Order, please. When this matter is again before the House, the honourable minister will have 13 minutes remaining.

The hour being 6 p.m., this House is adjourned and stands adjourned until 1:30 p.m. tomorrow (Wednesday).

LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, May 18, 1999

CONTENTS

ROUTINE PROCEEDINGS

Presenting Petitions		Club Regent Mihychuk; Praznik	1420
PR 326 North Upgrading C. Evans	1413	Manitoba Lotteries Corporation Mihychuk; Praznik	1420
Presenting Reports by Standing and Special Committees		Rescom Ventures Inc. Sale; Tweed	1420
Committee of Supply Laurendeau	1413	Ashton; Filmon	1421
Tabling of Reports		Brandon Regional Health Centre L. Evans; Stefanson	1422
'99-2000 Departmental Expenditure Estimates for the Manitoba Seniors Directorate Reimer	1413	Speaker's Ruling Dacquay	1423
Introduction Of Bills		Members' Statements Personal Income Taxes Helwer	1423
Bill 27—The Essential Services Amendment Act Stefanson	1413	Youth News Network Struthers	1423
Oral Questions		Crime Prevention Dyck	1424
City of Winnipeg Paramedics Doer; Stefanson	1414	Grain Transportation Wowchuk	1424
Neurologists Doer; Stefanson	1415	Property Taxes Lamoureux	1425
Reid; Stefanson	1416		
University of Manitoba Reid; Stefanson	1416		
Chomiak; Stefanson	1417		
Government Loan Lamoureux; Tweed	1418		
Flin Flon General Hospital Jennissen; Stefanson	1419		
Patient Air Transportation Jennissen; Stefanson	1419		

ORDERS OF THE DAY

Second Readings

Bill 27—The Essential Services Amendment Act Stefanson	1425
Doer	1426
Kowalski	1427
Ashton	1428
Reid	1430
Lamoureux	1433

Committee Of Supply
(Concurrent Sections)

Education And Training	1436
Industry, Trade and Tourism	1449
Health	1463

Private Members' Business

Proposed Resolutions

Res. 8—Extension of Compensation to
Include all Victims of Hepatitis C,
Acquired Through Contaminated
Blood or Blood Products

McGifford	1479
M. Driedger	1482
McAlpine	1485
Lamoureux	1487
Praznik	1488