



Second Session - Thirty-Sixth Legislature

of the

**Legislative Assembly of Manitoba**

**DEBATES  
and  
PROCEEDINGS**

**(Hansard)**

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**MANITOBA LEGISLATIVE ASSEMBLY**  
**Thirty-Sixth Legislature**

**Members, Constituencies and Political Affiliation**

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BARRETT, Becky	Wellington	N.D.P.
CERILLI, Marianne	Radisson	N.D.P.
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## LEGISLATIVE ASSEMBLY OF MANITOBA

Friday, May 10, 1996

**The House met at 9 a.m.**

**ORDERS OF THE DAY**

(Continued)

**COMMITTEE OF SUPPLY**

(Concurrent Sections)

**ENVIRONMENT**

**Mr. Deputy Chairperson (Ben Sveinson):** Good morning. Will the Committee of Supply please come to order. The committee will be resuming consideration of the Estimates of the Department of Environment. When the committee recessed yesterday afternoon, it had been considering item 1.(b)(1) on page 48. Shall the item pass?

**Mr. Gregory Dewar (Selkirk):** Mr. Chairperson, yesterday we were talking a bit about BFI and the proposed landfill site in Rosser and the concerns that we had regarding the potential contamination of the ground water in that area.

I understand from the licence that there is a requirement of a liner to be used to protect that. Is the minister aware of this type of liner being used elsewhere in any other jurisdictions?

**Hon. Glen Cummings (Minister of Environment):** Just hang on a second. I will get information from the department, but it seems to me that this is a previously used technology. The answer is yes, but if you ask me to give you a list of examples, I could not do it at the moment, but we are well aware that it is used in other sites.

**Mr. Dewar:** Well, can the minister tell us if he is aware of the system being faulty? Are they able to detect any leaks in this system in any other jurisdictions?

**Mr. Cummings:** Well, I guess I have to be a little careful of what I put on the record here in terms of how it relates to the licence, but certainly I am familiar with the paper that was presented at the hearings that talked about the risk factor associated with installing a liner of

this type and whether it would fail at some point in the future or not. I believe that was what directly precipitated the recommendation from the Clean Environment Commission that the level of protection be doubled from the previous presentation of BFI, and that is what is in the licence.

**Mr. Dewar:** Well, I just want to make the comment again that the minister is responsible for the protection of the ground water in that area, and I am concerned, as are many of the constituents in that area. Individuals who live within the proximity of the proposed site are very much concerned about the potential contamination of their ground water supply and of their drinking water supply.

Once again, I would just like to ask the minister, is he guaranteeing us that this contamination will never occur?

**Mr. Cummings:** Well, there is a series of protective mechanisms that are in place to take over in case of any kind of an unknown or unpredicted problem, including a leachate collection and test monitoring holes to make sure that nothing is happening. If there is continuous and ongoing monitoring, then remedial action can be undertaken.

So the concerns that are being raised are legitimate concerns, but I believe that they have been addressed in the licence. But that licence is under appeal, and we will be reviewing concerns to make sure that nothing has been overlooked.

**Mr. Dewar:** I would like to move on to waste reduction and recycling, and so on.

There was a conference. I know the minister attended and I was there. I did miss his opening keynote address on Friday morning. I was at a constituency event in Selkirk, but the title of his address was WRAP Strategy, the Next Steps. Would the minister just enlighten us as to what those next steps are, please?

**Mr. Cummings:** Well, obviously the next steps are to continue to build on the initiatives that we have taken. One of the announcements I made that morning was that

we had agreement on principles of the used oil collection system that might be able to be put in place.

I made the point in my comments that I still believe that education of the public and the ongoing and increasing interest that we believe flows from that will be key to keeping the momentum going in reducing the amount of waste going into landfill. The multimaterial stewardship program and the Used Tire Program have been quite successful, in my view. The acre pesticide container recovery system also seems to have achieved a high level of success.

One of the things that we have to build on and one of the reasons that Manitoba has taken perhaps a more methodical, I prefer to say methodical approach to increasing recycling opportunities and reduction of waste than other jurisdictions, but my critics tend to say, slow, period. But the fact is, we need to develop markets at the same time as we are developing collection capability, and that is very important. The volume drives markets and markets encourage volume if they are in fact profitable. So it is certainly needed to keep all segments of waste reduction moving forward at the same time.

There is a desire on the part of some people to begin to move more aggressively on composting, which is, I guess because I am sort of used to composting and assume that a lot of it goes on out there, maybe I have had less ability to get my mind around the possibilities of this, but there is more and more equipment available out there, for example, to reduce in volume trees, twigs, and yard waste when they come in to the landfill as opposed to putting them in the combustibles, which tends to happen now. So we can chip them and compost them. I guess we will reduce that much more combustion and, certainly, where there are your bigger landfills, we will reduce the volume significantly, just the same as we significantly reduced the volume when we took tires out of the waste stream. Tires are no longer a problem, in my view. I think you would be hard pressed to find a tire buried in the last couple of years in a landfill.

The household hazardous waste, I did not spend a lot of time talking about it at the conference, but certainly it is an issue. The contract, in the short term, has been turned over to Miller Environmental as part of the arrangement in taking over Manitoba Hazardous Waste Corporation, but that is a relatively small contract. The

problem there is that it has been a little difficult to get people to bring in their old paint pails and leave five bucks behind to get rid of their garbage or what they would consider garbage. It is hazardous waste if it is put in the wrong place. So we continue to run free household hazardous waste collection depots based on this contract which is paid through the Department of Environment, but it is an issue that is going to have to be dealt with on more of a long-term basis over the next few years. Some jurisdictions are putting a levy on paints and other commonly used household materials.

The other area we should be putting emphasis on is how many of the independent responsible bodies can we develop out there. We have four, or will have four, in the near future and after a while I think the public has a right to ask, well, how many more of these dedicated funds with independent boards out there can you continue to develop. Even though the model works very well, we may have to amalgamate future requirements when we build on this system.

\* (0910)

I will take the opportunity to say that Finance ministers across the country are increasingly sceptical about dedicated fronts and with good reason, because they tend to be overlooked and sometimes abused in their use, depending on the responsible party that is dealing with them. On the other hand, they are, in my view, a system that the public has a high degree of confidence in and my colleagues, the Finance ministers over the last few years, Mr. Manness and Mr. Stefanson, have agreed that these systems, because of the credibility that they present to the public, are areas where dedicated funding can be established and effectively used to run a system. It is a system that has its limitations in terms of how big and how far we let it grow, I suppose.

I would like to indicate that other jurisdictions are looking, particularly at the tire board concept that we have here, with particular envy. Manitoba is probably the only jurisdiction that can claim close to a hundred percent removal of the tires from the waste stream. I think I mentioned yesterday that half of them may still be going for a heat or energy recovery, but nevertheless we have been able to encourage the development of a local industry and that local industry is now beginning to franchise, if you will, its technology into other

jurisdictions. But at the governmental level we have had a number of jurisdictions that have reviewed and are looking to do something similar to what we are doing in tires.

By the same token, we are looking at other jurisdictions and what is happening with used oil. B.C. has a complete used oil collection system, probably far too elaborate to be repeated here, and it is based on a refining and use for the oil. We are attempting to learn from them, but we are also attempting to co-operate with Saskatchewan and Alberta to develop a parallel system across all three prairie provinces. So there will be a lot of used oil come on stream at about the same time, and that hopefully will lead to some development of, if not refining, recycling or better end use for the oil than we perhaps have today, but we are looking at a commonality of a levy because we cannot have a variable levy across the prairie provinces on an item like that.

Really, what I also wanted to convey at that time was that the system is entirely built on the concept that the local authorities are very often the best ones to take the lead responsibility and want to express a good deal of appreciation for what had been done across the province.

It seems that I am very often out of step with the City of Winnipeg, but I can claim a very high degree of co-operation and enthusiasm in the municipalities across the rest of the province. Unfortunately, the multimaterial recycling program in Winnipeg has always been tied to a strategy around BFI, and we just finished spending most of an hour talking about that yesterday, so the member is well aware of those implications.

This is our largest jurisdiction. The potential for collection of recyclables in the city is enormous. The door-to-door program is just I think starting to hit its stride, the household pickup, curbside, but considerable frustration, and I touched on this at Portage but did not spend a lot of time on it, that we do not have a program for the multifamily dwellings.

I guess that is why I was pleased to see yesterday an announcement from Urban Affairs that they are signing up a red box collection system with James Zonnefeld for a number of their units. The city has been unwilling to run a pilot in this area although they began to make some moves recently. I want to encourage them to continue

with that, because I think the multifamily dwellings may in fact be very profitable.

Mr. Chairman, I think I will just leave it there.

**Mr. Dewar:** The minister mentioned the used oil program that they are contemplating. You mentioned the levy. How do you envision that levy to be charged?

**Mr. Cummings:** We have a broad-based consultation committee, industry, municipal, the environment community is represented by the Recycling Council. The Department of Environment obviously is represented and is facilitating it. There is significant industry representation on the committee actually.

I guess I cannot make an announcement on how this is likely to be done. My preference is that it would be a levy that is included in the price and run by the industry, but it has to be accountable. As the member well knows, I ran afoul of the beverage container industry when they wanted—there was considerable disagreement and in fact some encouragement by the consumers association and others that the levy be a clearly marked add-on type of levy.

There are lots of collection systems out there that are run in other ways. This system may be one that we can basically have the industry take responsibility for the stewardship, run the program, but they will have to run it on the basis where there is an open door to the input on the management and the scrutiny of the funds and how they are allocated, and that I guess will be the subject of further discussion. It might end up being something altogether different. I just stated what my preference would be, but I am trying very hard to work with the consultative process.

**Mr. Dewar:** The subheading for the conference is titled The 50 Percent Solution. How far are we along as a province to meet that 50 percent waste reduction target?

**Mr. Cummings:** We are 50 percent there. No, the department informs me that our best figures show that it would be—we are halfway there. I have to say that I disagree to some extent. I think we are doing even better than that in some areas, probably not in total, but certainly in some areas, some municipalities are indicating that they have 70 percent reduction in the

volume coming to their landfill since they have had an educational and promotional program in their jurisdiction to encourage recycling. They are not getting 70 percent of their volume reduced by recycling but just simply getting the people to think about what they are doing makes so much difference.

Yard waste becomes an obvious one. When you have closed your landfill and all you have is a dumpster, then you start looking carefully at what you are doing with your yard waste. There is no reason that most of the yard waste cannot be reused onsite or handled in a different way. The reduction of tires out of the landfill, that is an enormous volume. I am hopeful that we will hit—we have another five years pretty well to reduce by another 25 percent.

I would make this one observation, however. The department, and rightfully so, encouraged me to have more funds allocated so that we could actually judge more carefully, by surveys and so on, how we were doing on the volumes. I guess my concern was more of a practical one. If we have some money to spend, let us spend it on the programs and keeping things moving, and we will use other methods to try and determine the reduction of volumes. But I would be the first to admit that we, by my own hand, have probably limited our ability to say precisely what the volume reduction is.

**Mr. Dewar:** Could you tell me then, in terms of the volume, what was the volume of waste generated in 1988? The 50 percent is based upon 1988 figures.

\* (0920)

**Mr. Cummings:** I think the Fenton report had—the original WRAP report, Dr. Fenton used numbers, but I do not think we have the number here. If we get it in the next few minutes, I will give it to you.

**Mr. Dewar:** I am just interested in finding out how much is generated now and how much—I guess by the year 2000 your hope is to have that reduced by half. I am just interested in hearing the actual figures in terms of waste generated.

**Mr. Cummings:** One area where there is an interesting development is in commercial waste around packaging, commercial/household. Delivery of certain items is still

heavily packaged. The national packaging protocol calls for changes, and they claim that they have met a number of the objectives that they laid out for themselves. They measure their volume of waste by weight, so it makes quite a difference, waste versus volume. Stretch wrap is obviously a lot lighter, but some of the products, cardboard in particular, the use of it is not going to go down.

I use the example of shipping cupboards, for example, and international competition. You will see semitrailers rolling from Canada all across the United States, producing furniture, cupboards and those sorts of things, and I think we know in North American society, you are not going to accept anything that is damaged except at a dramatic discount. So packaging has its value on the other side, reduced freight, better consumer acceptance and all of those things, but cardboard packaging, I do not think, has gone down, while at the same time the industry is saying that by weight they have met a lot of their objectives. I guess that highlights the idea that economics to a considerable extent will drive this. Getting the weight down saves freight and saves money, so there is a combination.

I should have known this figure on a per capita basis, we believe that we have gone from a thousand kilograms in 1989 per household down to 790. I suppose the number of households are probably up a bit so 790 probably reflects that.

**Mr. Dewar:** You mentioned the tires. A number of years ago there was, I assume they are still interested in setting up a plant in Selkirk to recycle tires or, actually, to extract the energy from tires. Jentan, I believe, is the name. Has that company applied for a licence? Maybe you can just tell us the status of that company.

**Mr. Cummings:** They are in the early stages of licensing. The department informs me they have asked for a list of, I believe, 23 more items to them to provide information on as part of that. To be fair, one of the things that has always been of concern around this project is that originally, and I cannot state what their position might be today, but originally there was an issue around availability of tires and whether they would actually be able to put the technology in place and supply a sufficient level of tires or whether they would have to go back to

traditional forms of energy on an ongoing basis for a big percentage of the time.

I do not think the concerns were so much environmental as they were from a business plan as well and their interaction with I, T and T. I am not completely familiar with but there have always been some questions raised about the technology. I think as the department has been willing to treat it straight up, just meet the standards and the economics of it, the company would have to deal with it. It is not our responsibility to try and second guess them on the economics of it.

That original discussion was between Jentan and the tire board, not even with the department. The tire board indicated that the tires were up for competitive bidding. We are not in the business of giving anybody preferential treatment in terms of contracting the tires. They bid up. In fact, we provide a central registry, I guess, of information as to where they might contact people to get the tires, but the way the system works is that the present users collect and redistribute the tires and it is the end user who interfaces with the tire board. In other words, the Winkler operation, after they have processed and can prove they have processed a certain number of tires, are reimbursed at the higher level, \$2.80 or something like that—\$2.50. But where the tires go for combustion it is around a dollar. I mean, we do not pay as much for combustion, and I think that has also been a source of frustration for Jentan, and they might have to bring the tires in from outside of the province to keep a sufficient supply, frankly.

**Mr. Dewar:** Mr. Chairman, we are all paying the 2-cent levy on beverage containers. What is the status of that fund? Is there a surplus now, I believe?

**Mr. Cummings:** Yes, there is.

**Mr. Dewar:** Well, what is that surplus at the moment?

**Mr. Cummings:** About \$3 million, but there may be a \$2-million outstanding debt against it if the city puts in a claim for the level that we believe they might be doing.

**Mr. Dewar:** So you are speculating that the city may be required to draw on that fund. As you are aware, there were a number of concerns raised by the chair of the civic works and operations committee. There was a bit of a

squabble between yourself and the city in the media recently. Can you explain or give us some background as to why there is this misunderstanding?

\* (0930)

**Mr. Cummings:** Well, I speak very highly of them. Frankly, there need not be a disagreement. I have no problem whatsoever with the city program potentially needing to draw on the provincial funds. That is what it is there for. The levy is only on beverage containers right now. There is always some considerable concern about why we have not applied it yet to newsprint of some sort. There is an issue there trying to sort out the PST and the WRAP levy and the fact that the industry has come through a heck of a shakedown recently. But newsprint is a big portion of the recyclable stream, and a very important part of it, frankly. In fact, I am informed that the city could draw as much as \$2.5 million from the fund, assuming that recycling markets do not go up or down. It could cost more, I suppose, if it goes down. The fund takes in roughly \$5 million, and we have over 100 jurisdictions signed up on it now. It is considered a generous payment, frankly, but one thing that I have always stressed is that this is there to buffet the fluctuations in the recycling market. It has now gone past being a recycling issue. It is a market management issue, and the fund is there to buffer the fluctuations.

I suppose I have had an issue with the city in terms of who takes responsibility for the recyclables at the time that they have been collected. My view is that the city has enough leverage that it could have got a pretty good bid from a significant player in the recycling business who would have just gone out and done it for a certain price per household or per tonne collected and then would have accepted the responsibility for the market fluctuations and the city could have still interacted with the fund based on that type of an arrangement.

My concern is how well the city recyclables will end up being marketed and whether that will have a beneficial or a negative effect on the fund. It is too soon to make an observation yet, in my view. It was an issue that I raised at the time prior to the city issuing its contracts. They chose not to take my advice. It was free advice so I guess it was worth exactly what they paid for it, and we will see how it shakes down. But there need not be any hard feelings between the city and myself on this particular

program, because I believe that the majority of the population is pretty much on my side. We are on the side of the angels, trying to get more recyclables pulled out of the waste stream in Winnipeg, and we will continue to push forward on that basis.

**Mr. Dewar:** At the conference that I attended, that was a big concern, of course, the way the prices have dropped from last year to this year, in particular I believe for paper, newsprint and so on. I assume that you are monitoring the market, and what do you see for the future in terms of markets and where prices are heading?

**Mr. Cummings:** I have not got an official market analysis in front of me. I did see a market analysis of the newsprint industry not too long ago which indicated some upturn in the price of virgin paper, so I expect that would be followed by an upturn in recyclables. One thing that could affect this is that I believe some of the states are starting to withdraw their mandatory requirement for recyclable content and newsprint used in their jurisdiction. Interestingly enough, that was something that Dr. Fenton and his group and the original WRAP strategy recommended against, and we did follow their recommendation in that respect, and it has in that sense turned out to be the right thing to do even though we were criticized quite severely at that time for not following the lead and encouraging further recycling. But there is increasing demand for recyclable material out there, going into the de-inking facilities, so I think that should be positive.

The opinion of others expressed through the department is that we should be looking at stable or maybe even slightly down. There are a number of things that impact on it and, as I say, for example, Abitibi, or now Pine Falls Paper, sells into a market that used to require a fair bit of recyclable. If that were to change, I suppose that would have negative impact on the system here.

**Mr. Dewar:** Another one of the presenters was Ian Wright from Miller Environmental Corporation. Can you tell us, enlighten us, as to how that relationship is going between Miller and the Manitoba Hazardous Waste Management Corporation?

**Mr. Cummings:** Yes. The business arrangement between Manitoba Hazardous Waste Corp. and Miller

Environmental became effective the 1st of January. We had originally aimed for the first of November and then the first of December, but January became the logical point to turn it over because of the way the books were kept, et cetera. It is business as usual. Miller has not taken any dramatic steps, but I think the principals are planning on being in the province. If they have not already been here, they will be here shortly, and I think that they will be assessing their business plan and deciding what initiatives they are prepared to support.

They have an agreement that they will spend \$3 million in capital investment in the plant over the next two years, I believe it is—I am going by memory now—two to three years, anyway, and an additional \$5 million based on the business plan at that point. Miller is a very stable company, whether they are in the hazardous waste business or not, and I am not at all worried about their living up to their end of the agreement, but it will be their decision what the dollars will be invested in.

**Mr. Dewar:** Will the Miller Environmental Corporation or the Hazardous Waste Management Corporation be appearing before a committee of the House as the Hazardous Waste Corporation has in the past?

**Mr. Cummings:** No, but the wrap-up of the Hazardous Waste Corp., their final annual report, I suspect, will be in front of the committee, but as of the 1st of January it is cut off and will be operating as a private-sector entity and could even be reporting through the Minister of Finance (Mr. Stefanson), if we chose to, because it would be a financial—we are a shareholder, not an operator at that point, and it is a privately operated company, a partnership, of which ManHaz owns 50 percent. Now, ManHaz would do whatever is deemed reasonable. ManHaz could report a year from now, but they would not have a heck of a lot to report because they are basically a shell board responsible for receiving any rental monies that would come in from Miller. The day-to-day operations would be handled by the Miller Environmental Corp. board, of which we will appoint half through the Manitoba Hazardous Waste Corp.

\* (0940)

**Mr. Dewar:** The 2-cent levy, now, I believe there is some confusion out there as to whether or not the PST and the GST are charged on that levy. Is it or is it not charged on that levy?

**Mr. Cummings:** Well, as a matter of fact, there was a fair bit of confusion at the start. It is, in fact, charged, but again credit goes to our Finance minister. He made it very clear he was not looking to cause any grief for anybody by accepting windfall PST profits from a levy driven by the best of intentions, environmental reasoning. The estimated amount of PST that would be received on that revenue stream is in fact added to the MPSP fund on an annual basis.

**Mr. Dewar:** So the revenue generated because of the placement of the GST and the PST, or I guess the PST, on that levy does not go into general government revenues?

**Mr. Cummings:** Yes. It is collected in its normal fashion but the Minister of Finance (Mr. Stefanson), by agreement, turns over what is the best estimated amount actually to the two funds. I forgot to mention the same thing happens on the tire fund. It is about 280 on the multimaterial program and 160 on tires.

**Mr. Dewar:** And, of course, the GST would go to our friends in Ottawa then?

I want to, before I leave this issue of recycling and waste management, just ask the minister why his government forgave the WRAP levies of close to \$862,000 that were applied to beverage container companies who failed to reach their targets?

**Mr. Cummings:** I want to correct my earlier response on the GST. I am not sure that GST is collected on beverage containers, for example. I am not totally familiar with the tax but I think tires attract GST, the beverages would not. There is a further question about the forgiveness of the levy against the beverage container industry. This has been a constant source of aggravation, which is now, I believe, well accepted in the industry.

Manitoba embarked quite strongly to respond to the industry-driven initiative which was known as CIPSI. We were prepared to be, frankly, the first jurisdiction in the country to fully embrace the CIPSI model, which was that the industry would have provided in block funding an amount of money toward running of the recycling program similar to what we have in the province right now.

It became evident fairly quickly that the industry was not—and that was the grocery products industry which was fully integrated with the beverage container industry in this case. They were not prepared to put the kind of money into the program that we felt was necessary so we withdrew from those negotiations. I would suggest the best thing that happened was that, when we withdrew, the regionally managed sections of the beverage container industry came onside and decided that they would be prepared to work with our government in establishing a program because Manitoba did not have a program. We had quotas for which the beverage container industry could be penalized if they did not meet the quotas, in terms of recycling.

So when we proposed what is now the MPSP program, they were a little excited, frankly, feeling that we were only dealing with beverage containers in the initial stages, instead of the full CIPSI program which would have brought in contributions from all sorts of sectors, including newspapers. The unfairness of the CIPSI program in my view was that newspapers would carry the maximum amount of the cost.

Newspapers are in fact more recyclable than most other products but they are not necessarily a litter problem. They are not necessarily a waste problem and they are readily known as recyclable products. So I thought there was an unfairness in the CIPSI proposal, and there is some unfairness in the proposal that we now have in place, inasmuch as the newspapers are not yet contributing, but in the initial stages when recycled paper was at a very high value, they were in fact contributing strongly through the value of their product. They were not drawing down and were in fact creating the profit stream for some of the recycling activities.

The beverage container representatives in this area came to the table in negotiations and said that they were prepared to co-operate, as I said a moment ago, and that they realized that they were going to be putting-out of their industry was going to come \$5 million per year, roughly. I think we thought 4.7 or something, to begin with, or 4.3. About the same time they had run out of time on a notice that we had put them on previously about not having their recyclable rates up to speed, and they were eligible for fines of up to eight hundred and some thousand dollars.

They put forward their resources, they put forward their co-operation, and we recognize that, whether it is a hidden \$800,000 fine or whether it is a levy that is not hidden, in the end the consumer pays it anyway because it comes out of the margins that the companies put on their product, and it is not spread across Canada as some people would have implied. It would have showed up in regional cost here.

So I agreed, and willingly agreed, that, given their full co-operation, the implementation of the MPSP, that these fines would be waived. They were not in fact waived for a long time. It is only recently that they have in fact been waived.

So you could argue that this is not something that should be negotiated. It was not in fact negotiated. It was in fact in response to a diligent effort to get in place a recycling program, and that is the only basis upon which they could be dealt with.

They never came to my office and asked to negotiate. What they wanted to do was get a program in place that the industry and the public would get the best benefits out of. So the decision was made on this basis.

The beverage container industry now, and this year as well, will carry 100 percent of the total recycling program in the province unless we put some further levies on. Even then they are not likely to kick in until next year. So I think, really, if you were to put it in the crassest terms, we are looking at \$10 million that we are taking out of the industry that otherwise we would have been looking at about an \$800,000 fine.

**Mr. Dewar:** I would like to move on to an issue that is of great concern to myself and to many in my constituency and actually residents north of the city and deals again with water, and I think that is probably one of the most important environmental issues we have to deal with now. This relates to the fact that the Selkirk and District Planning Board approved a draft plan calling for changes to their plan which could create potentially 3,000 new residential lots between Winnipeg and Lockport, and as I mentioned yesterday that is on both sides of the Red River in the R.M.s of St. Clements, West St. Paul and St. Andrews. The municipal board is currently conducting hearings in Selkirk and I attended

some of the hearings and heard some of the presentations. Unfortunately I was unable to hear the Department of Environment's presentation and I would be interested if the minister could tell us today, explain to the members here today what the presentation was.

\* (0950)

**Mr. Cummings:** Well, the position of the department was that we were opposed to reduction of lot sizes because of the history of problems we have had with clay soils and absorption. I believe the member might know that there has been some discussion for a number of years on new regulations for the establishment of private sewage systems, and I think maybe I have the words garbled a bit, but management of individual sewage, implementation of that might allow for something different provided permeability levels are met. The question very likely how they would meet them and the assumption is that they might not be able to meet them, but one should never assume that there might not be ways that this area could be subdivided differently.

The city has been upset with me over the BFI decision. Frankly, this decision goes the other way. The city might be happy to see less small lot development in rural areas. At the same time this is the kind of issue we have been trying to get the capital region to deal with for the last five or six years. Gathering of information and having the municipalities and the city face the stark reality of what the impact of their decisions are is really the way that I see this committee unfolding, and that is on the waste disposal issue, that is why we are gathering all the information even though the BFI application was in the works.

We have to have all of the municipalities and the city face the reality of what is out there, and this is another one that is exactly the same, in the sense that we gathered this information and I would have to say that the only way of describing the reaction of a number of the rural municipalities was ballistic. They were very, very unhappy with the idea that somebody assumed there were 8,000-and-some lots out there with potential to be developed. In reality they felt there was an awful lot less than that and maybe the actual numbers were somewhere in between, but I can tell you that if you think the reaction to BFI is high, this one will be equally as high, but it will be the other way.

**Mr. Dewar:** I do agree with the minister. I did listen to part of the presentation by a representative from the Department of Rural Development, and he raised a number of concerns regarding the septic fields on the clay soils in the area and the lack of knowledge as to the ground water supplies and made mention that public services may be demanded in the future at great cost or required at great cost if the sewage needs to be piped or water needs to be transported from a great distance. I understand, and perhaps you can just comment on it, that that is the situation now in parts of the R.M. of East St. Paul.

**Mr. Cummings:** Yes, that is pretty much the issue. I have to reorient myself as to where the exact locations are, but I believe East St. Paul is one of the areas where there is difficulty, where we have got sewage running from one yard to the next, obviously pitting neighbour against neighbour. There are a number of ways of dealing with this that unfortunately those in the area probably do not want to deal with. Putting in a sewer and water line is one solution, and it is the most expensive solution. Individual solutions could be to go to different types of systems. Low-volume water usage would be the first step in reducing the overload on some of these septic systems.

Personally, I believe that there is opportunity for private sewage treatment systems where groups of houses could be hooked together. There seems to be technology out there but, in the end, somebody has to take responsibility for running it, and a loosely knit group of householders getting together and saying that they will undertake this probably does not provide a very viable answer in the end either. It needs to be the responsibility of the municipality or otherwise. The other solution is composting toilets, I suppose, extremely low-volume toilets, low-volume shower heads, all those things to get away from putting anything other than gray water out into the septic system are part of that.

It has always been my view that this regulation—I got broadsided on this regulation about five years ago in some of the early meetings of the Capital Region Committee, and one group at the meeting wanted nothing to do with this because it would destroy the opportunity for subdivision, and the other municipality, one municipality in particular, was righteously indignant because we had not moved in this area, and they wished

to impose stronger environmental regulations on subdivisions on their own than what we were prepared to support them on. This problem is now also coming to a head, and I guess we will see more of it this summer, more of it in terms of dealing with it.

**Mr. Dewar:** Does the minister have a figure in terms of volume of the waste water, the gray water, I believe they call it, that could be generated if they do double the size or double the amount of residential lots? What they are asking for now is to move from four-acre lots to two-acre lots. Do you have an estimate as to how much gray water would be generated if such a move was to go ahead?

**Mr. Cummings:** I do not want to confuse the terms, and maybe I used them interchangeably a moment ago. Gray water would not be septic, but in terms of volume, that varies widely. That is why, I guess, I referenced the usage within the house.

I guess the stereotypical problem in this type of system is if a family of four leaves a fully developed housing situation in the city of Winnipeg, goes to the rural area and is hooked onto a well or whatever, believe they have more or less unlimited water supply at least, and continue to use water at a rate the same as the city or maybe even greater. A septic field in this area just cannot handle it unless it has about five acres to spread out over. So doubling the number of lots would certainly compound the problem because you just could not contain it easily on two acres unless you separate the septic from the gray water and use the gray water for other reasons.

(Mr. Jack Penner, Acting Chairperson, in the Chair)

That is country living and I am afraid what we have too often on these subdivisions is people wanting the fresh air and the trees and the birds and the river going by behind them living in the country, but they want all of the city comforts, and this is one area where the two do not necessarily coincide.

\* (1000)

I am told that 60 gallons per person per day is the average water consumption. So, by having twice the number of families, a calculation could be made, but if you take 60 times four, you are looking at 240, 250 gallons-a-day discharge from a household. That would

overload or come close to overloading a septic system, in my view at least, and I have lived in the country all my life. That would overload a system in soils that were even more permeable than the Red River clays. I mean, that is trouble. In my household, a thousand gallons, plus the rainwater off the roof, will probably last two weeks or longer because we were always used to using less water. So by comparison, you are talking about half of that.

**Mr. Dewar:** I am pleased that the minister has taken this position. I was very much concerned about the changes and the potential impacts upon the environment.

The other issue is the ground water supply and regulating that supply, I believe, or allocating that water is the responsibility of the Department of Natural Resources, but it is your responsibility to protect the quality of the ground water. What legislation is there in place currently to protect ground water in this province? Do you think it is sufficient to deal with all these problems that we are encountering?

**Mr. Cummings:** The Environment Act, The Dangerous Goods Handling and Transportation Act and certain provisions in Natural Resources. So the acts that they administer regarding the management of wells, installation and stopping contaminants from getting into the ground water, those are areas where we enforce to prevent contamination of the water.

Now, the member asks, is there sufficient regulation out there to protect ground water today? Yes, but that does not mean that there are not additional things that we could or perhaps even should do. We as a government have identified on several occasions that the No. 1 priority—or certainly No. 2, if not No. 1—is ground water in terms of environmental protection because once it is contaminated, the chances of decontaminating it are very poor.

In this case, aquifers that are being heavily drawn on, I am not sure that there is a chance of domestic draw over the capacity of the aquifer in that area. I am not totally familiar with it but, generally speaking, domestic has not been overloading the draw on these aquifers that we are aware of. But when you are looking at domestic water supply from ground water and sewage disposal problems in the same area, the level of risk is doubled or more

because if you have a well in your backyard and a septic system, too, you better make sure your well is well sealed if your septic system fails. I mean, that is an obvious example of where we have some significant concerns about how subdivision relates to septic disposal. It does not make the developers very happy, but you will see more and more of them moving to cluster developments where they will put some kind of infrastructure including septic systems, if you were to ask my opinion on how this might be dealt with in the long run.

**Mr. Dewar:** Last summer, in terms of water—and referring to my extensive notes here—there was a great deal of concern about the high count of fecal coliform in around the beaches here in the province. Levels—Grand Beach with 340 units; The Forks, it was high as 1,160 units; 530 units at Middlechurch and so on and, of course, the ongoing problem that we face in Selkirk with the Red. Some of that issue has been dealt with and, hopefully, in the near future we will no longer be required to draw on the Red River as an emergency source of drinking water. But I just want to raise the issue, I raise it every year, and that deals with the action that the minister has taken to clean up the Red River.

What action is he planning on taking in this upcoming year to deal with the high counts in the Red River?

**Mr. Cummings:** I do not mean this to sound uncaring, but it has probably just had a big flush. That will clean a lot of it up. It is more of an ongoing rather than a specific year-by-year issue, incremental as well. I would suggest that there is a third item that is now being watched additionally, and that is agricultural operations. As they increase, we have to make sure that they are not increasing at the expense of the environment.

I will just go back one quick moment. I said that there were not too many examples of domestic draw exceeding aquifer supply. There are two obvious ones. One is Winkler, and Selkirk. As a matter of fact they get up to the max of that aquifer from time to time, and there are a couple of others in rural Manitoba, I guess. So I take back that original statement.

But in terms of the Red River, the city's ongoing upgrading program, they are actually scheduled for improvements on their plants, so we can give you a predictable schedule. The city, because of the magnitude

of the program, as I have said before, we are prepared to schedule it on an affordable basis for them because we are looking at big bucks, and that is the one thing that has impacted on this.

I would say in defence of myself and the department, however, that the only reason it is not done yet is for the reason that I just stated, and in fact we have seen more movement in the last three or four years than I would have predicted prior to that. The city actually agreed quite willingly to a schedule once they realized that we were determined that they should do something. So their budget will in fact over a period of years allow them to schedule implementation of more disinfection.

**Mr. Dewar:** Will the department be monitoring the fecal coliform count this summer? Hopefully we will be at a stage where we can enjoy the beaches we have in this province. Will they be aggressively monitoring the count in the southern basin of Lake Winnipeg?

**Mr. Cummings:** The answer to the member's question is yes, the department monitors, and it was evidenced last year, I guess. We shut down some areas, but there was monitoring, and some areas were shut down by order last year. It was unfortunate that it had to be done, but, nevertheless, public health comes first.

**Mr. Dewar:** I do agree with the minister. Which beaches were shut down and when?

**Mr. Cummings:** I cannot give you an exhaustive list, but the number was not that high. It was beaches at the south end of Lake Winnipeg that were impacted in '94. In '95, I do not think I have—the one that has had the most action over in '95 was Pelican Lake. I am also informed by the department that the Winnipeg south end treatment plant will have disinfection on stream this year.

\* (1010)

**Mr. Kevin Lamoureux (Inkster):** Yes, Mr. Chairperson, excuse me for not necessarily knowing what line we are on, but I do have a question.

**Mr. Cummings:** It is wide open.

**Mr. Lamoureux:** Wide-open discussion.

I would like to be able to ask a number of questions of the minister regarding landfill sites in particular and possibly even go on to some biomedical waste.

A while back, the CEC met over at the Convention Centre and had public hearings. I had made a presentation as the local MLA regarding the proposal to have a landfill site built just north of Rosser which is being sponsored by the BFI. The BFI was the company that was looking at authorizing or getting this landfill site. The ministry has just authorized or given the okay for the landfill site to go ahead.

There are a number of concerns and I want to take the opportunity to express what I believe I have expressed to CEC. CEC did come up with a recommendation. The recommendation that they came out of on those public hearings was that in fact the provincial Department of Environment has to demonstrate more leadership in dealing with the capital region and landfill sites or waste disposal sites.

My presentation that I made was that a lot of people might say, well, gee, you know, you happen to border the area in which the landfill site is being located and the only reason I was in opposition to it was because I did not want it in my backyard. So I decided to address that issue.

**Mr. Cummings:** I would never say that.

**Mr. Lamoureux:** Of course, the Minister of Environment would never say that—but, Mr. Chairperson, I felt that it was probably in my best interest to take the offence and indicate why it is that I was not taking that approach, at least not at that point in time. At some point of time in the future, discussions on it—I might have entertained the thought of taking that approach, but I did not think it was necessary at that time, and this is the reason why. In the discussions that I have had with a number of people regarding landfill sites, it was indicated to me—and these were primarily individuals from the different municipalities, in particular, Selkirk and the city of Winnipeg—that the city of Winnipeg and the capital region as a whole have a number of landfill sites that if properly utilized we would not require any additional landfill sites. I had talked to some individuals who had definitely implied—and I am not an environmentalist by any stretch of anyone's imagination—but the individuals

who were talking to me were definitely giving me the impression that the city of Winnipeg does not need to even have more than one landfill site. Now we have two landfill sites, and it seemed to me that we were going to get a third landfill site at that time servicing the city of Winnipeg.

I presented the argument, first and foremost, what the CEC should attempt to do is clarify for us how many landfill sites are necessary for Winnipeg and the capital region. I did not see a recommendation to that degree but I did see a recommendation, as I indicated, that said that the province has to take more of that leadership role. So, having said that, first and foremost, I would ask the Minister of Environment, in his department's opinion and in his opinion, is there really a need for three landfill sites, given the population of the city of Winnipeg and even the capital region?

**Mr. Cummings:** Well, I went through this to some extent with the member for Selkirk (Mr. Dewar) a few minutes ago and yesterday, and I quite agree with the recommendation of the commission and the member for Inkster that there needs to be co-ordination in the capital region. One of the things that I have acknowledged, however, is that that co-ordination has to be based on the municipalities and the city jointly knowing the ramifications of their decisions, full knowledge of what may or may not happen 10, 20, 30 years out. There needs to be a full range of long-range planning and a strategy for implementation of services, not just landfill, all manner of services. Landfill just becomes the most obvious flashpoint today.

Just a few minutes ago, we were talking about small-lot subdivision in rural areas. That is going to be the next flashpoint in this debate about capital region planning. We sat down, starting three or four years ago, and had a significant strategy process put in place through the round table process. The city participated fully and, to their credit, the present mayor and the previous mayor committed themselves and attended regularly on behalf of council but, in the matter of putting that planning in place, all parties agreed to participate provided the province would not take the hammer and legislate agreement. It had to be a mutually agreed agreement.

There were a number of people representing different jurisdictions who would not be at the table if the

consequence of being there meant that the province would seize the hammer and implement by law some of the recommendations of that strategy. Now, you can ask, if you wish, the wisdom of even continuing discussions on that basis. Nevertheless, they were continued, because I believed there was a lot of good will at the table and willingness to co-operate but, at the same time, a desire to maintain a good element of independence.

You can look at the amalgamation of the city of Winnipeg, if you want, in terms of independence versus amalgamation or a legislated solution to diverse supplying of services. Amalgamation of the city of Winnipeg may have been seen to be a very good idea, but there are still lingering problems with that amalgamation today.

The organization of the fire department I believe is an example. They still inherited the regions, the management hierarchy and all of those things. I am not here to criticize it; I am only pointing out that even amalgamation has some lingering problems that are associated with that enforced solution.

(Mr. Deputy Chairperson in the Chair)

I suppose the very fact that BFI put forward a proposal because, if they are a business entity, they must believe that there is a business plan that will support operation of another landfill, but this regional committee that has been meeting was well-aware from Day One of the proposal for another landfill.

There are also other proposals out there. St. Clements has a proposal for a landfill. I believe Ritchot has a proposal. Two or three municipalities have in fact made an arrangement with the City of Winnipeg recently to rent space in their landfill or to hire them to remove their waste at so much a tonne. The City of Winnipeg would not, as recently in this—the member would have got a letter from the City of Winnipeg that says in '94, they opened up for negotiations to the surrounding municipalities to use space in their landfill. Unfortunately, I wish they had done that six years ago or seven years ago when the problem was ripe to be fixed, when we first put the Capital Region Committee together. That was when we needed to have the willingness—we have been talking for seven years. I was Minister of Municipal Affairs when we disbanded the ad zone and

tried to replace it with the Capital Region Committee, and we are still dealing with this issue eight years later. It comes down to the fact that unless there is a desire on the part of the public or the better interest of the public as a whole to legislate the plan in this area, it has to be agreed on co-operatively between the duly elected organizations that are at the table.

The BFI proposal was around six, seven years ago. It was in East St. Paul, I believe, originally, where they were going to site it and because of some local politics and a number of other things which are not relevant anymore, they left there—pardon me, not East St. Paul, West St. Paul. They ended up finding a friendly community in Rosser or a friendly R.M. in Rosser. So that issue was on the table—even when the proposal first came up, the city I suppose could have struck a blow at that point if they had aggressively gone after surrounding municipalities.

\* (1020)

The problem I have is that we are regulating the closure of an awful lot of landfills out there. We want them closed. There are a lot of municipalities out there, particularly north of the city, that are looking for space. Are they going to haul from Eriksdale down to BFI? I somehow doubt it.

But BFI is not just about going after commercial waste in the city of Winnipeg. It, as a political issue, has been an issue with the municipalities for access to landfill space with or without building their own, and the co-operation to get to use of one landfill did not rise to the surface quick enough to deter BFI from continuing with their proposal. If the government of the day were to—as many people have asked and as I believe you were asking, why did the government just decide there is not going to be another landfill and just frustrate them to the point where they would go away. Frankly, that is an abuse of the environment process, in my view. It had to be handled openly, which it was.

You may not agree with the final conclusions or the recommendations of the Clean Environment Commission, but the process was allowed to proceed because there was not a planning or a legal mechanism in place to kibosh it, frankly, without compromising the principles of this government which is to allow open discussion and

independent decision making of the relevant elected bodies and that includes school boards, municipalities, city of Winnipeg. After a while, the province does not need to presume the responsibility for the decision making of every one of the jurisdictions across the province. That is the bigger picture.

The close-up look at BFI, not too far away from the airport—we discussed that yesterday, the decisions made around that, the recommendations or the approval from federal transport authorities. All of those things were brought into the decision-making process.

Specifics of the licence: I am not going to discuss that at this committee because I am responsible for hearing any appeals now that the director has issued the particular licence.

Does there need to be an additional volume? You can argue that Brady could hold a hundred years' worth of garbage or 80 years worth of waste, but BFI has put information on the table which I believe the public has not had a proper opportunity to look at where they are prepared to talk to the City of Winnipeg about how they can actually save the city some money, and it is a considerable amount of money.

It is not my job to advocate on behalf of BFI about their proposal, but I mentioned yesterday the very fact that they are going to have leachate that needs to be treated, they are prepared to pay the City of Winnipeg to do that. The city could make money treating the leachate from that site, if they chose to. They may choose not to do business with them at all. So, therefore, what will happen? They will either hire another municipality or they will build an onsite treatment facility.

Swapping of waste. Why should the city haul from the very north part of the city down to Brady when they could do a swap with BFI, and BFI would give them the same price that the city would give to BFI to put something in Brady? Whatever arrangements they want to work out, there are millions of dollars on the table here in that respect.

The city has been making Brady a significant profit centre. I do not for one moment ignore that, but, as I just went through the decision-making process, I am not too sure that the member can show me, other than the

province imposing by law a planning process on the region that you could have had a different conclusion than what we have today.

**Mr. Lamoureux:** Mr. Chairperson, if you follow through on what the minister has just finished saying, if Laidlaw decides tomorrow that they too would like to have a landfill site and they want to build one out east of Transcona, in fairness to Laidlaw, would they not then also be granted the same treatment that was given to BFI as long as they go through CEC, and CEC says, well, there is no marginalized environmental damage by having another landfill site located there, is it then fair for us to say, look, you are going to treat Laidlaw in the same fashion you have treated BFI?

**Mr. Cummings:** I would answer the question directly. I did indicate that St. Clements is looking to site a landfill. I mean, it is the same issue whether it is a municipality or whether it is privately held. I know there is a certain aura that some people put around a privately run waste management facility, but the fact is that if you look at how markets around any kind of waste management are unfolding across North America, the cost of the infrastructure—I mean, the Charleswood bridge is a perfect example. Who would have thought 10 years ago the private sector would build a bridge and lease it to the city or precisely what the arrangements are?

The same thing is true in terms of private versus public investment in infrastructure. You could without any problem see all sorts of water lines, for example, a possibility where the private sector believes they can put up the money and the management expertise and sell the water on a competitive basis to municipalities where they might not otherwise have been able to afford to put the system in if they operated individually. There is an example of that west of the city right now where municipalities are talking in that respect.

I use that as an example to say that as a regulator, and the minister representing the regulating department, I do not have a problem regulating the private sector; they are easier to regulate than the public sector. The amount of political pressure that the public sector can put on a department to avoid fully implementing their regulations is enormous. I mean, we just talked about the Red River. We have treated the City of Winnipeg reasonably. The other side of it is public pressure on the public entity, the

municipality, can also be very high, to force them to do things that maybe they would think are beyond their responsibility if they had been in the private sector. I realize that it cuts both ways.

Your question about could another landfill be put in the area, yes. I sure as heck am not promoting one. As I told the capital regions meeting the last time we met, we have got to face each other and look across the table and look at the reality of what they are doing. They want massive investment of their own dollars. I guess this is the one area where they have come to a realization that it is not necessarily their own dollars they are investing. I suppose that puts less pressure on them when they allow this kind of private sector development, because what you are doing is pressuring an existing, publicly funded, publicly built landfill at Brady, but we had a situation where there were commercial haulers in the city of Winnipeg who were taking waste out of the city, not to Brady. They were avoiding tipping fees at Brady. They were taking it to other landfills.

It has not been such a public issue, and it has not been a problem because they were putting it into licensed facilities, but they were shopping around because the city, 15 to 20 years ago, made the decision that they were not going to pick up commercial waste except once a week. A lot of commercial operations out there need it twice a day probably. So they were faced with hiring their own truck to take away their own garbage and then they were being charged a tipping fee wherever they took it. So they have a reasonable expectation that they should be able to shop around and see what the charges might be for tipping fees. That is what attracted BFI, I presume. I should not presume anything, frankly, but you could see where that would be a logical extension of why a private sector operator might think it would be reasonable to put a landfill somewhere in the area.

\* (1030)

**Mr. Lamoureux:** At this point, I do not think it is necessarily private versus public. What I am looking at is what is in the public's best interest in the capital region, and I do not believe for a moment allowing anyone that wants to have a landfill site to giving them the authority to construct and operate the landfill site is the best way to go. I ultimately would argue that, look, how many landfill sites, the type of landfill sites or size

or capacity—I do not know the technical jargon that most would know. I am just applying simple common sense, saying how many landfill sites does the city of Winnipeg and capital region require? Now, once you have determined that, then you can look at potential locations. The Minister of Environment talks about Ritchot, talks about St. Clements. We could talk about Laidlaw. Who knows what is out there in terms of individuals or groups, or whether it is public or private that wants to be able to cash in on waste disposal, and there is a phenomenal amount of money that is out there for disposing of waste.

Mr. Chairperson, what we are looking for specifically is leadership from within the Department of Environment, because that is where that leadership role has to come from. The minister says, well, we are not prepared to use the hammer. Well, maybe there is a need to start using the hammer. If you have a capital region and they are unable to come to any sort of a consensus in terms of what is in the best interests of that area, to what degree does the minister allow this to continue on? If I were the president of Laidlaw, I would be, effective not today but yesterday, trying to get my own location, because—the minister makes reference to tipping fees. That is no doubt one of the primary reasons why BFI was as aggressive as it has been to try to get an additional landfill site, but does that resolve the issue? I would argue no, because I understand even the City of Winnipeg, some councillors are currently considering going into commercial waste disposal now as a direct result of the minister approving this particular licence.

So what you have is you have a dispute that is going on between private, public sector, between municipalities and the City of Winnipeg, and this dispute is being allowed to continue on, and at what cost? How does the average Winnipegger or individual living in a surrounding municipality benefit by us allowing this dispute to go on? At what point in time does the minister have to bring in—he makes reference to legislation. Would legislation be necessary? If it is necessary maybe the minister should be considering it. Maybe the minister should be sitting down with the City of Winnipeg and the municipalities and saying, look, we want this thing ironed out. You have an obligation as elected officials to put this question to rest. If they are not prepared to put it to rest, to what degree is the minister going to allow it to continue on?

As I believe it is appropriate, if Laidlaw approaches the CEC or has a proposal, ultimately it has just as much of a right as BFI does to operate a landfill site as long as CEC says that it is environmentally sound in terms of where it is that it is looking at because I do not believe, and the minister I hope will correct me if I am wrong, the CEC said that the capital region only needs one or the capital region can only sustain 10 landfill sites.

I do not believe that is what it did. I believe what it did was just say, given that particular location, it did not have too much of a problem as long as these standards are met. That is my interpretation. Well, using that CEC recommendation, nothing prevents other groups or individuals coming forward saying we too want to have a landfill site. The Minister of Environment, using the logic that he has expressed not only today but in the past, and no doubt in informal discussions, the position is going to be fine, until the city and municipalities or the capital region can get their act together, we are going to let whomever wants to have a landfill site, we will give them the green light, and we will allow them to have the landfill site. I do not think that is in the best interests of Manitobans, that in fact, the Ministry of Environment could have and should have and it is still not too late to play a stronger role in trying to resolve this issue.

If the minister wants to make it a private versus public issue, well, if that is really the big issue, a question of privatization, then privatize one of the current landfill sites and provide incentives to allow that to take place. Did those sorts of discussions even occur? My best guess is that they did not occur, at least I never heard any feedback that they occurred. But how can the ministry through me or directly to the public justify allowing anyone that wants to be able to establish a landfill site, how can they justify allowing that to occur? Or at what point in time does the ministry say no, we have enough landfill sites, or we are going to have an overall approach at dealing with landfill?

This whole argument of, well, look, you know, the municipalities and so forth have to operate completely independently and it is for them to ultimately make the decision and so forth. There is a lot of merit to that argument. In fact, Mr. Chairperson, I used that argument when the Ministry of Education here mandated school divisions their tax increases, or disallowed them from

having tax increases. So, you know, there are ways in which one could argue on both sides of that.

What we want to know is at what point in time is the Ministry of Environment going to take more of a leadership role on this particular issue?

**Mr. Cummings:** Mr. Chairman, I guess we have just heard a reasoned dissertation from the Liberal Party on their view of planning in the capital region, which sounds to me like it would dictate to legislation what could develop in the capital region and what could not, sort of an extension in the toll road philosophy that we have seen discussed over the last couple of years.

The fact is that siting a landfill is an extremely expensive business proposition. Even though there are municipalities out there of modest means and small population, we are still considering siting landfills. I think that even they are reconsidering now, given the very stringent environmental laws that are put in place for siting.

If you are talking about the capacity of landfills, Brady versus the proposed Rosser site, and then if your imagination stretches to think that there might be a third one, we are talking several millions of dollars for somebody to put at risk to establish another landfill. So the chances of another landfill of that size is probably remote, based on a business proposition, because at the same time we are looking to reduce volumes going to landfills.

As I stated earlier and perhaps overlooked it, when we are talking about volume reductions here and going to our landfills, we believe we have 25 percent reduction on household waste now, and in fact we have even greater reduction than that going to landfills because tires are out of there as well. So that is a significant volume in itself when you look at 800 to a million tires that used to go to a landfill. So who would want to be in the landfill business?

Some of the municipalities out there, in my view, are making a mistake on behalf of their electors considering putting in additional landfill capacity. But what has happened is, in the area outside of the city at least, they have gone from \$5 per capita to sometimes four times that much in order to have to deal with the laws that we

are putting in place today for environmental protection. So that in itself drives an awful lot of the consolidation of landfills out there.

\* (1040)

Talking about capital region management, the Province of Manitoba, and it is not just the Department of Environment—when I said that the province has not chosen to use the hammer in controlling the number of landfills going in the area, I wonder how many jurisdictions in North America have the reverse problem. They cannot site a landfill, so it is rather unique in the sense that we have this question. But the very fact that we have not used the hammer does not mean that the Department of Environment even has the hammer.

The capital region has the province represented there by rural development, by urban affairs, and by environment, simply because environment is such an important part of the area, and I suppose because I have some historic—the department more than me has some historic connection over the number of years in this process. We have had a minimum of four meetings a year with the capital regions and more often on committee basis. We have had probably 25 to 30 meetings of the capital regions in the last number of years, so I directly rebut what the member said about why do we not get everybody together and force them to do something about this. It is an interesting concept. The same thing was said when we talked about Headingley, St. Germain, the area at the north end of the city where East St. Paul, I believe, wants to hook onto the city sewage mains. The sewage main, as I understand it, is oversized at that end to accommodate further development. It is oversized right at the city's boundary, but nobody has ever agreed to that hookup.

People from time to time have contemplated more of a regional-type approach to the management of public affairs in this area. I am not sitting here pointing fingers at the city any more than I am pointing them at the surrounding municipalities, but the leadership of those municipalities on behalf of their electorate have to make the best decisions on a monetary basis for their taxpayer. The city is most unhappy with the possibility of another landfill being developed. I understand that. I even appreciate why they might be unhappy, but sooner or later somebody is going to ask what was the margin that

they are putting into the city coffers as a result of what is going into that landfill. I am told that it is in excess of several million dollars. It is not the \$7 million that we are talking about in terms of potential disagreement between the city, myself and BFI about what financial impacts, and more so than that, the city is not going to lose control of its household waste. This is a commercial waste issue.

I believe that there are ways that the city and the surrounding municipalities can come to a more amicable solution on this. If they had done it sooner than later, we might not be facing a commercial entity that was prepared to compete for some of the commercial waste within the city, but they will also be competing for waste in other parts of the surrounding area and no doubt will do it aggressively, because they are talking about putting in recycling capability and not just being a dump. So they have every reason to be confident that they will compete out there. If the city reacts by saying that this is a straight loss of revenue without looking at how they may contain their costs at the same time, then I would hope that that is not a route that they will take. In fact, I am confident that the city councillors are pretty capable and that they will, on reviewing this, look at their costs as well as the revenue stream that comes out of Brady site.

But I repeat, unless we are prepared to take legislative authority—and I guess I am being encouraged to do that by the member for Inkster—and impose a plan on the capital region, I do not think any other conclusion could come out of this.

**Mr. Lamoureux:** Mr. Chairperson, what I am encouraging the Minister of Environment to do is to play a leadership role, the same thing that CEC, the Clean Environment Commission, encouraged the Minister of Environment to do, and to that end, a very, very specific question in hopes to get a very, very specific response: Does the minister believe that it is in the capital region's best interest to have this third landfill site built, which will primarily serve the city of Winnipeg?

**Mr. Cummings:** I guess I was trying to indicate that given some, by rough estimates, 25 to 30 meetings that have occurred and that a strategy has been developed for the area and that a mutually beneficial approach to projects is the right approach, I think we have provided leadership. The only problem is that we have not

necessarily got a crowd following. There is independent decision making going on out there that we still must respect.

I think if we were to consider other areas besides waste disposal, the capital region has got an awful lot of strengths. There are a lot of people who do live outside the city who work and spend dollars in the city, and they live in the surrounding region. The surrounding region benefits from the city, its metropolitan or urban lifestyle, the amenities that are available here. It is a mutually agreeable area to live in and they should be able to feed off each other in a positive and not a negative way.

I think the opportunities that have been identified through this Capital Region Committee have been quite enormous. The number of them that have been built upon following on that, I am not so sure that we have seen the benefits that we identified, but the very fact that there might be some additional housing developed outside of the city is balanced off by the fact that the city receives enormous revenues and benefits from being the hub of not only this area, but all of the province.

So I am not an advocate for any particular company, I am an advocate for looking at the best way of providing services to the public short of legislation and, believe me, legislation has been discussed. As I said a few minutes ago, the condition of keeping the capital region still meeting was that the province would not immediately turn around and use that information to impose a legislated plan in the area. The member cannot have it both ways. I mean, if he wants this legislated or if he wants legislation to control the number of landfills in the capital region then please say so.

**Mr. Lamoureux:** Mr. Chairperson, I would suggest to you that if in fact you cannot justify three landfill sites to service Winnipeg and the capital region, in order to prevent it, if it required legislation, then there should be legislation. How do I tell the constituent that I represent, look, we are going to have a landfill site built even though it is not necessary but because the province failed to be able to bring the parties together and come up with some sort of a consensus that would have seen the more appropriate number?

I could ask the minister to demonstrate, because I said right at the beginning, you know, I am concerned like

every Manitoban about our environment but, by no stretch of the imagination am I as intellectually capable as many others in terms of dealing with this particular issue of the need for landfill sites and the number of landfill sites.

\* (1050)

I guess I would challenge the Minister of Environment to provide someone that does have that expertise, that could justify, not politically or philosophically, but could justify the need for an additional landfill site, the current additional landfill site that is being proposed, how it is in Winnipeg's and the surrounding area's best interests, not economically, but environmentally, that it is in Winnipeg's best interest. I would challenge the minister to be able to provide someone that is in a position to be able to do that.

Mr. Chairperson, I look forward to the minister, hopefully, providing me that. Failing that, I would have to assume—because he did not really answer the question—the question was does Winnipeg and the surrounding area need to have this other landfill site? Having said that, I want to concentrate on what the results are of this decision or the government's inability to address this particular issue. Well, from the City Council's perspective, they would argue that because of loss of revenues we are going to either have to increase property taxes or we are going to have to cut back on services, that is at least in part. The minister could respond by saying, well, gee, maybe they should not have been charging as much. Well, what do other municipalities charge for dumping fees? I understand that Winnipeg is relatively competitive with those fees.

One could ultimately say, what are the citizens—how have they come out overall in the capital region? Well, environmentally, there is no argument that has been put forward to justify having this other landfill site. What then prevents other companies from bringing forward landfill sites, such as—as I have pointed out—Laidlaw? I know if I was the president of Laidlaw, given this government's and particularly this minister's position on landfill sites, I would be planning, if not trying to bargain to get a Brady or the Summit privatized. I would be attempting to establish my own landfill site because, again, I am at a bit of a disadvantage if my competitor, that being BFI, has their own landfill site. So, in essence, the minister is opening the door for anyone who

is prepared to meet the standards that have been set out to have yet another landfill site built.

Philosophically, what has been gained? Well, many might argue that garbage disposal is best handled through the public sector and many others would argue that it could be equally, if not better, done through the private sector. I am not prepared to enter into that particular debate at this point in time, but I do know what many councillors are talking about today is that City Hall should now get involved in a commercial garbage disposal. The minister shrugs his shoulders. Well, let them, is the implication. How have we really benefitted throughout this whole process? At times, I do believe that the government could have played—was the Premier brought in on some of these discussions in order to assist coming up with a compromise in which everyone would benefit? Mr. Chairperson, I believe that everyone could have benefitted.

I sat through the presentation from BFI and Kim Sigurdson and so forth, an excellent presentation. There is no doubt that BFI could provide a landfill site that is at the leading edge and, no doubt, Laidlaw could do the same thing. If the will was there, no doubt the City of Winnipeg could do likewise. Does that then mean that we should have all these landfill sites servicing the capital region? I would say not. The individual or the minister responsible has really let down the people of Manitoba who are in that capital region because, ultimately, what you have done is you have given the green light.

I think CEC was right on when they made the recommendation that they wanted to see more leadership coming from the province on this particular issue. I, too, was wanting to see more leadership coming from the province and we really have not seen that. I appreciate the minister is responsible for the final appeal, and I would request that the minister take this final comment from me on this issue, for today anyway, as my personal appeal to the minister. That is, before, ultimately, BFI starts any sort of construction at least demonstrate to the constituents that I represent, and the people that live in the capital region, that there is a need for this landfill site that is strictly based on environmental arguments, not on economic arguments, because the economic arguments should have, could have, and still could be resolved if the will was there, and the people that have to ensure that

will is there is the Department of Environment headed by the Minister of Environment.

With those few comments, Mr. Chairperson, I am prepared to stop asking questions and I will save my biomedical waste questions until possibly next year. Thank you.

**Mr. Cummings:** Well, I am tempted to respond somewhat harshly. The member is trying to hurt my feelings. The fact is, however, that I have heard his concerns, but let me only say that environmental need is a different term than when you see operations intending to provide service, and I am not talking about landfills but in the broadest sense. An environmental regulation is to protect the environment from any harm or damage that an operation may impose, and I think we are, by my choice, mixing and matching the planning and environmental law or enforcement of environmental regulations.

I have no argument to the idea that there needs to be better planning, but it is going to have to be done with the co-operation, albeit perhaps coerced co-operation in some cases, in the capital region. We are not backing away from the capital region concept. We have got all of the players at the table, and I think the one thing that will happen is that they will face the reality of their decisions sooner than later, and in this case, they face them later.

**Mr. Deputy Chairperson:** 1. Administration and Finance (b) Executive Support (1) Salaries and Employee Benefits \$332,900—pass; (2) Other Expenditures \$78,400—pass.

1.(c) Financial and Administrative Services (1) Salaries and Employee Benefits \$813,300—pass; (2) Other Expenditures \$476,100—pass.

2. Environmental Management (a) Environmental Operations (1) Salaries and Employee Benefits \$4,303,400—pass; (2) Other Expenditures \$1,014,000—pass.

2.(b) Environmental Management (1) Salaries and Employee Benefits \$2,675,400—pass; (2) Other Expenditures \$2,232,000—pass.

2.(c) Legislation and Intergovernmental Affairs (1) Salaries and Employee Benefits \$163,800—pass; (2) Other Expenditures \$89,700—pass.

Resolution 31.2: RESOLVED that there be granted to Her Majesty a sum not exceeding \$10,478,300 for Environment, Environmental Management for the fiscal year ending the 31st day of March, 1997.

3.(a) Salaries and Employee Benefits \$235,500—pass; (b) Other Expenditures \$166,300—pass.

Resolution 31.3: RESOLVED that there be granted to Her Majesty a sum not exceeding \$401,800 for Environment, Clean Environment Commission for the fiscal year ending the 31st day of March, 1997.

4. International Institute for Sustainable Development \$1,145,900—pass.

Resolution 31.4: RESOLVED that there be granted to Her Majesty a sum not exceeding \$1,145,900 for Environment, International Institute for Sustainable Development for the fiscal year ending the 31st day of March, 1997.

\* (1100)

The last item to be considered for the Estimates of the Department of Environment is item 1.(a) Minister's Salary \$25,200.

At this point we request the minister's staff leave the table for the consideration of this item.

Is there any debate on this item?

1.(a) Minister's Salary \$25,200—pass.

Resolution 31.1: RESOLVED that there be granted to Her Majesty a sum not exceeding \$1,725,900 for Environment, Administration and Finance for the fiscal year ending the 31st day of March, 1997.

This completes the Estimates of the Department of Environment.

## SUSTAINABLE DEVELOPMENT INNOVATIONS FUND

**Mr. Deputy Chairperson (Ben Sveinson):** The next set of Estimates that will be considered by this section of

the Committee of Supply are the Estimates of the Sustainable Development Innovations Fund.

Does the minister responsible have an opening statement?

**Hon. Glen Cummings (Minister of Environment):** Only to say that this is funded primarily out of the removal of the exemption of PST on disposable diapers, levy against liquor bottles, a fair number of criteria that are laid down for applications, but approval is by a committee and after a screening process by the departments and the Secretariat of Sustainable Development. It is, however, intended to be a discretionary fund to support activities in areas that probably do not fall under the normal government funding, in fact, for sure do not fall under government funding, although departments can and have—[interjection] Well, I heard a shout across the table here. Actually, one of the criticisms a few years ago was that departments to too great a degree were receiving money out of this fund rather than going to individuals. I would suggest that balance is still there, but Green Team is an example of where there is block funding to a department from this fund. The greening of Winnipeg is another example of where there is a broad-based allocation to Urban Affairs, I believe in that case, to allow a program to go to fruition that might not normally have received approval under the regular Estimates process.

I think we should proceed.

**Mr. Deputy Chairperson:** Does the opposition critic have an opening statement?

**Mr. Gregory Dewar (Selkirk):** I am anxious to get into questioning. As the minister is aware, there were a number of issues raised in the last session as to the allocation of the fund, in particular to the different political constituencies throughout the province.

**Mr. Deputy Chairperson:** Pardon me. Is this an opening statement?

**Mr. Dewar:** Yes.

**Mr. Deputy Chairperson:** Okay.

**Mr. Dewar:** I just wanted the minister to be aware that we will be monitoring the allocation of those funds as the projects are announced. We just assume, when these decisions are made, that all areas of the province, be they held by Conservative or NDP or Liberal members, receive consideration when that consideration is given to the projects.

**Mr. Deputy Chairperson:** We thank the member. Now, I guess questioning can proceed. Would the honourable minister like to introduce his staff present?

**Mr. Cummings:** I have Ann Didur and Marni Larkin from the Sustainable Development Co-ordination Unit. Ann and Marni keep track of the paperwork plus a lot of other things. But particularly in relationship to the fund, there is a very detailed reporting mechanism requiring recipients of funds to report back on the expenditure of the funds and, as well, at the completion of the project, to make sure that things are adequately managed, including the fact that we manage a holdback to make sure that they complete the job appropriately.

**Mr. Dewar:** I believe Mr. Sopuck was the secretary of the fund and now he has left the employ of the government. Who is the acting secretary?

**Mr. Cummings:** I am not sure that there has been a direct appointment, but we believe that it will be filled on an acting basis by Bill Barto who is seconded out of Natural Resources, I believe.

**Mr. Dewar:** Going over the five-year summary, there was a large increase in the fiscal year 1994-1995 from \$3.4 million to almost \$10.5 million. Why such a large increase in that one year?

**Mr. Cummings:** Yes, without flushing out the precise numbers, as we were setting up the Used Tire Program, we did not have the legislation in place to allocate the money to them so the funds were allocated on a notional basis to the Sustainable Development Fund and then at the end of the year—we managed to get the Used Tire Program in place near the end of the fiscal year, and we reallocated \$6,050,000 to the Used Tire Program. To the Products Stewardship Program, we did the same thing, and there was \$1,487,000 reallocated out of the fund to the Products Stewardship Program. In other words, at the beginning of the year, Treasury Board allocated a notional

amount to the Sustainable Development Fund knowing that they anticipated revenues coming in in support of these two programs. The levy was in place, so we were collecting the money. The one thing we wanted to be very sure about was that we did not fall into the trap that Ontario did and I believe other provinces subsequent to that.

When Ontario's great tire fire occurred, they had over \$13 million or maybe some number significantly higher than that in a fund that they had been collecting over a period of time, and they had not done anything with it, and found out that that money disappeared into general revenues. That was always the fear the public expressed about the three-dollar levy on tires and about the two-cent levy on beverage containers, that government would somehow scoop those dollars.

When we talked earlier about dedicated funds, I wanted to make sure that we were not only able to point to a mechanism where they would be dedicated but that we had a clear path to show the public how this money was reserved and held in reserve and kept as funds specifically for the programs for which it was collected. So this was simply a vehicle to acknowledge the money in the Estimates process and, yes, it made the fund look particularly large, but we were able to then reallocate it out of the fund to the independent boards when we got them set up by legislation. You may recall, we had to make some amendments to get the legislation in place.

**Mr. Dewar:** The Provincial Auditor in her report of 1993 raised a number of concerns regarding the monitoring and so on. What action has the minister taken to deal with some of her concerns?

**Mr. Cummings:** That was the 1993 report. We have had two years since then, where I believe the Auditor has been complimentary of the process that is being used. The paper trail, if you will, and the reporting mechanisms were tightened up and, frankly, I believe the original report of the Auditor, if it had fallen a few months later in the review, that we would have had these mechanisms in place, as I recall. I am hoping the Auditor is now satisfied and the reporting has been tightened up, which was an important part of the fund such as this. You do not want to give somebody \$25,000 and have them spend it on something other than it was allocated for under the application process. So we now have a very tight, some

people say intrusive reporting mechanism for these projects even though some of them are quite small.

\* (1110)

**Mr. Dewar:** So one of her recommendations was to document the monitoring done, and that is now done?

**Mr. Cummings:** That is correct.

**Mr. Dewar:** In other words, they formally communicate the terms of the grants and the grant approval letters to the recipients?

**Mr. Cummings:** Yes, that has been done.

**Mr. Dewar:** Another one of her recommendations was to monitor the receipt of the final activity and financial reports?

**Mr. Cummings:** Yes, that has been done and as evidenced as well by the holdback, depending on the amount, we hold back 15 percent or 25 percent of the funds. Mr. Chairperson, 15 percent to 25 percent of the project is held back depending on the size of the project, and then the funds are disbursed on completion. So, if somebody really did intend to deceive the plan, the first hold we would have on the dollars is that we would not flow the last dollars.

**Mr. Dewar:** What is the maximum that a group can receive in terms of a grant?

**Mr. Cummings:** There are an awful lot of them that fall right around \$25,000. When you start exceeding that, you are probably looking at large projects. We have put out funds I suppose up to \$100,000, but that is the exception as opposed to the rule. Some of the transference of funds to departments to administer, there is a block transfer to Environmental Innovations in I, T and T and things like the Manitoba Youth Corps, which I referenced earlier, and the Economic Innovations program in I, T and T is an area where actually they did not expend the funds and they were lapsed funds at the end of the year in the first year or two of the program. That is now starting to see more uptake as well.

The member asked, is there a maximum amount? No. The project itself will be assessed as to whether or not

there is an appropriate amount. I can give you as an example that these are screened fairly hard and this is only by memory, but I can indicate an example of how tough it is to get approval under this fund sometimes. I can remember one meeting where 41 applications were there and 33 of them were refused. It is not a knock over in terms of approval. There are a large number of requests that come through.

**Mr. Dewar:** How many applications would you receive in a year and how many are approved?

**Mr. Cummings:** Last year there were 163 approvals out of 290 applications. Oh, pardon me, 290 were declined, so that would have been a total of 453 applications.

**Mr. Dewar:** How is the information given out to the public in terms of this whole program? I know that the Town of Selkirk they—I raised it with them and brought it to their attention. I believe there is an interest there to follow up and they are exploring the possibility of establishing a nature trail somewhere along the river, but I do not think they were fully aware of the potential of the fund until I brought it to their attention. How is this publicized out there?

**Mr. Cummings:** In the early year or two of the fund, I guess we got a lot of free advertising because there was a lot of discussion in the media about the 10 cents that we applied against liquor bottles, about the removal of the exemption of PST on diapers, but since then a pamphlet has been developed and dispersed at municipal meetings. There have been displays held at functions such as that, and I guess, frankly, the number of applications has risen so rapidly lately that we were almost afraid that it has been overadvertised because there is a limited amount of resources that can be applied to screening applications.

**Mr. Dewar:** So, if the Town of Selkirk were to make an application for a nature trail, that would meet the criteria of the fund?

**Mr. Cummings:** Those types of things have been funded, yes. One of the issues is, what percentage, and, again, the criteria is not hard and fast, but one of the issues is always, well, would they do this anyway and are they just looking for a way of saving themselves a few bucks? Secondly, and I am talking in the broadest sense here—frankly I want it on the record because of your

question, I would encourage Selkirk to put in a request, I mean that is not a problem—but the thing is, the fund is not going to fund 100 percent of it. It may only fund 25 percent of a project, or it may decide that this is an ongoing project for which the applicant has some limited resources to deal with it annually and that it will be an ongoing program. The fund does not fund three- or four-year projects, normally. The only long-term commitment we made was to the Youth Corps where there was a condition made that monies would come from this fund to support the Youth Corps every year. I believe it was an amount of \$200,000 that would go each year to support that project on a maxed-out basis of \$1 million, I believe it was, over five years.

So what I am saying is that if an entity puts in an application, this is generally a one-time grant. It is not something that would be granted \$25,000 a year for five years, normally. The only exception we made was the Youth Corps, which we saw as a priority that needed to be carried on on a continuing basis, for continuity's sake.

**Mr. Dewar:** I believe the City of Portage la Prairie received a grant for a nature trail or wilderness trail, if I am not mistaken, \$16,000. Is that a one time?

**Mr. Cummings:** I am pretty sure it would be one time. It is very rarely that we would do it more than that. Occasionally there have been big projects, as I said, that have done otherwise. It is almost always one year. Yes, it was a one-year project. It actually involved some riverbank enhancement.

\* (1120)

**Mr. Dewar:** Well, after the recent conditions in Selkirk, we could use some riverbank enhancement, after the flooding. But was that particular project then—was the City of Portage la Prairie required to contribute some as well? Was that the total funds that they required to do that project?

**Mr. Cummings:** They had a contribution as well.

**Mr. Dewar:** My final set of questions deals with the approval process. Who decides who receives the funds?

**Mr. Cummings:** As I indicated, there is an evaluation done by departments. Obviously Natural Resources and Environment do a lot of the evaluations; Agriculture does

a significant number, I, T and T. They send forward with a recommendation based on their best knowledge of what the benefit might be from the project. Then that information is assembled by the secretariat and brought to the committee, the Sustainable Development Committee. That committee then goes through them based on that information and whatever other concerns that may have been brought forward by the secretariat at that time, concerns for or against, quite frankly.

One of the things that we have struggled with, for example, is that in the early stages of the program there were some playground equipment replacements that were supported. It was an enhancement of a green space presumably, but after a while you start to ask yourself, how long should you continue funding playground structures? They were innovative structures, there was green space enhancement but, after a while, you have to say, there is probably a better use that these dollars could be put to, so those types of applications are now being—in fact, we are getting much more sophisticated and other projects more related to in some cases research, in some cases innovative approaches to land cover.

Purple loosestrife has been a problem in the province along with certain types of biological weed control to get away from the use of chemicals. There was a period of time when we funded through this fund I would think 10 biological weed control programs, and we did that for about two years, different weed control districts. Purple loosestrife, we have funded a number of those projects for removal of purple loosestrife. That was part of the Portage application. That is what reminded me that we have funded those types of projects. So the criteria are based on contribution to sustainable development of a community, bearing in mind that that is not just environmental law, it is also enhancement of the life of the community. Education, in fact there have been a number of projects that have been funded with the support of the Department of Education.

**Mr. Dewar:** But the final approval of the fund, is it not the cabinet that makes the final approval as to who receives the funds?

**Mr. Cummings:** It is a committee that I chair.

**Mr. Dewar:** And your recommendations go to cabinet? Are you the final say as to who receives the funds?

**Mr. Cummings:** On the basis that grants always have to have cabinet approval, so it is not the decision making on the recommendation that is done there, that is done by the committee. They make a recommendation which goes forward. I think I said that backwards. The committee makes a recommendation, but cabinet always approves the grant, it does not matter which department it is.

**Mr. Deputy Chairperson:** 1. Sustainable Development Innovations Fund \$3,200,000—pass.

Resolution 32.1: RESOLVED that there be granted to Her Majesty a sum not exceeding \$3,200,000 for Sustainable Development for the fiscal year ending the 31st day of March, 1997.

This concludes consideration of Sustainable Development Innovations Fund.

The next set of Estimates to be considered by this section is the Estimates of the Department of Family Services.

Shall we briefly recess to allow the minister and critic time to prepare? Thank you, we will take a 10-minute recess.

*The committee recessed at 11:25 a.m.*

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### After Recess

*The committee resumed at 11:33 a.m.*

### FAMILY SERVICES

**The Acting Chairperson (Mr. Jack Penner):** The Committee of Supply will come to order. This section of the Committee of Supply will be considering the Estimates of the Department of Family Services. Does the honourable Minister of Family Services have an opening statement?

**Hon. Bonnie Mitchelson (Minister of Family Services):** Yes, thank you, Mr. Chairperson. I am pleased to present to this committee for its consideration the 1996-97 expenditure Estimates for the Department of Family Services. I look forward to engaging in a

constructive discussion regarding the directions this government has set out for Family Services in these Estimates.

As we begin the 1996-97 fiscal year, one overriding reality cannot be ignored. That reality is the new era in federal-provincial cost sharing, which we entered on April 1, 1996, with the end of the Canada Assistance Plan after 30 years. The immediate impact on Manitoba of the introduction of block funding under the new Canada Health and Social Transfer is a loss of \$116 million, or 16 percent, in federal funding to Manitoba.

Next year this loss will increase to \$220 million. Our challenge as a government is to find the most creative ways of dealing with losses of this magnitude while continuing to be sensitive to the needs of those who are most vulnerable.

Manitoba is not alone in facing this challenge. In the past year, I have had the opportunity to participate as Manitoba's representative on the Ministerial Council on Social Policy Reform and Renewal which Premiers established in August of 1995.

This council was asked by Premiers to examine areas of provincial and territorial agreement on social policy issues and to recommend principles and values for reform. The work of this council was an example of how provinces and territories can co-operate to address the issues which we share in common.

Provincial and territorial ministers responsible for social services made a valuable and significant contribution to the council's work. Social services ministers are all committed to working together more effectively to meet the challenges and uncertainties which have arisen from the termination of the Canada Assistance Plan. We have agreed that reduced federal funding has made the elimination of overlap and duplication between levels of government more essential.

Provincial social services ministers have jointly called for the greater clarification of government's roles and responsibilities, particularly in areas such as income support for children in low income families, seniors, employables, persons with disabilities and other groups in Canadian society.

After considerable discussion at our recent meeting in Victoria, provincial and territorial social services ministers all expressed their strong commitment to work to promote the well-being and protection of children. We agreed to make it a high priority to collaborate on issues such as prevention, research and information sharing, best practices, training and certification, integration of services, adoption and child support. We also agreed it is essential to discuss the matter of child care with the federal government to clarify its intentions in this area.

Social services ministers will be requesting a meeting with Human Resources Development Minister Douglas Young in the near future. We want to work constructively and co-operatively with the federal government in addressing the country's social policy issues.

We hope that we will have more opportunity to meet with the new federal minister than we had with his predecessor. As social services ministers, we have not had a full meeting with our federal counterpart since February of 1994. This has made it very difficult to plan, to co-ordinate our efforts or to prevent overlap and duplication which is costly to all Canadians.

With support from other provinces, Manitoba has reaffirmed that the federal government must live up to its fiduciary and constitutional responsibilities for aboriginal Canadians. Manitoba has taken every available opportunity to express in strong terms the importance of continued federal government financial responsibility for aboriginal Canadians both on and off reserve. The Ministerial Council on Social Policy Reform and Renewal has articulated this view as one of the principles in its report to Premiers.

The systematic withdrawal by the federal government from its financial obligations has hurt Manitoba taxpayers, as well as contributed to inequities in the services available for aboriginal people. In the last five years, the unilateral cancellation of federal reimbursement to Manitoba for off-reserve child welfare and social assistance has cost \$94 million. Last year, the federal government attempted to withdraw support for two northern aboriginal communities adjacent to reserves which have been supported for years by the federal government as those communities have worked towards reserve status. While the federal Department of Indian

Affairs eventually backed off its original position, the attempt to withdraw services was traumatic for the communities involved and unfair to Manitoba taxpayers.

The Department of Family Services has an ambitious agenda for renewal and reform for the next two to three years. Initiatives include reforming Manitoba's welfare system by actively helping employable welfare clients gain independence through employment and moving to a one-tier system of delivery in the city of Winnipeg; strengthening the child protection and family support services by establishing and enforcing standards for the protection of children by working with communities to help families at risk and reviewing existing child welfare legislation; undertaking a review on child daycare to explore options for providing more flexible and affordable child care support for working parents while simplifying, deregulating and streamlining administrative processes; reviewing the office of the Children's Advocate; implementing new legislation and community-based services for adults with mental disabilities in order to promote and support independent living.

During the past year, the Department of Family Services has been reviewing its organizational structure to better meet the changing needs of the people it serves. A number of changes were announced recently which are intended to strengthen the department.

\* (1140)

The streamlined department now has three interrelated divisions, rather than four essentially separate divisions. These are Employment and Income Assistance, which is responsible for income security and related employment programs, policy and planning, and administration and finance; Community Living, which is responsible for the department's services to adults with disabilities and for regional operations; and Child and Family Services which is responsible for all programs and services for children. In this area, we have strengthened the ability of the department to establish and monitor standards in child welfare through the creation of a director of compliance position. In addition, we have formed a closer bond in the organization between child welfare, Family Dispute Services, and Family Conciliation Services. This structure will support improved co-operation between these three services and provide

greater opportunities for families to access an appropriate range of services to help them in resolving their difficulties.

Because these organizational changes were implemented after the 1996-97 Estimates structure was established, the review of the Committee of Supply will be according to the former four-division structure.

This month marks three years since the proclamation of the legislation which established the Children's Advocate. The Children's Advocate has now had the opportunity to submit two annual reports to the government which have been tabled in the Legislature. The Children's Advocate has consistently brought to the attention of the entire Child and Family Services system the difficult challenges faced in providing services to families in crisis. However, as I have pointed out on previous occasions, it was this government which took the initiative to create this position as a place for children and families to turn for help in representing their rights or interests within the Child and Family Services system. The previous administration had several opportunities to do so in response to a number of independent recommendations, but it did not take any action.

Children's Advocate is only one of the many, many tools that we have developed in our continuing efforts to find better ways of serving children and families in difficult circumstances. I hope that in the discussions which follow in this committee we will have an opportunity to discuss all of these many initiatives in some detail. As set out in the legislation governing the Children's Advocate, a committee of the Legislative Assembly will be established to undertake a comprehensive review of this office, as required, three years after proclamation. I will look forward to the report of this committee and to any recommendations it may make regarding amendments to this legislation.

This year we have embarked upon an important new direction for our welfare programs. In the new Employment and Income Assistance program we are emphasizing employment first for those who are able to work. As I meet members of the public at various community gatherings and meetings, they tell me that it is not unreasonable to expect people who are able to work to do so.

We know Manitobans are better off working. We know the best form of social assistance is a job. As our employment picture continues to brighten and the tax burden on our citizens declines, we expect to see fewer people dependent on social programs. This initiative will be a major step forward because, as all members are aware, the current welfare system has fostered dependence and a reliance on government.

With the very best of intentions, that of helping the most needy, we have encouraged a cycle which has created generation after generation of families on welfare. I am confident members of this committee will agree with me when I repeat once again that we want more for families and children in our province than a life of poverty on welfare. No one, including single parents, should be labelled unemployable. Welfare cannot be and should not be their only career option.

The public also tells me that we have done the right thing by adjusting our welfare rates so that the most vulnerable are the least affected. The clients who were not affected by the change made this year to social assistance rates include the disabled, the elderly, single parents with children who are six years of age and under, employable, two-parent families with children and women in crisis shelters. In other words, about one-half of those who are on social assistance will not be affected by the rate changes. Compared with rates across the country, Manitoba's rates fall within the mid to upper range, while the province has consistently been reported to have one of the lower costs of living.

Under the Making Welfare Work initiative we have been helping more people find work through programs like the Rural Jobs Project, Taking Charge! and the City of Winnipeg's Community Services projects.

As the opposition critic, the member for Burrows (Mr. Martindale), noted in his comments to the House on April 4, work helps our self-esteem and helps us feel positive about ourselves because we are contributing to our own independence by supporting ourselves, our families and society.

I have been privileged to attend two graduation ceremonies recently. As graduation ceremonies often do, these events touched me and provided me with the inspiration to continue on the path we have chosen. In

August, I participated in the graduation of 16 single parents on social assistance who are honoured for becoming the first graduates of the Customer Service and Marketing Agency Certificate program. This pilot program, an initiative of Training and Advanced Education, was the result of a co-operative effort by business, education, and government.

On March 8, I was pleased to attend the official opening of the Taking Charge! storefront office and the graduation of its first class. It was a very pleasant duty for me to congratulate the 18 single parents, as well as their families who were present for the occasion. It was also gratifying to know that several of the graduates were not able to be on hand because they were working.

One of the graduates said that Taking Charge! has given single mothers the chance to prove they really want to work and stay off social assistance. Currently there are 500 social assistance clients registered with Taking Charge!, and Taking Charge!, as members will recall, is a project funded jointly by Canada and Manitoba, and is designed to increase employment for single parent clients in Winnipeg. It was incorporated as a nonprofit corporation in April 1995 and its Executive Director Rosa Walker was appointed in September of last year.

In our emphasis on employment first we have developed several new and innovative partnerships, not only with other governments, but also with business, for people to gain employment in areas such as the apparel industry, call centres, and transportation.

I am pleased we have maintained our commitment to Community Living and Vocational Rehabilitation Programs by increasing the budget by 2.3 percent over last year. This will allow for increased financial assistance for adult residential and day services and for families and children who receive services under Children's Special Services.

In the eight years we have been in government we have increased expenditures in this area of the department by 59 percent. The increase in funding in those eight years has brought about an expansion of the system so that the total number of adults with a mental disability who will be supported in community residences or in supported independent living settings is up by 279 spaces, or 37 percent. In addition, adult respite will be provided to an

additional 221 primary caregivers, an increase of 46 percent. Mr. Chairman, 387 day spaces have been added, for an increase of 22 percent, and the number of children with a disability who receive support from Children's Special Services has gone from 913 to 1,721, an increase of 808 people, or 88 percent.

On February 5, I was pleased to announce the appointment of Dr. Allan Hansen as Manitoba's first Vulnerable Persons' Commissioner. We have written to various organizations to request that they submit the names of people to sit on the hearing panels established under the vulnerable persons legislation. These panels are a new way of involving community members in helping adults with a mental disability to live in the community.

Once these members are in place and have been oriented to their task, I look forward to the proclamation of The Vulnerable Persons Living With A Mental Disability Act. I believe this new legislation illustrates that we have responded in a very real way to the needs and wishes of Manitobans with mental disabilities and their families.

(Mr. Ben Sveinson, Deputy Chairperson, in the Chair)

After listening to our clients, the department has been changing the way it provides services, emphasizing community living and greater control by the consumer over support services. I want to assure Manitobans that child care will be available to single parents in their transition to work. We will continue to place an emphasis on flexibility to meet the needs of working parents and single-parent families.

As I have indicated, the impact of reduced federal transfer payments to Manitoba for social programs has presented us with some very difficult decisions. The reduction in the daycare allocation this year is one of those hard choices. The introduction of the Canada Health and Social Transfer this year means that the cost-sharing received from Ottawa for child daycare will be reduced by about \$3 million on a prorated basis.

As we reviewed all the programs and services in the department in light of the federal reductions during this year's budget exercise, it seemed preferable to recognize the underexpenditure that already existed in child daycare

due to the underutilization of subsidized daycare spaces and to reduce the allocation for this program accordingly.

\* (1150)

We will be taking this opportunity to carry out a full review of child daycare, which will be conducted by my colleague Mr. Marcel Laurendeau, the MLA for St. Norbert. I am looking forward to continuing the co-operative relationship which has developed with the child daycare community and to working with them, as well as with families and others, to complete this review of the child daycare system in the months ahead.

The area of child and family services remains a high priority for this government. Even though funding to this critical area has increased by 59 percent, money alone will not ensure Manitoba's children are safe. In keeping with the redirection of the child and family services system towards family support, family preservation and permanency and family responsibility, the Family Support Innovations Fund was developed to provide for the creation of new programs, to prevent the need to remove children from their families unless they are at risk.

Twenty-four projects have been approved in Winnipeg and in rural Manitoba at a total cost of over \$2 million in both 1995-96 and this year.

Last fall, I congratulated Winnipeg Child and Family Services on a program which was developed with a local television station, called Thursday's Child. It featured a child who was available for adoption into a loving family. I understand there was considerable public response to the program.

I am also pleased to note the success of the adoption initiative, which saw an increase in the number of children placed for adoption in 1995 over the 1994 total. Adoption efforts in Manitoba are being refocused to make adoption a priority for children over the age of one, who are in the permanent care of Child and Family Services agencies. This initiative involves a partnership among the Department of Family Services, Child and Family Services agencies and the adoption community.

The protection and well-being of children is a responsibility shared by all of society. In the months

ahead, we will be consulting with Manitobans to ensure that they have an opportunity to contribute to a review of The Child and Family Services Act and to help renew our Child and Family Services system. I am pleased that this community consultation will be undertaken by my colleague Mike Radcliffe, MLA for River Heights.

The services of our family conciliation branch continue to be important to Manitobans. We are anticipating that over 2,000 families will be provided with assistance, including 200 court-ordered assessments, 550 mediation classes, 1,200 information and referrals, 40 families for conciliation counselling, and workshops and therapy groups for over 800 parents and children. A new pilot program in the family conciliation area, entitled For the Sake of Children, was initiated last fall through the Family Support Innovations Fund. This parent education program provides separating or divorcing parents with information on a voluntary basis, regarding the needs of the children during and after the separation or divorce of their parents.

Family dispute services has developed as an important part of the range of services supported through Family Services. I feel proud of the work that has been accomplished in Manitoba in the area of family violence. Only yesterday, I had the opportunity to address the Northwestern Canadian Conference on Family Violence. This occasion provided a chance to reflect on the tremendous work that has been done in the community and in partnership with government to find a solution to family violence.

Violence within the community or family structure is never a justifiable occurrence. Family violence affects us all. It can affect our families at home, our colleagues in the work place, our friends and our acquaintances. It does not distinguish between rich and poor or stop at cultural boundaries. As the Minister of Family Services and as a woman I feel profoundly affected by every episode of family violence or victimization of women. Saddened as I am by these tragic events, I also take comfort from the growing number of voices which have emerged from the community to condemn these actions. I am heartened because I see the development as a direct result of the many partnerships which have evolved between government and the community to combat these forms of violence and end the abuse.

Family Dispute Services branch and Family Services was established just over 10 years ago beginning with only five programs. Today the branch works with almost 30 programs across the province to reduce the threat of violence. During this time there has been 168 percent increase in the funding services to this branch. We continue to refine the tools we have available to help the community respond to family violence. In the last four years we have begun funding shelters and second-stage programs for children's counselling services. Most recently a new funding model for second-stage programs has been designed to meet the variety of needs of women and their children who have left abusive relationships.

However, there is much work yet to be done. We must widen our approach to this issue. For example, we must re-examine how we teach our boys and girls to handle anger to break the cycle of violence across the generations. Violence is everyone's responsibility, and I feel hopeful that by working together in new partnerships and with the community we can be successful in ending the violence.

Could I just ask whether we might try to finish? I only have a page or two, and if it takes to a minute after 12, would that be acceptable?

**Mr. Deputy Chairperson:** Is it the will of the committee to continue past 12 if necessary? [agreed]

**Mrs. Mitchelson:** Another area where new partnerships can prove beneficial is in services to high risk children and youth. By establishing the Children and Youth Secretariat, I believe we have the opportunity to co-ordinate the services of various sectors in government to enhance services to children and young people. The secretariat, in conjunction with Family Services, Health, Education and Training, Justice, and Culture, Heritage and Citizenship has completed a review of the programs and financial resources spent by each department to respond to the needs of children and youth. From the review the secretariat has identified programs and expenditures specific to high risk children and youth. This information, available for the first time in a cross-departmental format, has provided the background for cross-departmental strategic planning.

Our children first strategy lays out a strong belief in the value of each child or youth and in his or her inherent

right to a safe and nurturing family and community which supports his or her development into a healthy and productive adult. The emphasis on the secretariat has been to facilitate change at all levels, to improve co-ordination of services for children, youth and families across departments and between sectors and to redirect the focus to prevention and early intervention within the existing resource base. During its second full year the Children and Youth Secretariat will work to develop partnerships of youth, parents, consumers, community agencies, nongovernmental organizations and government departments in a collaborative change process which will enable us to meet our commitment to children first now and in the years to come.

In closing, I want to note that in our allocation of expenditures for 1996-97, we have made every effort to maintain a balanced made-in-Manitoba approach to preserving and renewing services for our most vulnerable members of society as we face reductions in federal revenues. We have protected those most in need from the impact of these reductions.

We are taking a constructive innovative approach to helping people find work and become self-sufficient. In doing so, we have reached out and formed new partnerships with industry and community groups. These are important steps in a new direction on which we will be able to continue to build in the future.

As I have noted on several occasions, meeting the challenges of vulnerable families and individuals is not only a government responsibility, it is one that needs to be shared by the whole community. Every sector of society must be actively involved if we are to build safe, sustainable and healthy communities for families and children in Manitoba.

Government can be a partner and facilitator in this task. If we are successful in working together with both our existing partners and new partners we will see more families and individuals make the transition from dependency to self-sufficiency. The potential benefits for those families and individuals are immeasurable both in economic and personal terms. Benefits for their children will not only be to help them continue on the path to self-sufficiency but also to strengthen the whole community.

I would like to take this opportunity to thank all the staff in my department for their continued hard work.

The work of this department is always challenging and the staff always approach these challenges with a real commitment to the many Manitobans our programs serve.

I am very much looking forward to this committee's review of the Department of Family Services for 1996-97, and I welcome the comments of all committee members. Thank you.

**Mr. Deputy Chairperson:** The hour being 12 noon, the committee will recess until 1 p.m.

*The committee recessed at 12 p.m.*

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#### After Recess

*The committee resumed at 1 p.m.*

**Mr. Deputy Chairperson:** Order, please. We will resume the Estimates of Family Services. We thank the Minister of Family Services (Mrs. Mitchelson) for her comments.

Does the official opposition critic have an opening statement?

**Mr. Doug Martindale (Burrows):** It is always interesting to listen to the Minister of Family Services and to see from year to year who she blames for the fiscal problems of the Province of Manitoba. In the past it was the provincial deficit. Last year and more so this year, it is the federal government and their offloading and cutting money to the Province of Manitoba. I guess some of the previous years excuses the minister cannot use anymore because they are not there anymore.

In the past, the emphasis was on the deficit and needing to get the deficit under control. As the minister knows, there is no current year operating deficit. In fact, last year, there was a surplus of \$120 million so the minister had to find a new scapegoat, well, not really a new one, because last year the same minister blamed the federal government but, as we both know, the cuts went into effect starting April 1, so that was rather convenient for this minister.

This minister, to her credit, and the Minister of Finance (Mr. Stefanson) have been saying that they were not

going to backfill the cuts that were made by the federal government. However, I believe that that is a choice that this government could have made. For example, I have pamphlets summarizing the budget decisions in the Province of Saskatchewan, where they lost \$52 million from the federal government for social services and \$47 million for health and \$15 million for post-secondary education. The Province of Saskatchewan backfilled all of the cuts in social services, \$52 million; all of the cuts from the federal government in health, \$47 million; and \$11 million out of the \$15 million for post-secondary education. So that is one of the options that this minister and this government probably considered but rejected out of hand.

So instead we have the poor paying disproportionately for the federal government's cuts because of choices this government has made. I was briefed by one of the minister's staff on the cuts in social assistance and the total, I was informed, comes to \$23.1 million. Of course, we will get into that in much more detail later.

I believe it is probably the biggest cut of any part of any department, of any ministry of this government. This minister and this government are not facing up to the reality of the social deficit. They like to talk about the fiscal deficit, although they cannot anymore. They have had to change and talk about the long-term debt instead but are unwilling to talk about the social deficit, and so I will talk about the social deficit.

I am sure that this minister and her staff had numerous phone calls as a result, first of all, of the city of Winnipeg reducing their benefit levels on April 1 and then the province reducing their benefit levels for social assistance recipients on May 1.

Now, I understand that ministers are busy people and they probably do not take very many of those calls personally. I am sure that the staff handled the majority of those calls and it is too bad that we do not have the American congressional system here where we could command witnesses to come and testify, because it would be very interesting to hear the minister's staff, particularly the staff in the minister's office who answer the phone for her, to have them testify as to the kinds of phone calls and the kinds of remarks that people have made. I certainly hope she has been getting lots of calls, because I have been referring lots of people to the minister's

office. They phone me, of course, as opposition critic, I suppose because they assume or they know that I will be sympathetic. Frequently, they do not even think of phoning the minister's office. So, of course, I always tell them to phone the minister's office, and I tell them that the government needs to hear how their policies are affecting individuals, and the only way the government is going to hear that is if they phone government offices and, most importantly, the Minister of Family Services.

Now, I would hope the staff would at least pass on in a general way people's concerns, how angry they are, how upset they are. I do not imagine that all the details get passed on to the minister. I would assume there is a count of the number of phone calls, and I would hope that it is considerable. Unfortunately, people feel so beaten down that they do not fight back, and that is unfortunate. I am going to give the minister some feedback and her government some feedback on how individuals feel about the policies of this government and how they have been affected by the cutbacks.

The largest category of people phoning me are the people who now are expected to subsist on \$411 a month, municipal assistance in Winnipeg. People are phoning me and I have had several people who are crying on the phone. One person said, I wish I could just put a gun to my head. I feel more like a pastor than a politician when this happens, and I am very fortunate that I have a network of colleagues in the United Church across the province. I have made referrals to my colleagues so that people can get some pastoral support in their own community, because I do not have time to phone these people on a weekly basis and listen to their concerns. I wish I did, but I do not.

Another individual phoned one of my colleagues with the comment that he wanted to go out on the street and wave a gun around so he could go to jail. He thought that being in jail he would be better off than on assistance in the city of Winnipeg. That was before the Headingley riot; perhaps after the riot he might not have thought that jail was such a good place to be, but it shows how desperate people are when they say they would rather be in jail than on social assistance.

I had another individual phone me, one of my constituents. He has been on social assistance for several years. He got out of prison four years ago, a federal

penitentiary in Edmonton. When he was in prison he was getting a per diem and he was being paid to do work that the prison system was doing for the government of Alberta. His income in prison was \$188.30 a week or \$753.20 a month. On city social assistance he says his income is \$440 a month. Financially, he was better off in prison than on social assistance. I hesitate to bring up these examples in case the minister or the federal government starts to cut back on wages for people in correctional facilities, so that people are worse off.

However, I think it was a very telling comment that this individual thought that he was better off financially in a penitentiary than on social assistance. Now, his income assistance worker is telling him that he must sell his pet, a dog, and he said that the only thing he has to come home to at night is his dog. That is very common for pet owners, it is very common for seniors, and, obviously, it is the same experience that this social assistance recipient is having that his pet is very precious to him, in fact so precious that this is the only thing he has to come home to at night. Now his social services worker is telling him to sell his pet, or give his pet away, get rid of his pet because he cannot afford to keep a pet on social assistance.

One of my constituents phoned me, someone who has been on assistance for one year and cannot find employment, someone in her 50s. Her medications are no longer covered. I would assume that those are medications that are not on the list that are covered. Most medications are paid for when you are on social assistance. This individual has been getting counselling for abuse and has phoned her counsellor and said she can no longer afford bus fare to go to counselling, and so she will not be going anymore. She said it is just like being abused all over again.

I offered this individual bus tickets, but she declined. I will be intervening on her behalf with the City of Winnipeg to see that we can get her a bus pass so she can continue with abuse counselling.

\* (1310)

A constituent of the MLA for St. Vital (Mrs. Render) phoned me. She says people are making decisions who have no idea of what it is like to be on social assistance. She is in her 50s. She feels depressed. She is on

medication. It is degrading to be on social assistance, she says. It is hard to find work at age 57. It is evil—she is referring to the policies of this government and their social assistance cuts.

The poor are being exploited to benefit the more affluent. These policies will cause violence and desperation.

During the month of April, people in the United Church were encouraged to live on a welfare budget for a month, and I would like to read into the record one of the experiences of a family who attempted the welfare challenge. Well, in view of the time constraints I think I will table this, but it makes for very interesting reading because this is a middle-class family who I believe have two incomes and tried to live on \$514 for the month of April. They talk about the choices that they made, that people on social assistance have to make all the time.

For example, making long-distance phone calls for which there really was not money available to make if they kept within their budget, but because it was a family member who lived a long way away who was in a crisis, they made the phone calls anyway, and they said that if they were on social assistance for real, it is probably the kind of expense that they would have incurred, even if they had to go into debt to do so.

The monthly budget that they had calculated for them, normally they would spend just for food, leaving nothing for clothing, personal or household supplies, utilities, entertainment, or transportation. They realized that it was only a simulation, that it was not the real thing and they could make exceptions. But people on social assistance on a budget cannot make exceptions and they are very concerned and very upset with this government. I have had correspondence from many churches and many church-sponsored organizations, and I would like to just read one of those pieces of correspondence into the record.

The Diocese of Rupertsland wrote to the minister and also I presume to the Minister of Health (Mr. McCrae) because the NDP Health and Family Services critics were copied. They passed on the resolution of the diocesan council of the Anglican Diocese of Rupertsland from Tuesday, March 26, 1996, which says that the diocesan council oppose the cuts to welfare announced by the

Manitoba government on March 12, 1996, and call upon the government to rescind them and that this resolution be communicated to the Premier (Mr. Filmon), the leaders of the opposition parties and the Minister of Family Services (Mrs. Mitchelson)

So we know that there is widespread concern in Manitoba regarding these cuts this minister has made. This was a choice that the minister had to make and I would suggest a very deliberate choice knowing that probably the majority of the public supports the government in this choice. Politically it is a very popular thing to do, to cut welfare budgets. The minister probably had opinion polls to back that up, so there was not very much risk for the government, but the people who are subject to the cuts have paid the price and paid a very steep price, have probably paid the largest price of any government department in order for this government to project another surplus. So they are helping to pay not only for the federal cuts but helping the government to achieve their goals of building up a surplus which might be used for a tax cut four years from now which the Minister of Finance (Mr. Stefanson) has admitted.

Just before the break, the member for Emerson (Mr. Penner) suggested, jokingly I hope, that the minister should order in steak, and I said to the minister, I do not think this minister would do that. This minister learned a lesson from treating civil servants, her guests, at a very expensive restaurant in Winnipeg and apologized on the national media to anyone who might have been offended. I think the member for Emerson does not get it. He does not realize that the public does not want governments spending money in this way at the same time—and I think that is why it was a newsworthy story—that ministers of family services and social services from across the country were getting together to talk about how they were going to cut programs and spending in their respective provinces. So I presume that the Minister of Family Services will talk to the member for Emerson and caution him that he should not say things that could be put on the record that might embarrass her and her government, even if he was speaking in jest.

This is the International Year for the Eradication of Poverty. I do not think this minister is doing anything—well, first of all, I know the minister is not doing anything to commemorate the year, unlike the Year of the Family, is not doing anything to eradicate poverty

and is only making it worse. I think that will show up in statistics in future years, so that Manitobans will be worse off in those statistics and we will go back probably in some categories, like being the worst of all 10 provinces when it comes to child poverty, as we were several years ago.

Under Community Living and daycare, we have a freeze, a reallocation announced. I think that this is really a cut; I guess time will tell. We may find out by the end of Estimates whether it is a cut or not. I think this government has been duplicitous and misleading when it comes to the number of subsidized cases in child care. The minister announced an increase in the number of subsidy cases from 9,600 to 9,900 at a time that the minister knew that the caseload was below 9,600 and that there was a utilization. So it looked like a good-news announcement when in fact it had no effect on more children qualifying for subsidized care, and I will have a lot more to say about that later.

Last year in Estimates, the minister promised that the vulnerable persons legislation would be proclaimed soon, and we are still waiting. This process has been extraordinarily long and, unfortunately, the minister cannot explain why very well. We know that the position for the Vulnerable Persons' Commissioner was advertised, that people were interviewed. Then the advertising and the process of hiring were cancelled, and then, presumably, they advertised and interviewed all over again and eventually hired somebody from within the department. A good individual, by the way. I had a chance to meet him at the Association for Community Living annual meeting. In fact, unfortunately the minister could not make it to speak there, so they asked me to speak instead. I commiserated with them having to listen to me instead of the minister but was happy to have the opportunity.

So we are still waiting for The Vulnerable Persons Act to be proclaimed, waiting since July of 1993. I will want to know why there has been a further delay since last year's Estimates when the minister said the act would be proclaimed soon.

Under the Child and Family Services part of this department, the Children's Advocate has said that the Child and Family Services system needs to be rebuilt. We have had a number of children die, either in care or

who have been recently in care. The current process is that there are internal investigations and where there is a death, there is an inquest. However, this is not sufficient for the public to be assured that everything possible is being done for those children and to prevent deaths in the future. So that is why I have called for a full public inquiry, and it is not too late for this minister to have inquiries on some of these deaths because the inquests and reports are not over. When they are, the minister will still have an opportunity to have a full public inquiry.

\* (1320)

I believe that is important because it means that not only the cause of death can be examined but all parts of the system can be examined, including whether or not everything was done to ensure the safety and well-being of the child, but also whether or not sufficient resources were allocated to do home visits and to monitor the family and to do background checks and all those sorts of things that should be done. A full public inquiry could assess responsibility within Child and Family Services agencies, right up to and including the Minister of Family Services (Mrs. Mitchelson).

In conclusion, I would like to express my appreciation of this minister who makes doing Estimates quite a bit easier than it is for some of my colleagues. This minister actually answers questions, which is quite refreshing compared to some of her colleagues, and I appreciate that. It means that things flow quite quickly and smoothly here in Family Services Estimates.

I would also like to congratulate the new deputy minister who is a very competent individual and I am sure will do a good job. I heard, and not from the deputy minister, that she went to Vegas and I guess maybe hoped to get lucky and hit the jackpot in Winnipeg with an appointment while she was gone.

I am looking forward to the next week and a half, Mr. Chairperson. Thank you.

**Mr. Deputy Chairperson:** We thank the critic from the official opposition for those remarks. Under the Manitoba practice, debate of the Minister's Salary is traditionally the last item considered for the Estimates of a department. Accordingly, we shall defer consideration of this item and now proceed with consideration of the next line.

Before we do that, we invite the minister's staff to join us at the table, and we ask that the minister introduce her staff present.

**Mrs. Mitchelson:** Maybe, just for clarification, could I ask how we are going to proceed through the debate and that might help me to determine who should be at the table.

**Mr. Martindale:** Well, first I have some questions on the minister's introductory statement, mostly around federal funding, I guess, and funding for off-reserve First Nations people. Then I have some questions about the organizational chart and Appropriation 1. Administration and Finance (b) Executive Support and then lengthy questioning on the Children's Advocate's reports.

**Mrs. Mitchelson:** At this time I would like to introduce the staff that are present at the table. Assistant Deputy Minister Tannis Mindell, Associate Deputy Minister Doug Sexsmith, and Director of Policy and Planning Drew Perry.

**Mr. Deputy Chairperson:** We thank the minister. We will now proceed to line 1. Administration and Finance (b) Executive Support (1) Salaries and Employee Benefits \$487,300 on page 51 of the main Estimates book. Shall the item pass?

**Mr. Martindale:** I would like to ask the minister why Manitoba chose not to backfill the money that was lost from the federal government under the Canada Health and Social Transfer?

**Mrs. Mitchelson:** Indeed, it was a government decision not to backfill. We said it very clearly when there was a clear understanding that there would be major federal reductions. Can I say, in order to ensure that the programs that are needed for the most vulnerable people in Manitoba for the years to come, that it is important that we get our financial house in order. I do not want to leave a legacy to my children of debt and deficit and interest on the debt that they have to pay money that will have to come out of their pockets for the mismanagement of the public's tax dollars at this point in time, so I have to indicate that it was a definite government decision in our province.

I heard my honourable friend talk about Saskatchewan and how they have backfilled for the federal offload. If

he may recall back a few years, some things that the NDP provincial government in Saskatchewan did that we chose not to do at that time was to raise their sales tax from 7 percent to 9 percent and gouge those who lived in Saskatchewan and increased their revenues substantially by increasing taxes. We, as a provincial government here in Manitoba, chose not to do that. We chose to hold the line on taxes. Manitobans pay 2 percent less on their provincial sales tax than do those people in Saskatchewan. They increased their taxes substantially and people in Saskatchewan were having to take money out of their pockets to pay those increased taxes, where Manitobans did not.

As a result of the measures that we have undertaken over the years as a government, Manitobans are able to keep more money in their pockets to make their own decisions and their own choices. Many Manitobans believe that they can make better decisions on where to spend their very hard-earned tax dollars than governments can make.

So those were decisions that we made. We chose to try to get our financial house in order. We chose to keep taxes stable rather than increase taxes, where Saskatchewan made different choices. As a result, they are paying higher taxes and our decisions, our choices, have been different than their choices. We made a conscious decision not to backfill on what the federal government was offloading.

If you look back to the history of some of the offloading, Manitobans have had to pick up a greater share than those in Saskatchewan for the decisions that the federal government made on offloading their responsibility to fund services for aboriginal people in the area of welfare and child welfare off reserve. In my opening statements I indicated that as a result Manitoba taxpayers have had to pick up over the last three, four years \$94 million more for that federal government decision. That has been a greater amount than what Saskatchewan has had to pick up, although they are in the same circumstance and situation. I have to say that although their government may be of a different political stripe, their government is as concerned as our government with the federal offloading for aboriginal people.

We may agree to disagree philosophically on what direction we might take. My honourable friend says that

Saskatchewan has made different choices, yes, over the years they have made different choices. Where we chose to be responsible for the taxpayers of Manitoba and not increase their taxes, the Saskatchewan government has not chosen that direction. We may agree to disagree.

Maybe my honourable friend could indicate to me whether he believes Manitobans want to pay more tax and where in fact those taxes should come from to provide the services. We still, when you look at our budget and the allocation of our budget in Health, Education and Family Services, I think, we compare favourably or better than many other provinces in the proportion of our budget that goes to those vital services for Manitobans than many other provinces.

**Mr. Martindale:** Well, I would never, never for a minute suggest that Manitoba increase the sales tax or increase the deficit. However, going from memory, I think the projected surplus last year was \$48 million, but it ended up being \$120 million. First of all, why was this government so far off in their projected surplus, and why did the government make this choice? Budgets are really about choices that governments make. Instead of choosing to budget such a huge surplus, why was some of this money not allocated to Family Services, for example, so that you did not have to make such horrendous cuts?

**Mrs. Mitchelson:** Mr. Chairperson, I guess, again, it comes down to an ideology or a philosophical discussion. I tend to think that you, as leaders in the province and governments, those that are elected to govern should run the government and use the money—the only money government gets is that money that is contributed by taxpayers in the province of Manitoba.

I think we have a responsibility to be good managers of those tax dollars that we receive from Manitobans. I believe that we should run government with the money that is entrusted to us by those that work very hard for it in the same manner that we would run our own household.

\* (1330)

I have to tell you that if every Manitoban lived for today and did not worry about the future or what their future might hold and set aside some money for

emergency situations or circumstances that might arise from time to time, we would be in a pretty sad state of affairs. I have to say to you that I believe very strongly that we need to ensure that there is money for those times when money might be needed for unforeseen circumstances and that we should manage within and spend within the money that is raised or generated from those Manitobans that contribute in a very substantial way through taxes to allow us to govern and provide the services that are needed for Manitobans.

**Mr. Martindale:** Since this minister professes to be concerned about the federal offloading, and we knew that this was happening as a result of the '95-96 budget, why did the minister not go to Ottawa and appear before a parliamentary committee at the time that this was announced? We know that the Minister of Justice (Mrs. Vodrey) went to Ottawa, but the Minister of Health (Mr. McCrae) did not go to Ottawa. The Minister of Education (Mrs. McIntosh) did not go to Ottawa. This Minister of Family Services did not go to Ottawa. Why did you not try to influence the federal government at the time the cuts were announced instead of complaining about it in last year's Estimates and now again in this year's Estimates?

**Mrs. Mitchelson:** Mr. Chairperson, if go back to my opening remarks, again, I think you will have to recognize that, you know, over the past couple of years, back since February of 1994, the former federal Minister of Human Resources, who was part of, a major part of the decision making around the changes to our social safety net really was not interested in discussing with governments right across the country how we could co-operate and work together to try to ensure that there was some fairness to the decisions that were made. As you have seen, the decisions come around changes to CAP. The new programs, the new block funding that has been implemented, you will note that the transfers to provinces have been considerably greater than anything that the federal government has done itself to try to get its own house in order.

I ask my honourable friend, does he really think that the time would have been well worth the effort? Do you think that a federal minister who was not prepared to meet with provinces in any significant way for well over two years, do you think that was a government that was open to listen and that my presentation, or any other

minister's presentation from right across the country—and I do not believe there were any ministers of social services from New Democratic governments across the country that made presentations.

I believe that we worked collaboratively and tried to get our message across to the federal government that we were not happy with the direction they were taking, but does my honourable friend think that would be a good use of taxpayers' money, to go to appear before a parliamentary committee to present what we had already presented by way of letter to the federal government, very strong letters from all ministers of social services right across the country? Would it have been a good use of Manitoba taxpayers' dollars to go make a presentation before a parliamentary committee that had already made its mind made up?

**Mr. Martindale:** Since the Minister of Human Resources Development, Mr. Axworthy, would not meet with the minister in Winnipeg, the minister had the opportunity and could have gone to Ottawa.

I would like to ask some questions about the provincial social services ministers and their agenda and items that they are working on. I may have more questions about this later when I have one of their documents in front of me, but the minister did mention it in her opening remarks, and I would like to ask what is meant by greater clarification of government roles and responsibilities. I wonder if the minister could expand on that paragraph at the bottom of page 2 in her opening remarks.

**Mrs. Mitchelson:** Mr. Chairperson, in that one meeting we did have with our federal counterpart back in February of 1994, I think it was, it was labour market ministers and social services ministers that had the opportunity to meet with Lloyd Axworthy.

At that time, when we thought there was going to be a clear direction from the federal government and an action plan that involved provinces in an equal partnership in sitting down and discussing what social security reform, a reform of our social safety net, would be, we were actually quite enthusiastic, thinking that for the first time we would look at what level of government should be delivering what service, whose responsibility it was, how could we reduce the overlap and duplication and ensure that we were not trying to both do the same things, but in

fact we would be able to streamline processes, clearly identify whose role, whose responsibility it would be to deliver what programs to Canadians and how we could do that in the most efficient and effective way so that the administrative costs would be reduced and the dollars that needed to go to people would be used to their maximum potential and ability. We were very hopeful at that time that there would dialogue, consultation and collaboration between the two levels of government, and we would be clearly involved in the process. What we found out as we went along was that that action plan turned into a consultation paper which turned into a unilateral decision by the federal government to implement the major, very significant changes that they did make.

So the social services ministers still across the country, we believe that there is an ability for us as provinces to try to define what could be federal responsibility and what could be provincial responsibility and make recommendations or suggestions on how we might decrease the overlap and the duplication and ensure that the dollars going to Canadians are going in the best manner possible to utilize the maximum amount of resource to get to the people who really need the support.

\* (1340)

**Mr. Martindale:** Have the provincial ministers made any progress and agreeing amongst themselves as to clarification and roles, and also have they made any progress with the federal government? Have there been any decisions made or any changes announced or proposed even?

**Mrs. Mitchelson:** Mr. Chairperson, are we armed with a final position to go to the federal government? I do not think so, but I think there is an opportunity with the new federal minister for us to request a meeting—and you know that B.C. is the lead province this year for ministers of social services across the country—and at our last meeting we had much discussion and the direction that came out of that meeting was that the minister from B.C., who is our lead, would contact the federal government and request a meeting with the new minister. I think the deputies are meeting sometime later this month with the federal deputy to try to put that process in place and get a meeting with the federal minister to discuss how we might come to agreement and work together to see if we can define roles and responsibilities.

**Mr. Martindale:** I have not heard anything about progress. Would it be accurate to say that no progress is being made?

**Mrs. Mitchelson:** The work that has been ongoing between provinces is not finalized as yet, but we have working groups of officials that are meeting on a regular basis to try to come up with clear recommendations in the areas of income support for children and low-income families, seniors, employables, persons with disabilities and other groups in Canadian society.

**Mr. Martindale:** Also in the minister's opening statement, she mentioned that the provincial ministers have agreed to collaborate on issues such as prevention, research, information sharing, best practices, training and certification, et cetera, regarding children. What does that mean and has the collaboration taken effect, and has there been information and research sharing, et cetera?

**Mrs. Mitchelson:** Mr. Chairperson, this was an issue I guess I raised at our last ministers' meeting. Because the whole country seems to have been so caught up in social safety net reform over the last few years and all of our energies and efforts have been focused around trying to at least be participants—I do not think we were terribly successful as provinces because ultimately the federal government did make its own decisions on the direction it was going. But there are many other issues that social services ministers had put on the back burner, so to speak, because our meetings were dominated primarily by trying to find a way to communicate with the federal government around the direction we believe needs to be taken with social security reform.

The issues around child welfare, which are very important issues and which every province is struggling with—you know, B.C. has just had a major report, the Gove report presented to them which they have had to deal with, and every province is struggling around child welfare issues. I do not think there is anyone that has all of the answers or all of the solutions or a perfect system in place.

So I raised it as an issue that needed to be back on the table, that we needed to start to put our heads together around what was happening in different provinces, what kind of research, what kind of information did we have that we might share with each other on what was working

and what is not working, and is there anything that we can learn from experiences in other provinces or better ways of doing things.

It is not an area where I think anyone has the solution or the answer, and it was time that we focused, now that the federal decisions were made—yes, we have to continue to clarify the roles and responsibilities and get a meeting with the federal minister, but are there areas of co-operation that we can find interprovincially, specifically on the child welfare issues, to see whether we can find better ways of dealing with very vulnerable children and families in our communities.

**Mr. Martindale:** What has happened since the minister has agreed to make collaboration a high priority? Has there been research and information sharing?

**Mrs. Mitchelson:** There have been discussions interprovincially at the officials' level, and Manitoba will be taking the lead on this issue and will be convening a meeting of provinces at the staff level to see where we can go from here, what kinds of information, what kinds of data we have collected and researched and ways that we can support and look at different initiatives across the country.

So the work is just starting. That meeting was just April 1st, and there has been correspondence with B.C. being the lead province this year. Usually it is the lead province's sort of responsibility to communicate, and we just received communication not long ago that Manitoba would be the lead province on this issue and that at the highest level within our departments staff will be getting together and seeing where we go from here. So it will be happening.

**Mr. Martindale:** When the provincial social services ministers meet with the federal Minister for Human Resources Development, what would Manitoba like to see on the agenda?

**Mrs. Mitchelson:** Mr. Chairperson, one of the biggest issues for us is the aboriginal issue, the offloading of services off reserve for Status Indians and welfare and child welfare, and it is an issue that I have kept very high on the agenda of social services ministers. Although to the east of us, they do not consider it as big an issue because their per capita population of aboriginal people

is so much lower, it is a major issue for Manitoba, Saskatchewan, Alberta, British Columbia and the territories. That is one thing that in every piece of communication that provincial ministers have put out has been kept at the forefront.

I have mentioned it in a very brief meeting that I had with the new minister, have also been to Ottawa to speak to the Minister of Indian Affairs, and it is an issue that I would like to see discussed in a very significant way when we meet with our federal counterpart.

\* (1350)

Also I suppose it can be somewhat interrelated, and I think we have maybe had a chance to discuss this in the past, the changes to the unemployment insurance, which ties a lot of the federal training dollars to those that have been unemployed in the past. It seems to me that Manitoba is at a significant disadvantage when you note that many of those in our province, and particularly in our aboriginal community that have never had the opportunity to be employed in the past, will not be able to access those training dollars from the federal government because they are tied to previous employment opportunities.

I think that puts Manitoba at a disadvantage, as it does most of the western provinces and the territories, and that is an issue that needs to be well understood by the federal government. I think they need to rethink how they distribute the training dollars. I think that issue needs to be taken into consideration in developing unique programs for those provinces that do have the specific aboriginal issue. The federal government does, in my mind and in many provinces' minds, have some responsibility, major responsibility, both constitutional and financial responsibility to aboriginals both on and off reserve.

Child care is another issue that needs to be clarified at the federal level. As you know, the program that was announced by Mr. Axworthy was cancelled by Mr. Young and that was mainly because I do not think there was more than one province that—I think it was nine out of the 10 provinces did not agree with the approach that Mr. Axworthy was taking and did not feel it would be of benefit to them in their individual circumstances. I know that the new federal minister has been seeking advice

from the provinces on what they would like to see for child care, and I think you will probably find that most provinces have different needs based on their population, their demographics, the size of their communities, their workforce. He seems prepared to talk and to discuss the issues around child care, so that is another issue that we would certainly want on the agenda.

**Mr. Martindale:** Going back to the offloading of First Nations people on social assistance off reserve to the province, the minister has actually been quite good about keeping Manitobans informed about the cost. I think the first tally that I heard was \$25 million and the next was \$60 million and now we are up to \$94 million, which suggests that it has been going on for at least three years maybe, but the number of years is not nearly as important as the total cost. It seems that Manitoba and perhaps other provinces are not making any progress here and that the federal government seems to have dug in its heels and is not prepared to do anything about that.

Is the minister perhaps discouraged that this is the case and that they are never going to come through on this issue?

**Mrs. Mitchelson:** Mr. Chairperson, yes, I am discouraged. I have to say that it has been raised, and I suppose the one positive thing that has come from all of this is that all of the western provinces and the territories are finally beginning to look at strategies or ways that we can work together and maybe mount a stronger lobby than on an individual basis with the federal government. Critical in this whole process, too, is working with the aboriginal community. It is an issue that we have raised with the AMC and an issue that they are quite aware of and I think are in agreement with our position on the issue. Of bigger concern, of course, is the dismantling of Indian Affairs and the move to self-government for aboriginal people.

I sense and I hear from my colleagues, especially in the western provinces, that in dialogue with the aboriginal communities, the leadership in their aboriginal communities across the West and in the territories, there seems to be some common understanding emerging that this is an issue that we all need to look at very carefully and very critically and develop a position on. So that is starting to happen and I think sometimes there is a little more strength in numbers if we have provinces putting

their heads together trying to figure out how we might present our position to the federal government with a stronger voice that we may be heard.

**Mr. Martindale:** I would like to move on to unemployment insurance, I guess properly now called employment insurance. I have read various statistics about how the percentage of people covered by this insurance scheme is falling due to federal government decisions, and I think now we are down to about 54 percent of people who may be eligible for this insurance.

It is my understanding that whenever the federal government makes changes and fewer people qualify because of federal changes that these people end up on provincial social assistance much sooner than they ordinarily would or end up immediately rather than after their employment insurance is exhausted. I think maybe the minister has actually been keeping track of the cost to Manitoba of this.

I am wondering first of all if that is true and, if so, do you have any figures on how much you estimate the cost to Manitoba?

**Mrs. Mitchelson:** Mr. Chairperson, I think the last time the changes were made we estimated it was about \$3 million to \$4 million. I think I indicated that last year.

We have not got any figures or calculations at this point on the most recent changes that were made, but I will certainly share that, my honourable friend, when we do have that information.

**Mr. Martindale:** I would like to thank the minister for that. I think that would be a helpful figure to have. It also suggests that the cost of federal offloading is much larger than just the Canada Health and Social Transfer because, if you look at the cost of First Nations, people off reserve on social assistance and UI changes, we are talking about tens of millions of dollars more to the Province of Manitoba.

I am interested, and I know the child daycare community will be interested that this is an important item for this minister to put on the agenda when meeting with the federal minister. What kind of program or what kind of cost-sharing with the federal government would you like to see or are you seeking?

**Mrs. Mitchelson:** Mr. Chairperson, as we have indicated all along, more spaces was not necessarily the answer for Manitoba.

If you look around rural Manitoba, and I think the issue that has been raised most often is the ability for flexibility for seasonal workers in rural Manitoba. Much of our economy is based on the farm economy, and people are looking at seasonal-type child care support in many instances and nontraditional hours of support and service. So the issues in rural Manitoba are somewhat different or different to some degree than they are in our more major centres in Winnipeg, Brandon and Thompson but, still, many of the jobs that are coming to Manitoba are through the private sector.

When I look at the call centres, where probably many of our single parents may be employed into the future, we have already started a significant partnership in ensuring that those that are on social allowance have the opportunity to be trained and enter the workforce and the call centre industry. We know that is shift work and weekend work. We also know that many of—if you want to call them traditional female professions are in the nursing profession, the caring profession—many of those are shift work and weekend work. In the service industry many of the jobs are shift work and weekend work, and yet our child care system, which was developed, I guess, over the last two decades, really has not changed to meet the needs and the flexibility that is required to ensure that children are safe and secure in good environments while parents are working.

Also, I have had a lot of dialogue with the child care community that leads me to believe that some of the skills and the expertise they have and the training they have as early childhood educators would fit well into the whole new focus around early intervention, early child development that we have placed on our departments and through the Children and Youth Secretariat. I mean, we all know and I think many provinces, many of us have bought into the Fraser Mustard concept that the first few years of a child's life are very critical and very important. They need to bond. They need to be nurtured and nourished well, stimulated, and that really does get children off to a healthy start in life.

\* (1400)

I think there is a role for early childhood educators along with public health nurses and social workers, those who graduate from the faculty of human ecology. Our whole health, education, social work community needs to get together and put our minds around how we best use the resources that we have in all of those different areas to ensure that children's needs are being met at an early age. I think there is a role for early childhood educators outside of the structured child care setting that we have today to be a part of that process. I have challenged them, and I think they have risen to the challenge of looking at how we can refocus our programming for children at an early age to try to ensure that we get children off to a good healthy start to life.

I have had just very informal discussions with my federal counterpart. I have, in the few minutes that I had to meet with him, raised it as an issue. So I do not know whether child care dollars that come to Manitoba could focus on some of the new direction and some of the co-ordination of services that we are trying to provide to ensure that we are dealing with a healthy start to life.

**Mr. Deputy Chairperson:** I believe it was the will of the committee to take a five-minute, 10-minute break. A five-minute break.

*The committee recessed at 2:03 p.m.*

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#### After Recess

*The committee resumed at 2:12 p.m.*

**The Deputy Chairperson:** Order, please, to resume the Estimates of Family Services.

**Mr. Martindale:** I agree with the minister that there is a need for flexible child care, particularly for evenings and weekends. There is a need for more child care in rural Manitoba, but I am wondering if the minister thinks that the only way to get flexible hours in child care is if there is federal money to do it. Is that why the minister is suggesting that this should be on the agenda for the meeting with the federal minister?

**Mrs. Mitchelson:** Absolutely not, and that is some of the discussion we have been having with the child care

community, asking for suggestions and ideas on how we can best utilize the resources that we have to provide that flexibility and opportunity, bearing in mind I think both the child care community and government are both committed to ensuring that we try to develop the best program possible to meet the needs of working families and children, putting families and children first.

**Mr. Martindale:** So if the minister says that child care will be on the agenda in the meeting with the federal minister, what is it that Manitoba wants? Do you want more money, or do you want new programs or cost-sharing or what is it that you would like the federal government to do?

**Mrs. Mitchelson:** I think what we would like the federal government to do is to look to what Manitoba needs and possibly support with federal contribution some innovative new ways of delivering services to families and children through our child care system. That might be in the way of pilot projects that might test new methods of doing things. I think we are open and we are flexible and I think we need to understand where the federal government will come from. How much money have they allocated, or have they allocated any money specifically for child care initiatives? How, in fact, can we present to them what Manitobans need based on recommendations from the child care community, the families that need the service and our government, and what are they prepared to do to cost-share in any initiatives that might make our system more flexible to meet the needs of the families we need to serve.

**Mr. Martindale:** I do not know why I am wasting time asking questions about the federal government. The previous Conservative federal government reneged on their child care promises and the federal Liberal government has reneged on their child care promises. I am kind of flogging a dead horse here, so I will maybe keep it brief. If the federal government agreed to pilot projects or agreed to innovative ways of providing child care and they said it would be cost shared on a 50-50 basis with the province, would not Manitoba likely say no?

**Mrs. Mitchelson:** I think I have indicated in a very clear way that there is no more money, so within the resources that we have allocated to us how can we look for better ways of serving Manitoba families?

**Mr. Martindale:** So the only way that this could happen would be if the federal government were to put 100-cent dollars on the table, or if they increased the envelope for the Canada Health and Social Transfer and there was more money made available for social programs. Is that right?

**Mrs. Mitchelson:** Mr. Chairperson, no, that is not right. I indicate to you that one of the reasons we established the new secretariat was in fact to look at where our dollars were going in all four departments of Justice, Health, Education and Family Services to serve the needs of children and families, and if in fact we can find better ways of delivering service so that families are served in a more co-ordinated approach and were dealing with whole families instead of bits and pieces of families and children, there might be resources that are freed up to look at new ways of delivering service to children and families. If in fact we could identify where the savings could be found, those dollars could be contributed to new and innovative programs.

**Mr. Martindale:** My final comment on the minister's opening statement is in reference to the last paragraph on page 19 where the minister imagines that she has a balanced approach, a made-in-Manitoba approach to preserving or renewing services for the most vulnerable members of society and alleges that Manitoba has protected those most in need from the impact of reductions. I disagree with this minister on this bit of analysis, or so-called analysis, because certainly people on social assistance are vulnerable Manitobans. They have had their rates reduced significantly on May 1, and I believe that in child care there has been a reduction in the number of subsidy cases, which we will get into later under Day Care. So I do not think that this is a balanced approach. It is somewhat of a made-in-Manitoba approach, because I think we now have workfare in Manitoba, and I think the Manitoba version of workfare is if you do not accept a job or training then your benefits can be reduced or you can be cut off entirely. I think that is Manitoba's version of workfare.

I would like to move on to the actual Estimates book now and ask if the minister has a new organizational chart that she can share with me for the department.

**Mrs. Mitchelson:** Yes, Mr. Chairperson.

**Mr. Martindale:** I would also like to table two documents that I referred to in my opening remarks. One is entitled Attempting the Welfare Challenge by Bev Ward, and the other is Saskatchewan Budget Highlights.

Could the minister tell me why the department was streamlined to three divisions from four?

\* (1420)

**Mrs. Mitchelson:** Mr. Chairperson, I guess I have been the minister in this department for—what?—two and a half years. Not too long.

Mr. Chairperson, I hear my honourable friend from the opposition saying too long, and I have to say to you, and I will put it on the record, I have said it many time publicly, that when I was first appointed two and a half years ago to the Department of Family Services I received more condolences than congratulations. I really wondered what was in store for me, and I have to say that I have come to, as I understand the issues more and more, enjoy dealing with some of the very difficult issues that we have to deal with because I believe I care, and I am concerned about the health and well-being of all Manitobans. Challenges are great, but, over the last two and a half years, I have come to understand what the department is all about and have questioned maybe why all the services for children and families were not amalgamated in one area of the department. We had Children's Special Services in with rehab, community living and child care, and child care in that division, too. What we have done through the amalgamation is put all the services for families and children in one division and all the services for adults with disabilities and regional services, regional operations, in another division. We have also amalgamated welfare, our social allowance program, with administration and finance and Policy and Planning.

What I think gave us the opportunity to move fairly quickly after the budget was finalized, what gave us the opportunity to move very quickly was, of course, the change in deputy ministers, where the new deputy minister was formerly an assistant deputy minister in the department, one of the four divisions. We had a vacancy at that point which we chose not to fill, but in fact to streamline the department somewhat, so we could have the opportunity to move all the services for children and

family into one division, have the services for adults with mental disabilities in another division and reduce the number of senior management positions by one and move Policy and Planning and Financial Services under or in with welfare, the social allowance programs under an associate deputy minister. So we have three divisions. We have a central financial management system, a central policy and planning division now that will assign people to different areas within the department as need be to develop policy and programs.

**Mr. Martindale:** Why did the minister choose not to promote people from within and instead appoint somebody from her office be an assistant deputy minister?

**Mrs. Mitchelson:** I think, if you will look at the structure, many of the people that are part of our senior administration now are people from within the department that have been given new challenges and new opportunities. The assistant deputy ministers are people that—there is no one at the assistant deputy minister level that is new or from outside of the department. It is the director of the Child and Family Support branch that, in fact, is a person that has been appointed from outside of government, someone with experience in the child welfare system, years of experience in the child welfare system.

**Mr. Martindale:** I just got the organizational chart, so maybe I can ask more intelligent questions now. Could the minister give me the name of the new director of the child welfare and family support division?

**Mrs. Mitchelson:** Phil Goodman.

**Mr. Martindale:** This is the individual who came from the minister's office?

**Mrs. Mitchelson:** He had been working in a part-time capacity as an adviser to me. He had been working also at the same time with the Manitoba Adolescent Treatment Centre, had previously worked in the Winnipeg Child and Family Services agency and has had a number of jobs throughout the years dealing directly with high-risk children in need.

**Mr. Martindale:** Where did Mr. Fenwick go on this chart?

**Mrs. Mitchelson:** He went to become the executive director of Regional Operations.

**Mr. Martindale:** So that would be the second last box under Community Living?

**Mrs. Mitchelson:** Yes.

**Mr. Martindale:** I wonder if we could just go back to the rationale for these changes again briefly. What results does the minister expect to get from this so-called streamlining? What improvements do you think it is going to make to administration and to delivery of services?

**Mrs. Mitchelson:** I think it has the ability to make significant change. As I indicated, one of the primary reasons for our restructure was to try to amalgamate the services for children and families into one area. In the past under the assistant deputy minister of Rehab and Community Living, we had Children's Special Services and Child Day Care in with the programs or under the same administration that dealt with services for adults with mental disabilities. Then we had another branch with Child and Family Support programs. It did not make any sense to me to have Children's Special Services and Child Day Care not reporting under the same division, under the same assistant deputy minister, under one deputy minister. That fragmented services and it did not provide the kind of holistic approach we are looking at with the establishment of the Children and Youth Secretariat to try to develop programming that deals with whole families rather than bits and pieces of families.

So it made sense to me, and I would hope it would make sense to my honourable friend, to have services for families and children in one area rather than fragmenting it. So that was the rationale or reasoning for moving that in under one division under one assistant deputy minister.

Previously, we had an assistant deputy minister responsible for Finance and Administration, and Policy and Planning; and each different division had policy and programming and financial management. So in order to streamline management systems, we decided to centrally locate all of Policy and Planning and all of our financial administration in with our Social Allowances program under one associate deputy minister, who is Doug Sexsmith now, and have policy units or financial units

available to work throughout the department in a more co-ordinated fashion as need be. So, as a result, instead of having four divisions, we have three divisions with three senior managers rather than four, and I think a more co-ordinated approach to serving the people that we serve in Family Services.

\* (1430)

**Mr. Martindale:** The language sounds good. I guess the proof will be in what happens over the next few years. I am sure we will be reviewing this again in the future.

Could the minister tell me, and the answer is probably in the legislation, why does the Vulnerable Persons' Commissioner report to the assistant deputy minister for Community Living rather than to the minister like the Children's Advocate?

**Mrs. Mitchelson:** The reporting relationship to the ADM of Community Living is an administrative reporting relationship, but there is direct accountability to the minister.

**Mr. Martindale:** It does not show that on the organizational chart.

**Mrs. Mitchelson:** I do not think he asked a question.

**Mr. Chairperson:** The honourable member for Burrows, to ask a question.

**Mr. Martindale:** Well, I am finally ready to start some questions on line 1.(b), although I think probably those questions were appropriate there.

Could the minister tell me if the 10 SYs under 1.(b) are the minister's staff and does that include the deputy minister? Does it include any assistant deputy ministers? Who are the 10 SYs?

**Mrs. Mitchelson:** That is staff in the minister's office and the deputy minister's office, but it does not include the ADMs or their staff. Those are in the other lines.

**Mr. Martindale:** Does this line include a budget for the minister or for things such as meals or does that come somewhere else in the department?

**Mrs. Mitchelson:** That is under Other Expenditures under this line.

**Mr. Martindale:** I see that Other Expenditures includes transportation, communications, supplies and services. Is it the Other under Other Expenditures?

**Mrs. Mitchelson:** Yes.

**Mr. Martindale:** Could the minister tell me what Other includes?

**Mrs. Mitchelson:** I am trying to get the detailed information. It includes publications, travel, meals, some computer-related expenses.

**Mr. Martindale:** I have in front of me the annual report for 1994-1995, and I assume that this came out since the last year's Estimates process, so this is really the first opportunity that I have had to ask the minister questions on this annual report.

I have a number of questions on this line. First of all, in the Estimates under Other Expenditures, it is broken down into four items; but in the annual report, Other Expenditures is lumped together. It is not separated by category. Would it be possible to get a breakdown of the categories in the Estimates as to actual expenditure since they are not in the annual report, but could we get that information?

**Mrs. Mitchelson:** Yes, we can get that, and we can have it for you at our next sitting if that is appropriate.

**Mr. Martindale:** I would like to thank the minister for that. Also, I noticed that in '94 and '95 actual over estimates that in this line the minister was overexpended by \$39,000. The estimate was 80.7—I presume that is \$80,700 and the actual was \$119,700. Why is that?

**Mrs. Mitchelson:** We can provide that information the next time we meet, also.

**Mr. Martindale:** I am wondering if the minister can tell me why the annual report does not have as much detailed information as the Estimates.

**Mrs. Mitchelson:** It is a standard format for the annual report, and the Supplementary Estimates are a standard format, and that is additional information provided about the budget. It is my understanding it has only been six or seven years, maybe a few more, since so much detail has

been provided in supplementary form to members of the Legislature for budget consideration.

**Mr. Martindale:** Since the fiscal year just ended on March 31, is it too soon to have the actual expenditures for the '95-96 budget year?

**Mrs. Mitchelson:** Mr. Chairperson, my understanding is that it is not entirely finalized until about the middle of June.

**Mr. Martindale:** That is regrettable. Maybe we should be here in the middle of June.

I would like to go on to the Children's Advocate's report on which I have numerous questions, and maybe the staff could—

**Mr. Deputy Chairperson:** Would you like to pass 1.(b)(1)?

**Mr. Martindale:** Good idea.

\* (1440)

**Mr. Deputy Chairperson:** 1. Administration and Finance (b) Executive Support (1) Salaries and Employee Benefits—\$487,300—pass; (2) Other Expenditures \$80,700—pass.

1.(c) Children's Advocate (1) Salaries and Employee Benefits—\$213,800.

**Mr. Martindale:** Perhaps the minister's staff could help the minister and I through these reports. The reason that I make that request is that the first annual report taking up their cause has numerous recommendations, and the Second Annual Report of the Children's Advocate has basically reiterated many or most of those recommendations and has also got a chapter on the ministerial and departmental response to the '93-94 recommendations. I originally had written my questions based on the first annual report, and then I see that a lot of the answers are in the second annual report. This might get complicated, but bear with me.

To start off with, there is a small increase in the budget for the Children's Advocate. Could the minister tell us what the very small increase is for?

**Mrs. Mitchelson:** Mr. Chairperson, it is merit increases for staff salaries.

**Mr. Martindale:** Going by memory, I think the Children's Advocate had asked for more resources in order to hire more staff and also to—I think it was open an office in another part of Manitoba. I am wondering what the minister thought of those requests.

**Mrs. Mitchelson:** Mr. Chairperson, yes, the Child Advocate has asked, I think for a couple of years now in a row, for additional staff resources and the ability to open another office outside of the city of Winnipeg.

The decision has been that we will await the review process of the Child Advocate's office and determine what the reporting mechanism will be and what the roles and responsibilities will be and evaluate how well we think the office has worked. As a result of that all-party committee that will be struck very soon, we will determine and evaluate the office to this date, and it was premature to be making decisions on expansions until we understand fully what the reporting relationship may be and how the office might work after that review.

**Mr. Martindale:** I will have more questions on the review later. The first annual report was for the fiscal year 1993-94. It was tabled in April '95. The second annual report was for '94-95 for the period ending March 31st, 1995. It was tabled April 1996. So both of these reports have been over a year old before they were tabled.

I am wondering why the minister cannot table this annual report in December when the House is in session.

**Mrs. Mitchelson:** Mr. Chairperson, we received the report from the Children's Advocate three days before the session ended in December and did not have the opportunity to review it and prepare our responses, so that was why it was not tabled in December, and it was tabled according to legislation as the spring session began.

**Mr. Martindale:** Would the minister be willing to ask the Children's Advocate to submit it at least 15 days before the December session, so that the minister would table it when the House is in session in December?

**Mrs. Mitchelson:** Mr. Chairperson, I guess the year ended at the end of March, and, obviously, the Child

Advocate felt he needed the time that he needed in order to prepare his report. I have no problem with asking him to try to write his report in a more expeditious way, but unless my honourable friend has more information than I have, according to the new rules, I am not sure if there will be a December sitting.

**Mr. Martindale:** Well, there probably will be a December sitting, but, of course, it is up to your Premier (Mr. Filmon).

My point here is I believe we need these reports on a more timely basis because if we do not have the opportunity to ask the minister questions in Question Period or in Estimates until 13 months or 14 months after the fiscal year-end, then the minister is in an extremely advantageous position of being able to say that she has implemented most of the recommendations, and that means that there is a lot less accountability for the minister as to the content of the reports, and, as the minister knows, the first annual report was extremely critical. The second report suggested a lot of the recommendations have not been implemented.

So I am wondering what this minister can do, other than blaming the Children's Advocate for submitting it late, to provide these reports on a more timely basis to the Legislature.

**Mrs. Mitchelson:** Mr. Chairperson, I do want to clarify the record, because I would not want my honourable friend to leave on the record false information that indicates I blamed the Child Advocate for submitting a late report. I did not blame the Child Advocate. I, if anything, was trying to defend his need to write his report.

But on the recommendation of my honourable friend, I will write to the Child Advocate, with a copy to my honourable friend, indicating that my honourable friend has recommended that he do his report in a more expeditious fashion in the Estimates process and ask him whether, in fact, he might like to consider my honourable friend's recommendation and write his report on a more timely basis.

**Mr. Martindale:** In the Advocate's first annual report, on page 8, the Advocate says that he would like to have a role to play in influencing policy and funding decisions.

Could the minister tell us if he has been invited to meetings at which he could influence policy or funding decisions?

**Mrs. Mitchelson:** Mr. Chairperson, from time to time, I meet with the Children's Advocate, and we communicate on a regular basis. He communicates with me and I communicate with him, and he has every opportunity to make recommendations on policy direction, but, ultimately, it is up to government to make policy decisions and implement those policies, and part of his role would be to, where he feels it warranted, provide constructive criticism on the direction that government has taken.

That is the role of the Child Advocate, but it is ultimately up to government to make those policy decisions. I would welcome his recommendations on what policy direction he believes we should take, but as I said earlier, ultimately it is government's decision to develop policy and implement that policy, and the same goes for funding decisions.

Government ultimately through its budget process makes decisions. I would welcome, and I do welcome, the recommendations that the Child Advocate might make to government, and I welcome his criticism if he believes we have not made the right funding decisions, but we as a government ultimately have to be held accountable for the decisions, the policy decisions, and the funding decisions we make. I welcome advice from the Child Advocate and from anyone that would like to provide advice and recommendations, and we will take all of those into consideration as we develop our policies and our budgets.

\* (1450)

**Mr. Martindale:** I appreciate the minister saying that the Children's Advocate has met with her and that is appropriate. The minister pointed that out in her ministerial statement in the Chamber and has repeated now in the Estimates process. It is appropriate that the Children's Advocate meet with the minister because ultimately the minister is responsible for all policy decisions, but the Children's Advocate was requesting that he be invited to meet with people who are part of the policy and funding decisions. So I am wondering if the Children's Advocate is invited to meet, for example, with

the assistant deputy minister and his staff who have a hand in making these decisions or at least making recommendations to the minister.

**Mrs. Mitchelson:** The Child Advocate is free to meet with the deputy minister at any time he requests, and he does meet with the ADM and the director of Child Welfare on a regular basis to discuss programming issues. He is part of the executive director of Regional Director Working Group, and he has had an opportunity to meet with individuals in all of the regions of the province and with individual Child Welfare agencies throughout the province—so free access to discussion of the issues and the directions that we are taking. Obviously, as a result of those discussions, he has made comments in his annual reports.

**Mr. Martindale:** In the Children's Advocate's first annual report, on page 8, he says, "I believe that I have not always been able to successfully influence policy or funding decisions. First, because I have not been invited to participate in any of these processes; and, secondly, the majority of such activities and decisions are directly related to government's agenda for cost reduction and not necessarily service enhancement based upon the actual needs of children and families being served by the Child and Family Services system."

Could the minister tell me if this has changed since the Children's Advocate's first annual report? The minister has referred to different people interdepartment that he meets with, so I would like to know if this concern, the Children's Advocate, has been taken care of?

**Mrs. Mitchelson:** If you want the short answer, the short answer is no. I will go back to the first answer that I gave, and that is that the Child Advocate has a role to ensure that the needs of children are being met and that programs are responsive to children and their needs. As far as the Child Advocate getting involved in the budgetary process for the Department of Family Services, that will not happen. He can, however, make recommendations at any time about what he believes should happen, but, ultimately, we take his recommendations into consideration as we move through the budgetary process, and, ultimately, government makes the budgetary decisions, and the advocate has the opportunity to support those decisions or be critical of those decisions.

From time to time through the year, he can write or meet and make recommendations on where he feels dollars should be allocated. We may agree or we may not agree. He is free to write his report accordingly after the fact, and he can make recommendations on what policy direction he believes government should take. We will evaluate those recommendations and move on those recommendations as we see fit, and he will be able to report accordingly.

**Mr. Martindale:** I would like to move now to the recommendations in the first annual report on page 37. I guess we need to cross-reference the second annual report on pages 17 and 22. Under the category of recommendations concerning the Children's Advocate, I presume that the response in the second annual report on page 22 is a general response to all five of the advocate's recommendations. That is, all of these five concerns could be raised at the time that the review by a legislative committee is done. Is that correct?

**Mrs. Mitchelson:** Yes.

**Mr. Martindale:** How many MLAs will likely be on this committee?

**Mrs. Mitchelson:** The process that is followed is our government House leader speaks to the opposition government House leader because it is an all-party committee, and they will determine which committee it will be referred to, and it will be the composition of that committee that makes up the membership.

**Mr. Martindale:** So the minister does not know how many opposition members. Is it conceivable that there could be recommendations made to the minister regarding amendments to The Child and Family Services Act regarding the Children's Advocate?

**Mrs. Mitchelson:** I will be, as the Minister of Family Services, on that committee, whichever committee it is, whatever committee is struck. Certainly there may be recommendations that come from the committee on how the Child Advocate's office should run. There may be recommendations that come from the minister to the committee on what direction we believe should be taken with the Child Advocate's office. We are all part of the team when it comes to making the decisions or reviewing the office.

**Mr. Martindale:** Well, I hope to be on that committee, too, so I look forward to that process. I think it is probably a process that should be used more often in this Legislature.

Would the minister agree that some of his recommendations are really quite minor, or if amendments were made to the legislation, they would be quite minor, for example, giving the Advocate the power to reject complaints that are frivolous.

**Mrs. Mitchelson:** Mr. Chairperson, I guess what we would need to do would be explore that as a committee. I mean, what is the definition of malicious, vexatious, and frivolous? If it was the committee's view that that should be contemplated, we might consider that. It has been a long time since the first annual report came out and I am not sure that—

**An Honourable Member:** A good point.

**Mrs. Mitchelson:** Yes, you have made that point, too, just a few minutes ago, but I am not sure that I can recall in my discussion with the Child Advocate exactly what his definition of those words, or his interpretation of those words was. It is probably something that I should clarify—good point—with him before we go to the committee process, so that I could share that with my honourable friends that are sitting around the table, so we can have full discussion around what direction we believe we should go on that recommendation.

**Mr. Deputy Chairperson:** The time being three o'clock, committee rise.

## HEALTH

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

Would the minister's staff please enter the Chamber at this time. We are on Resolution 21.4 Health Services Insurance Fund (c) Hospital and Community Services, Hospitals.

**Hon. James McCrae (Minister of Health):** I think if you look at the record of yesterday's question asked last

by the honourable member for Inkster (Mr. Lamoureux), you will find that the following answer would be responsive to the question: There would not be enough.

**Mr. Dave Chomiak (Kildonan):** Mr. Chairperson, just to commence the day with respect to where we might be going. I anticipate we will be moving on today, and I anticipate we will be actually getting into the specific capital issues today. I just want to advise the minister. I am hopeful that we will be able to deal with capital issues today.

**Mr. McCrae:** That is agreed, Mr. Chairman.

**Mr. Chomiak:** When I was last discussing this item with the minister, we were talking about population needs-based analysis. What I was trying to get at in my question was whether I as an MLA could take the Centre for Health Policy and Evaluation, the various studies that I have access to, the public documents, and whether if I were to reach conclusions with respect to the use of resources in the health care system, whether that would be the same information that the Department of Health is using or whether they would have access to other information that I do not have access to and then perhaps could reach different conclusions.

That was where I was going, so that was the line of questioning. I wonder if the minister might comment on that.

**Mr. McCrae:** The kind of information that the epidemiology unit or the Manitoba Centre for Health Policy and Evaluation would utilize in arriving at its conclusions is all very public and very available to anybody. People, like members of the Legislature, have that information or can get it quite easily. So their work is a statistical analysis of information from the health database, from Family Services database, Statistics Canada, economic databases that are there and available to everybody. Usually, when we get a report from the Manitoba Centre for Health Policy and Evaluation, it is based on information that is a year or two old and it has been out there for awhile and things do change as time passes.

The hospitals in Manitoba share information with the department to help us arrive at various funding mechanisms or levels. That is not always something that

is available, certainly not immediately, for public information and so any decisions that get made in the future will be made based on a combination of factors, information from the centre, for example, but also information provided directly from the hospitals. Sometimes they may not want to have that information made public and, if that was the case, we would have to respect that. But, generally speaking, we are trying to have an extremely transparent way of arriving at decisions so that when it comes time to justify those decisions, we have information with which to do it.

**Mr. Chomiak:** Mr. Chairperson, KPMG has been using extensive information. From my interpretation of the data, it appears that most of it is based on hospital data. Is that a correct assumption?

**Mr. McCrae:** KPMG is doing work on secondary facilities and services, as well as primary care issues, so a lot of their information comes from the community as well on the primary side of it and personal care homes.

\* (0910)

**Mr. Chomiak:** Mr. Chairperson, is there a central database or central repository from which KPMG is either gathering or depositing this information, so that all the members of the Legislature could have access to that same database?

**Mr. McCrae:** KPMG, like other consultants, accesses information from various quarters, and I am not sure what the honourable member is asking, exactly. Certainly if he wants to know something or has a specific inquiry, we will investigate or provide the information the member is looking for, but KPMG, as a company, may have some information base of its own that I am not familiar with, but they access information from various sources.

In their work with the government they would get information from the databases that I referred to earlier, and if they had trouble accessing it, and there was some way we could help them get it, then I am sure that is what we would do. If the member would be specific about something, we could either find out or ask KPMG ourselves and get the information for the honourable member.

**Mr. Chomiak:** I will be specific, to give an illustration. In one of the KPMG reports, they indicate, for example, that in Winnipeg and Brandon we have 3,500 hospital beds, 2,700 for major acute services, 800 for long term, and in fact, they specify that Winnipeg, for example, has 2,667 hospital beds. Is that accepted by the department as the actual numbers for the city of Winnipeg and/or Brandon as per KPMG's analysis?

Does the minister see what I am getting at? I am trying to determine the basis that we are working from in all of these systems and reports, and I am not always sure if the data that is presented is actually accepted by the department as data or not.

**Mr. McCrae:** I am going to give the honourable member some numbers and they are probably—I think they are different from the ones that he has quoted from KPMG, and if they are it is probably because of the difference in time.

The number of acute and Other, Other being long-term or chronic type beds, at any given time can be different from any other given time. So as of April 19, 1996, is the time frame that I am going to talk about. The record that I have as of April 19, the number of setup beds—I am sorry, as of April 1. As of April 1, there are 2,380 acute beds in Winnipeg, and 691 Other, being long-term or chronic beds in hospital. [interjection]

I will give a number for Westman, which includes Brandon, and I do not have Brandon broken out here as of April 1, 1996, but in Westman, 660 acute beds and 78 Other.

**Mr. Chomiak:** Does the minister have figures for outside of Winnipeg, as well, so that we could put it into a provincial-wide—[interjection]

\* (0920)

**Mr. Chairperson:** If I could just ask the minister for one minute. Is Hansard having a problem picking the member up when he is speaking, or do you want him to bring his mike down? Bring the mike down a bit? It is just that you are sitting.

**Mr. McCrae:** According to the regional bed map, as it were, not under the new regional system but the old regional system: Central Region has 373 acute and 53

Other, as of April 1; Eastman, 183 acute, and 23 Other; Interlake 194 acute, zero Other; Norman 143 acute, 2 Other; Parkland 278 acute, 17 Other; Thompson 134 acute beds, 12 Other; Westman 660, and 78 Other; Winnipeg 2,380, and 691 Other, for a grand total of 4,345 acute beds, 876 Other.

If the honourable member wants information about personal care home beds, I have that by region, as well.

**Mr. Chomiak:** Perhaps while the minister has that listing, yes, I would appreciate it, as well.

**Mr. McCrae:** For personal care home beds in Central, 810; Eastman, 464; Interlake, 504; Norman, 126; Parkland, 545; Thompson, 26; Westman, 1,526; Winnipeg, 4,895, for a total of 8,896.

**Mr. Chomiak:** In the figures the minister gave, the second figure was the Other. Other entails chronic. Does it include anything else other than chronic?

**Mr. McCrae:** Other includes beds approved as chronic, long-term assessment, rehabilitation-panelled, palliative and psychiatric extended treatment. That is what Other means.

**Mr. Chomiak:** It is very easy to understand how we can get into huge debates with respect to beds. I am not intending to do that. We have already had discussion about that. What I am really trying to establish is a base here. It is interesting, the figures differ somewhat from what is used in the KPMG analysis, maybe because the minister indicated that there was 2,380 acute care beds in Winnipeg. KPMG identified 2,667. Can the minister maybe explain that?

**Mr. McCrae:** Now I find I have to ask the member some questions. One, what is the date of the KPMG number, and does it include random?

**Mr. Chomiak:** No, the KPMG numbers from December 5 and 6, '95, it is only Winnipeg, and it says, Winnipeg, hospital beds, 2,667. I am sure it excludes long-term care beds. I know that is what we get, I am just trying to determine where the discrepancy roughly is.

**Mr. McCrae:** Does the KPMG number include the Other category?

**Mr. Chomiak:** I do not believe so.

**Mr. McCrae:** We will do some reconciliation here and get back to the member.

**Mr. Chomiak:** Just kind of finally in this area, in the last Annual Report of the Department of Health, the total number of beds given at January 1994 was 8,182. Does the minister have an update to that figure? That is from the annual report, page 134, the reconciliation and dealing with beds, it gives total number of beds, January 1994, 8,182. In its total, it includes personal care home beds, et cetera.

**Mr. McCrae:** In reconciling all these numbers, I will ask the department to take that particular number in the annual report into account, as well, and we will come up with an explanation for the honourable as to the variance in these numbers.

I guess it is a question of which organization is counting them and which ones are counted in and which ones are counted out, and there must be some kind of clear way to respond to this, so that both the honourable member and I are working from the same understanding.

**Mr. Chomiak:** Notwithstanding we have many disputes over health care, I always try to use departmental material in my analysis because it is the only base I have, but it is very easy to see why various individuals involved in the debate can achieve accurate conclusions on the data, and everyone is actually right, based on the actual data that they are looking at, even though we are basically dealing with the same data. So it at least provides for interesting debate.

**Mr. Chairperson:** Shall the item pass?

**Mr. McCrae:** One more comment, Mr. Chairman. It is important to put all this in a context, too. I think in the olden days when the Canada Health Act was interested in funding beds and people in them and the doctors, these things maybe had more relevance in those days.

Today, we do not look at health in the way we used to, and measuring the number of beds you have is a measurement basically of not very much because it is hard to conclude anything from bed numbers.

It is clear to everybody that we have way too many beds, and that is something that has to be addressed. When I say way too many beds, by that I mean we have a horrendous cost associated with keeping more acute beds in service than we need. It is clear to everyone that that is a problem we have. Certainly these numbers reflect in the regions. The bed numbers are higher in Manitoba outside the Perimeter Highway per thousand population than they are even in the city of Winnipeg where the bed numbers are very high.

So there is general agreement that that is high, but how high of course is something that needs to be analyzed and looked at, but I think the fact that the number the member has, the number I have, that they are a little bit different, really, I know it is nice to have precision, and we expect to get that, but I think the member is right that it is not appropriate that we spend too much time counting hospital beds because, as I say, the use that those beds are put to is very different today than used to be the case.

The story I told yesterday I think is going to become repeated more and more often. When you are sending a get well card, just send it to the person's home.

**Mr. Chomiak:** In the city of Winnipeg there is a fairly established process for dealing with the changes in the system. We have the Urban Health Planning council. We have KPMG. We have the information coming together and recommendations ensuing. We have the strategy committees and the various 13, what used to be called troikas, but design teams, I guess, is the name.

\* (0930)

That is in the city of Winnipeg, and we know that the government is proceeding on regionalization outside of Winnipeg. Can the minister give us a clear idea or even graphic illustration, or, if possible, even a flow chart of some kind that outlines the process outside of Winnipeg?—because it is fairly clear where we are going in Winnipeg. It is fairly clear to observers exactly what the process is.

Notwithstanding that we have the recommendations contained in the regional and northern report, I am not as clear in terms of the specific processes and the specific systems that are in place to deal with the changes that are

going to happen outside of Winnipeg. So can the minister give us a clearer picture of that, please?

**Mr. McCrae:** The KPMG and Urban Planning Partnership deals primarily with Winnipeg. KPMG includes Brandon, and beyond that in their various regions the needs assessment work is beginning this year by the new regional health authorities and from that needs assessment will come the clear requirements that are there in rural Manitoba, and we will go from there, from a needs assessment, in designing the various health systems in regionalized Manitoba.

**Mr. Chomiak:** Maybe I did not pose my question correctly, but I cannot help thinking it is more complicated than that. The department is presumably going to be giving to each of the regional health boards next year, April 1, '97, budgets for their regions, and presumably the needs assessment will have to be—I mean those determinations will have to be made prior to the budgets being allocated, so I guess what I am trying to get at, and that is one of the reasons for the questioning about needs based and the data, is where that information is coming from and how it is going to be interpreted, who is going to do the interpretation. I recognize what the minister is saying, but there must be a more elaborate process involved in this at least to make those determinations because of the changeover April 1, '97.

**Mr. McCrae:** Well, the member is right. It is more complicated than I described, or than it even sounds, and it has to be done over a number of years. It cannot be done just all of a sudden that next year's budget for Marquette region, for example, will be X dollars, because you cannot make a determination from that that the following year you can reasonably expect it will be X-plus or X-minus based on this, that or the other, because we do not have all of that information in yet.

The Manitoba Centre for Health Policy and Evaluation will indeed be working with various regional authorities this year to look at the population issues and the determinants of health in the various regions to find some reasonable level of funding so they can carry out their work next year, but as we move through the next three, four, five years, Manitoba Health and the regions will be watching very carefully how the funding works, because it may very well be that by the beginning of the year the expectation was that the health services could be run with

X dollars, and by the end of the year it turns out to be X-plus or X-minus. I think we are going to see some of that for the first year or two of the operation of the regional health authorities.

We know how much is being spent in the various regions now, and the reason we need to change is because we know that what is being spent does not necessarily bear appropriate relationship to the services being provided or the needs that need to be met. So this is a very, very useful thing for the regions and the government to do, because it will bring resources to bear on issues that have not had the benefit of resources in the past to the extent they should have, and we will indeed find areas where there has been overfunding.

I am sure we will, and that will be reduced. That will, no doubt, raise eyebrows when it happens, but the fact is there is a lot of partnership here. A lot of people understand what it is we are trying to do and will work with us, but I have no doubt but that there will be increases in some areas and cuts in other areas as we go through this process in the next few years. I think the experience in other jurisdictions would bear that out.

**Mr. Chomiak:** Mr. Chairperson, the department is holding seminars or orientations with board people, and I have two questions. Firstly, is it possible for us to get copies of the information that is provided to those individuals for the purposes of those seminars and orientations? Secondly, would MLAs, particularly those outside of Winnipeg, have the ability to attend those sessions in order to acquaint themselves as to what the process is?

**Mr. McCrae:** Mr. Chairman, the orientation sessions include board chairs and board members only. Others are not invited to that, but certainly we can make the orientation information booklets and information available for the honourable member or any other honourable member who wants it.

**Mr. Kevin Lamoureux (Inkster):** Mr. Chair, yesterday I was asking the minister about the services being brought to community hospitals from teaching hospitals, and I used the example of tonsillectomy procedures. Last night I had the opportunity to do a bit of reading, and I was going through some of the KPMG material. In part in that material they gave a breakdown in terms of

percentages of different surgery procedures and the distribution in terms of which institutions are doing the surgery.

I am wondering if the minister can indicate, is that something that is ongoing? Like, for example, can you tell the percentage increases or decreases or if they stayed the same in terms of which facility is doing what kind of surgery? Is it something that is ongoing, or is this just something which KPMG would have studied for that given year?

**Mr. McCrae:** Yes. Dr. Oppenheimer, head of the surgical team, uses this kind of information. We can tell you how many tonsils were removed last year with this kind of data. It becomes an extremely interesting area, does it not? The Manitoba Centre did an analysis of tonsillectomy data across the province and came to some very interesting conclusions, why it is young girls, for example, get their tonsils out more than young boys. I do not know. I do not know if the centre knows either, but it is interesting to know that happens, and it is fairly significant.

Why is it that rural Manitobans access more surgery than Winnipeggers? Why is that? I do not know, but it has to do, I assume, with practice patterns, and then how do you change practice patterns? First off, you to have to answer the question, do you need to change practice patterns? Is that not the right thing to do? I think there are more questions than there are answers; that is for sure. But the answers come eventually so that you end up—I think they developed a protocol, did they not, for tonsillectomy with the College of Physicians and Surgeons. I believe they did that. Why, I am told by the experts that caesarian sections are something that occur to a level 30 percent higher in rural Manitoba than in Winnipeg.

The member may know this, that rural Manitobans get more surgery than Winnipeggers. It might shock some people who live outside Winnipeg, that all the good things happen in Winnipeg. If surgery is a good thing, there is more of it happening in rural Manitoba than in Winnipeg. Now, why is that? So you need to get the various practitioners together on it and find out why one practises differently from the other.

\* (0940)

I am told that Brandonites have a lower rate of heart surgery per thousand population than Winnipeggers. Well, why? Is it something in the air in Brandon that is different or something in the air in Winnipeg that is different, or is it something to do with general practitioners and their referral patterns to cardiologists and cardiac surgeons? These are all very interesting areas, yet I do not, for the life of me, know why that is, except that I do know that in Brandon they have a heart health program that may have something to do with that, which gets people practising different dietary habits and physical exercise, things like that.

I think there is a definite link between healthy living and the requirement or lack of requirement for cardiac surgery. That is a given. These are things that we should use more and more in terms of public education so that prevention and promotion can be more part of our health system than they have in the past.

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

I do believe, though, that the information about tonsillectomy led to a protocol amongst the physicians to get physicians, I think, practising in a more uniform manner across the province. I do not know, some of these elective things that happen, maybe there are more hips and knees being done in some places than in other places, and the data that we have can tell us this kind of information.

**Mr. Lamoureux:** Mr. Chairperson, one of the benefits the minister talks about is the ability to be able to have protocol put into place, which ultimately, I think, would be a positive thing. What I am most interested in is, I guess, more of trends on what procedures are being done where, and can those procedures be done in other settings? More so to pick up on yesterday, where I pointed out, for example, that tertiary hospitals quite often will do a lot of things that the community hospitals could be doing.

If you go through the reports as I did late last night, you know, I went through, whether it is plastic surgery, orthopedic cases, trauma surgery, and the list goes on, if you like, there are percentages of cases that are broken down in terms of, well, the Health Sciences Centre gets this percentage, Victoria Hospital gets this, Brandon Hospital gets this.

Is there a monitoring to see which facilities are playing a stronger role, like where it is increasing, where it is decreasing? Like yesterday I pointed out in tonsillectomies, the community hospitals were actually decreasing while tertiary hospitals were increasing, and the reason why I pointed that one out is because it just seemed to conflict what the Health Policy Institute was saying in terms of the benefits of community hospitals, and also the Action Plan.

So does the ministry follow, or does it have a list, like for example, would it say that plastic surgery is a field or an area in which can be delivered more in our community hospitals? That sort of thing is the angle I am looking at.

**Mr. McCrae:** This is precisely the type of information that the surgery design team is looking at with a view to the appropriate places for the various surgeries to be conducted, including surgeries done outside hospital all together. It does not have to be in a community hospital necessarily. It can be done in a doctor's office in some cases, depending on the surgery we are talking about.

**Mr. Lamoureux:** Mr. Chairperson, I will leave it at that and go on to a comment, an answer that the minister provided the member for Kildonan (Mr. Chomiak). I was provided a number of 2,543, and we do not necessarily want to get into a bed count as has been illustrated, but what is significant about that number, I believe, is the fact that that came from November '95. I understand that this is in fact what the Urban Health committee was looking at. In fact when we looked at how many beds per thousand the province of Manitoba has, it was estimated at 3.8. I believe that 3.8 per thousand was based on 2,543.

The number that the minister provided indicated that there was currently in the city of Winnipeg 2,380. That will in fact reduce the beds per thousand from 3.8, and I do not have a calculator so I was not able to figure it out, but no doubt it would reduce it by a total number of beds of approximately 163.

So there is a gradual changeover in beds, and as I have indicated to the minister, we do believe within the party that there are some savings in terms of acute care beds. I am wondering if the minister is in a position in which maybe he could share with us what he would anticipate will be occurring over the next four to five months. As of

to date we are looking at the closure of approximately 163 beds since November of '95. Does the minister have an objective or a goal that is there currently, or is it more of a phase-out over the next six months, a general phase-out?

**Mr. McCrae:** The problem we have, Mr. Chairman, is that we are talking apples, oranges, grapefruits, grapes, pomegranates and kiwi. This is not a simple discussion. I am afraid precision eludes me, and it is going to elude anybody, and yet we keep counting beds. I think it is a dangerous little thing to do. Last year, we tabled a document which set out the situation as of April 1 of last year. I would like to do the same thing again this year. Yes, I am going to table something a little later, then you can compare what we have as of April 1 this year with what we had as of April 1 last year.

The only problem with that is it is like a photograph at a horse race or at some moving sport, because this is not a sport, so do not think I am trivializing, but during the course of the year beds open, beds close. You have got different kinds of beds that are rated in different kinds of ways. We have got, what you call, chronic, long-term assessment beds, rehabilitation and panelled beds, palliative, psychiatric, extended treatment.

We have got some hospitals that run their surgical beds five days a week and close them at the weekends. We have got, what you call, swing beds, step-up, step-down beds, and it is really hard to measure. So if I take a snapshot on April 1, '95, which we have provided, take a snapshot April 1, '96, and if we provide that, it will not be totally definitive for the honourable member, but at least you can see whether we are up or down or where we are from the previous year.

\* (0950)

I forget how many hospitals we have, but we have something over 80 hospitals operating in our province, and here we are as a department trying to keep track of all those hospitals. That is what we are supposed to do, and that is what we do. I do not want to mislead anybody, and yet I find when I read the newspapers everything is simplified so much that it is oversimplified sometimes and leads people to the wrong kinds of conclusions.

So I think what I should do a little later today perhaps, or the next day, is table a document similar to what we

tabled last year, so that at least you can have that annual sort of comparison. But if something happened on April 2 that changed that bed map, I am just trying to tell the honourable member that all that is possible within the hospital situation, so that you might have a terrible train crash or something like that, and all of a sudden you have to use a school and have to wheel in 100 beds. Well, does that count on that bed map? Well, it might, I do not know, so it is a little bit difficult.

**Mr. Lamoureux:** The minister brings up an interesting point, a crisis could occur, population could grow; something of this nature, and one of the reasons why ultimately that we have to make sure when you are charting the bed map of the future if you like for acute care services that we have to look at which facilities have the greatest potential not only for today but also for tomorrow. The concern, as the government moves more towards charting the bed map, is to what degree are they going to be reducing, because there are a lot of legitimate concerns out there when you have line-ups to get hip replacements or backlogs that the government cannot move too quickly, not knowing in terms of not following the actual impact of some of the cuts.

It seems the minister has in essence verified that there are approximately about 163 since November. That does reduce that overall acute care beds per 1,000. I would be very cautious when you are moving in that direction and hopefully a year from now we will not see the minister go below that 3.2 percent without some sort of real evaluation in terms of what has actually happened within the system.

At this point it would be very easy as an opposition member to go out slamming the government, saying, look, you have in essence cut 163 beds. We are not going to take advantage of that particular type of opportunity because we do not necessarily think it would be the responsible thing to do, nor have we received any sort of feedback that would indicate in a very strong way that that particular phase-back has caused some of the problems that we have today, but there are still some significant problems that do need to be addressed such as the many waiting lists that are out there.

What I would ask is to seek some sort of assurance from the minister that between now and March of next year that the government is not going to attempt to see the

phasing out of in excess of bringing our per bed count per 1,000 less than 3.2 percent.

**Mr. McCrae:** I do not know what impact the inflow of over 400 patients has been over the last few weeks for this strike, for example, how many beds were ready to be filled or how many had to be officially reopened. But I suppose when the strike is over, and I do not say if, I say when, I guess we will have to close some beds because those people will be back where they are supposed to be in the first place. They are not supposed to be in those beds. We have people in hospitals; it is a darn shame. They should not be there and they are, so I guess those kinds of things enter into bed maps and counting beds, too. It is not a useless exercise, but it is a very misleading exercise to get involved in.

With respect to the number of beds per 1,000 which is what the honourable member talked about, nobody wants to have fewer beds than we need. There seems to be a sense all the time that we are going to somehow allow that bed number to fall below what would be safe, and I cannot imagine why anybody would think we would want to do that or even make the mistake of doing it.

Obviously, everybody is careful. We have the best and the brightest advisers in the province advising us on these matters. I do not quite understand how here in this Chamber our judgment about these medical matters is so much superior to all these medical people. I just do not understand that, but be that as it may, I will await the next question.

**Mr. Lamoureux:** Mr. Chairperson, thinking in terms of the Brandon General Hospital, can the minister indicate, in terms of under this reorganization from within the city of Winnipeg, are there any intentions on bringing any sort of procedures out of the Brandon General Hospital? Is the future role of Brandon General Hospital one of expansion under the current reform process, or does the minister see procedures leaving Brandon General Hospital?

**Mr. McCrae:** Mr. Chairman, Dr. Harold Silverman is leaving, and that will have an impact on the services provided in Brandon. Dr. Silverman has referred to the Brandon General Hospital as a tertiary centre, and if there is any truth to that, it has been because of the presence of surgeons like Dr. Silverman, and now he has decided to

leave. That creates a bit of an issue locally, obviously, when you lose someone with the skills that Dr. Silverman has.

Brandon General Hospital is the closest thing to the Health Sciences Centre anywhere in Manitoba, or St. Boniface Hospital. Because of its regional nature, I think, it has developed over the years, programming that goes beyond what you might see in Winnipeg community hospitals, and that is appropriate to the extent that we can do that. It does not help when Dr. Silverman decides to go to Atlanta.

He and I have locked horns a few times, Dr. Silverman and I, and he and his sidekick, Derry Decter, but I respect Dr. Silverman very much. It is simply his philosophy and mine are somewhat different. I think I discussed this with the honourable member in this Chamber last week sometime or earlier this week, where Dr. Silverman is recommending the two-tier health system, and he is saying that is the only way it is going to work. He is saying the core services insured by the system should be narrower and only cover a few things. It sounded awfully like Jean Chretien, who talked about a catastrophic situation. Then you are responsible for everything else yourself.

Dr. Silverman did not clarify what he meant, like what is he going to remove from coverage? Is he going to remove gall bladder surgery or prostate surgery or I do not know what? Obviously, he prefers the American system because that is the one he is going to. He, Dr. Silverman, had, in his parting comments, suggested that the Brandon General Hospital was not funded properly, and it is a hard one to respond to coming from someone with the credentials of Dr. Silverman.

\* (1000)

I remember going to the citizens' forum there in Brandon this past winter, and he said that Brandon General Hospital is a tertiary hospital. It is the Health Sciences Centre of Westman. Of course, the crowd just really liked hearing that one. It is what it is, and it is what it is because of the skill set that is there and the resources that we can attract to Brandon. We have got cancer services there, we have dialysis services there, we have a CT scan, we have got the ultrasound, we have got the breast screening, we have got all kinds of things going on at Brandon General Hospital.

So whenever I am asked about it, I am able to say that Brandon General Hospital has an extremely bright future in terms of a centre of medical excellence. I expect that it will continue to attract people of the calibre of Dr. Silverman. That is my hope. I remember my brother years ago, who is just visiting in Manitoba this week, as a matter of fact, one of my brothers from—

**An Honourable Member:** Is that the Edmonton brother?

**Mr. McCrae:** All of my brothers are in Edmonton. Well, one is from Leduc which is just south of Edmonton, but the other two are in Edmonton, and this is the one that is—he is not my oldest brother, but the one after the oldest brother. He, in 1966, was in a very, very serious car accident, and—oh, the honourable member for Kildonan (Mr. Chomiak) has heard about this, so I will not spend a lot of time on it. He is still around, that is the one thing about it and is the father of five children. All of them, four of them so far, are paying taxes and all that sort of thing. So, you know, he has made his contribution, but it is thanks to the Brandon General Hospital.

He would be as dead as a doornail if it was not for the good work done at the Brandon General Hospital. His shoulder was totally crushed, and his esophagus was punctured, and his lungs were punctured, and he was in pretty bad shape for a long time. It took eight weeks before he came off the intravenous feeding—he was sure glad when that happened. He was just very upset that he was not able to take anything through the mouth. In any event, I think that even in 1966, the trauma that he suffered was multiple, and if his accident had happened near Winnipeg he would have been in the Health Sciences Centre. Sure as shooting, that is where he would be, but as it turned out he was taken directly to Brandon General and the total recovery that was required in hospital was at Brandon General.

So, Dr. Silverman was right, and he would have been right if he had said that in 1966, because my brother had this multiple trauma thing. Incidentally that was 1966. We had to pay extra for 24-hour nursing and stuff like that. Some circumstances you might have to do that now. You have to pay extra if you want to have a semiprivate or a private room. You know, my goodness, that is extra billing. That is different treatment for different people.

People who can afford to have a private room in a hospital that has multiple beds in some of the rooms, you pay more. I think we are forgetting about that when we are talking about the home care services which are not even insured services under the Canada Health Act, and we are talking about people accessing extra services and paying for them—as if there is something wrong with that. I am having trouble understanding that.

But I see quite a bright future for the Brandon General Hospital. It is certainly going to need some capital improvement at some point, and I will be lobbying the department very hard on that one, Mr. Chairman, I can tell you.

**Mr. Chomiak:** I think most of the balance of my questions are going to be policy related, but can the minister just describe what the third-party recoveries are of \$5,029,400?

**Mr. McCrae:** These are recoveries from—oh, what is the name of that football player that got the CAT scan so quick, or the MRI?

**An Honourable Member:** Matt Dunigan.

**Mr. McCrae:** The Matt Dunigans, and the recoveries from foreigners like Dunigan and people from outside the province, recoveries from MPIC, recoveries from the Workers Compensation Board, that sort of thing.

**Mr. Chomiak:** The \$17,275,000 for out of province, is that, for the most part, for Manitobans receiving treatment outside of Manitoba under the various procedures we have in place?

**Mr. McCrae:** Yes, Sir.

**Mr. Chomiak:** Why is that figure identical to last year's figure? Do we have a set fee, or do we have a set ceiling that we have in terms of out of province, but the figure for last year—or is it because it is identical because the department is just estimating that it will be the same this year as it was last year?

**Mr. McCrae:** It is the same number because none of the underlying assumptions have changed, so that we expect the performance to be about the same. So that is a budgeted amount.

**Mr. Chomiak:** The specific figures for out-of-province payments were not contained previously in the Estimates book in terms of a breakdown. So I am actually pleased that they are in here as a breakdown this year.

Can the minister just give me a rough idea of how it has increased or decreased over the last several years, just in terms of payments?

**Mr. McCrae:** For this afternoon's session, we will bring the actual recovery numbers for the honourable member for two or three years.

**Mr. Chomiak:** I thank the minister for that response. It has been reported in this morning's Free Press that there is talk again about a regionalized cardiac pediatric program being developed which, as the report indicated, was something that was considered both in the '80s and the '90s, and I believe that the present Deputy Minister of Health was intimately—intimately is perhaps the wrong word, was extensively involved in. I wonder if the minister might outline for me what the status is of that proposal that was reported on today.

**Mr. McCrae:** Because of my brother being in town I got into work just in time to come into the committee, spending my time sort of catching up on news from Alberta and the exploits of Premier Ralph Klein, so I did not really get a chance to read my newspaper before committee this morning, but I know the issue. We have little kids to look after, and we are doing our best to try to figure out the best way to do that in the future in the light of all the evidence coming forward at the inquiry before Judge Murray Sinclair. That is one thing that is going on.

\* (1010)

Meantime, we still have kids that need attention and how best to do it. So discussions—informal and as far as I know at this point—are going on between people like Dr. Wade and people who lead these sorts of programs in other jurisdictions. Is it the right thing to do to have this program operating in Winnipeg, or should we join up with somebody like Minneapolis or Edmonton or Saskatoon or Toronto, or what is the right thing to do? So I do not have any particular favourite. I just want to make sure the kids get the right care. Those discussions will go on, I am sure, for some time.

**Mr. Chomiak:** Mr. Chairperson, the impression was left that the developments are more firm perhaps than just discussions in the proposal stage. I am not just commenting on the Free Press report, but it has been information that has sort of come to my attention. I wonder if the minister would be prepared to come back, if possible this afternoon, with just an update in that regard.

**Mr. McCrae:** We will make some inquiries. I have not read the article, and I will do that at the lunch break, but it probably speculates that this is happening and that is happening. I would not get too exercised about what you read in the papers necessarily, because I have learned that you cannot just believe everything you read in the papers.

**Mr. Chomiak:** There are two conflicting issues at play here in this matter. The first is there are children in Manitoba who need pediatric cardiac surgery who are presently going out of province in various locations to receive that surgery, so that is the one issue. The conflicting issue is the fact that there is a very extensive, not as extensive as I would like but that is another debate, in terms of the inquest going on now. There is a review of the previous program, and there is also the need for children to have pediatric cardiac surgery.

It would strike me as a real difficulty and a problem, notwithstanding these two conflicting difficulties, if a decision was made prior to recommendations being received from the inquest, and I wonder if the minister might comment on that.

**Mr. McCrae:** There have not been any decisions made. I do not want the honourable member to think that we have any priority except the proper care of the children. That is fundamental. I do not think anybody ought to speculate so much that they might be led to believe otherwise. The first priority is the appropriate care of the children.

Anybody who thinks anybody has got mixed up priorities in that area better think again because whether programming in future is handled in Winnipeg or somewhere else the priority remains the children. If it can be done safely and properly in Winnipeg, that will be an option, I suppose, to be looked at at some point in the future.

We have a public inquiry going on and that needs to be completed. We need to hear the results of that, but certainly in the meantime there are children who are going to need care, and our priority is to make sure they get the best possible care.

**Mr. Chomiak:** Can the minister indicate definitively whether or not the inquest results will be made completely public?

**Mr. McCrae:** I am just trying to recollect from being the Minister of Justice, it seems to me that the judges put out their inquest reports themselves. We do not have any control over that.

**Mr. Chomiak:** Does it not go to the Minister of Justice?

**Mr. McCrae:** Yes, it does. He gets a copy but I believe it is a public matter. The Justice minister has no control over the release of that. Judgments are public.

This is a public inquiry, otherwise called an inquest. I am sure of it. I do not know of any inquest results that have ever been held back by any minister anywhere. We would not want to interfere with the independence of the judiciary, would we? I certainly would not want to do that. I never have and I am never going to. That is a very serious thing to do.

**Mr. Chomiak:** I wondered if the minister wanted to comment further.

**Mr. McCrae:** No. Since the light is on anyway, Mr. Chairman, judges run the show when it comes to inquests or public inquiries like this one, and Judge Sinclair is running the show. It is not the government.

**Mr. Chomiak:** I just want to return to the matter of the Krever inquiry and the provincial intervention. I want to indicate, for the record, the minister did give me a letter dated April 9, outlining the provincial position with respect to the action being brought by most of the jurisdictions in Canada, with the exception of Saskatchewan and now, I believe, Nova Scotia. I am wondering if the minister might comment further on whether or not the government is considering a change in position with respect to the matter, insofar as Nova Scotia has now withdrawn its action concerning the issuance of the notices.

**Mr. McCrae:** We will pass on the honourable member's, is it a question or a concern?

**Mr. Chomiak:** I probably did not frame it correctly. Is the government considering a change in its position in light of the decision made by the government of Nova Scotia?

\* (1020)

**Mr. McCrae:** We are reviewing the situation in the light of the actions taken by those other provinces, with a view to determining what our appropriate position ought to be at this point. So, as soon as we know something, I will undertake now to share that information with the honourable member. If we decide to hold our ground or to change our position one way or the other, we will let the member know.

**Mr. Chomiak:** I had the pleasure of bumping into the ex-deputy minister exiting from the Legislature yesterday, Frank Maynard, and it has now prompted me to query about the activities of the former Deputy Minister of Health. I wonder if the minister can indicate whether or not the Deputy Minister of Health is employed, contracted or working in any capacity for the Department of Health or any agency associated, either arm's length or indirectly, with the Department of Health.

**Mr. McCrae:** I am really concerned here that Frank Maynard might be consorting with the honourable member for Kildonan (Mr. Chomiak) and not me. I happen to have a high regard for Mr. Maynard. Anybody born on the same day of the year as me, I think, must have something working in his favour. So I am a little concerned that Frank Maynard might be here visiting with the member for Kildonan and not visiting with me. So, next time I see Frank, I am going to ask him how it turned out that way. I must have been busy doing something. I must be doing something wrong. I am wondering, maybe he is consulting to the NDP now, or something like that, and that would be another matter that would cause me some concern, but we do not have any present business dealings with Mr. Maynard at the present time.

**Mr. Chomiak:** I think we are probably in a position to pass this item, but just in case something comes up—

**The Acting Chairperson (Mr. Radcliffe):** Excuse me, honourable member for Kildonan, can we return to the honourable Minister of Health? Thank you.

**Mr. McCrae:** In our continuing quest to provide as much information as we can for the honourable member, Mr. Chairman, a little while ago, the member was asking about Third Party Recoveries. I am looking at the 1994-95 annual report and that report contains actuals, and the honourable member was asking for some Third Party Recoveries.

In 1993-94, the actual was \$6,976,000. In 1994-95, that number dropped a bit to \$5,069,000, and those are the latest figures we have. That is on page 105 of your annual report for '94-95, which gives those two years. [interjection] Third Party Recoveries, it is about a quarter of the way down from the top of the page.

**Mr. Chomiak:** I thank the minister for that direction. Does it also contain information concerning out-of-province payments, which is actually the area that I wanted further information on, if possible?

**Mr. McCrae:** We are just doing some checking, and we will fill that in at a subsequent time.

**Mr. Chomiak:** I wonder if it might be appropriate now to take our usual 5-minute break.

**The Acting Chairperson (Mr. Radcliffe):** The will of the committee has been expressed for a 5-minute break. The committee will be so recessed.

*The committee recessed at 10:24 a.m.*

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#### After Recess

*The committee resumed at 10:41 a.m.*

**The Acting Chairperson (Mr. Radcliffe):** The meeting will come to order.

**Mr. Chomiak:** Pass.

**The Acting Chairperson (Mr. Radcliffe):** The committee has expressed the will that the item shall pass.

The first item under consideration at this point is section 21.4.(c) Hospital and Community Services, Hospitals \$782,192,100—pass; Hospitals Transition Support \$38,000,000—pass; Community Health Centres \$22,239,600—pass; Out-of-province \$17,275,000—pass; Blood Transfusion Services \$17,718,300—pass; Other \$2,229,100—pass; Less: Third Party Recoveries - Hospitals (\$5,029,400)—pass; Reciprocal Recoveries - Hospitals (\$25,387,600)—pass.

Item 4.(d) Personal Care Home Services, Personal Care Homes \$242,655,900.

**Mr. Chomiak:** Mr. Chairperson, there was a committee struck to review a number of matters relating to personal care homes and the report was issued last year. The minister indicated a number of recommendations were being worked on. I wonder if we can have an update of the course of those recommendations concerning personal care homes.

**Mr. McCrae:** We will make a report to the honourable member in due course.

**Mr. Chomiak:** Mr. Chairperson, one of the areas that I have grave concerns about, and I have expressed it to the minister previously and publicly, is the staffing levels at personal care homes.

I am personally convinced that the present standards we have for staffing levels are not appropriate to deal with the acuity and the levels of care of patients in personal care homes. All the statistics indicate that the level of care, and we all can agree on this, is much more intensive and acute in the personal care homes, and I am not convinced that the staffing level standards that exist and have existed are appropriate to meet those needs.

The minister has said in the past that the staffing levels are appropriate, and we are obviously going to disagree on that fact, but I still would like the minister to indicate to me whether or not—first off, what the specific criteria are for the staffing levels. I will go piecemeal, if the minister can outline for me specifically what the present guidelines are concerning staffing levels in personal care homes.

**Mr. McCrae:** The honourable member's concerns are well placed. We are seeing higher levels of acuity in

personal care homes in Manitoba. That is why, in this fiscal year, you see an increase in funding strictly for increasing staffing levels to reflect actual care requirements in proprietary and nonproprietary personal care homes. There is an increase of funding in this area of \$2,620,200 for that very purpose, so the honourable member's concern is well placed.

**Mr. Chomiak:** I am very pleased to hear that. I just want to clarify it then. The minister is saying the increase of \$2,620,000 is solely to go to increase staff at personal care homes. Is that correct?

**Mr. McCrae:** In January and February of each year, a survey is conducted between personal care people and the Department of Health people, and each resident and his or her requirements is reviewed. As a result of that, this year \$2,620,200 additional will be made available to increase staffing levels to meet the requirements as a result of that particular review that was done. So that is to confirm that is what is happening.

**Mr. Chomiak:** Can the minister give me a more precise—I will put it this way. Have the guidelines for staffing levels changed, and if they have, can we get copies of the changed guidelines?

**Mr. McCrae:** No, they have not. It is not felt that there is anything wrong with the guidelines. Patients' or residents' conditions can deteriorate or require greater levels of service. That is what the survey I referred to a moment ago is all about. Anybody who suspected that the level of acuity is rising is absolutely right, and that is reflected in an increase in funding to deal with that.

**Mr. Chomiak:** Is this survey done annually each year?

**Mr. McCrae:** It is done every year. Remember that for various reasons there is a turnover in the residents of our personal care homes, mostly for the obvious reason, people come to the end of their lives, so we have new residents. Residents coming in today are coming in at higher levels of acuity than they used to, but the survey that I referred to is done on an annual basis.

\* (1050)

**Mr. Chomiak:** Last year it was indicated, and we had some discussion about this, so I am not going to revisit

that today, but last year it was indicated that there would be 8,904 beds in 122 personal care homes. This year it is indicated there will be 8,896, so that is a reduction of eight beds. Is that accurate? We are down eight beds this year over last year.

**Mr. McCrae:** I am reminded that we had this debate last year, or discussion. I am being handed some information here. I am reminded that there was a number errors in the documents last year. We had the discussion in this Chamber, and the question we were discussing last year was the number of personal care homes in Manitoba. The documents referred to 123. It turned out there were 122. That was corrected, but for changes in licensed beds from April 1, '95 to April 1, '96, there are 20 fewer beds year over year, and a lot of this—well, here is the breakdown.

In July of last year, the metro Winnipeg Kiwanis Courts closed. That was 47 beds there. Of course, the history of that one is pretty well known to everyone, and I think we came up with the right thing to do at the end, once we had brought Ron McIntosh in. He did some consultations and public involvement in the whole matter. So there are 47 fewer beds there, but at Ste. Rose du Lac the Dr. Gendreau Home opened in October of '95. I had the pleasure of taking part in some of the ceremonies there. Twenty-five additional beds added there.

At Rideau Park in Brandon, in November of last year, two beds were closed. At St. Pierre, opened in December of '95 last year, six additional personal care home beds went into service. In April of '95, at The Pas, at St. Paul's Residence, two personal care home beds were taken out of service. So when you add in the additional ones and remove the closed ones, you come up with a minus 20 over the year, by way of performance of the program.

**Mr. Chomiak:** Does the minister anticipate any further opening of personal care home beds during this fiscal year?

**Mr. McCrae:** We expect, Mr. Chairman, this year, to see the expansion over at Donwood Manor. The honourable member, I am sure, is familiar with that one, net increase of 40 personal care home beds there. In Killarney, Manitoba, we are replacing the hostel and

doing renovations. I guess there were 33 beds there before; a net increase in Killarney of 30 beds, and that increase I mentioned already. St. Pierre, I guess that is already done. In Stonewall, we are looking at 20 more beds there.

So we have a total of 96 additional personal care home beds coming on stream this year, and that is not to refer at all to the Riverview Health Centre. We are not clear if they will have their new beds open this fiscal year or if that will spill over into the next fiscal year. That is all under construction right now; a very, very big project over there. The growth in that program continues.

**Mr. Chomiak:** I guess what I would like to ascertain then is of the \$2.6 million that is going for new personnel, does that include the cost for these 96 additional beds or is the \$2.6 million exclusive of that?

\* (1100)

**Mr. McCrae:** I do not want there to be any confusion about this. I just said that there will be 96 new beds. With those 96 new beds will be additional staff to run those 96 new beds. The \$2.6 million I referred to has nothing to do with the 96 beds, so that is additional staffing for people who were residents in personal care homes before the 96 are added in.

I have a little bit more information here for the honourable member. There will be dollars as these new beds come in. There will be operating dollars associated with those new beds to pay for the staff to look after the people in those beds, so I hope I am very clear that the \$2.6 million is for those already in the system and for those residents that are already part of our PCA system.

**Mr. Chomiak:** I thank the minister for the explanation. Does the minister have any idea of what that \$2.6 million will mean by way of numbers in terms of staff years?

**Mr. McCrae:** As the summer gets going and as we get into summer, we will have that \$2.6 million broken out as to where and how. We will at that time remember to get a note off to the honourable member to let him know.

**Mr. Chomiak:** I thank the minister for that undertaking. Does the minister have a figure as to what financial contribution is made in sum total by residents of personal

care homes, both anticipated this year and what was provided last year?

(Mr. Chairperson in the Chair)

**Mr. McCrae:** The relationship between the government and the personal care homes is that the government provides the personal care homes with the dollars they need, above and beyond what the personal care homes collect from their residents through the per diem fees. I will provide the honourable member with more information about this in terms of dollars and amounts, but that might not happen until this afternoon.

**Mr. Chomiak:** I thank the minister for that undertaking. Can the minister outline how much funding goes for Community Therapy Services?

**Mr. McCrae:** The company, Community Therapy Services, is paid by our government for services in various contractual arrangements including the rural hospitals, the city hospitals, the personal care homes, the Home Care program. Family Services, I understand, as well, contracts with Community Therapy Services. Again, that is information we can bring forward for the honourable member.

**Mr. Chomiak:** One of the complaints I get as health critic is concerns about doctors attending at personal care homes, concern about doctors visiting patients in personal care homes, and this has been a long-standing—this is nothing new, and I wonder if the minister has any comment on that particular matter, whether there have been any developments or any movement in this area or whether in fact the minister thinks that there is not a problem in this area.

**Mr. McCrae:** I have heard the same, I assume the same kind of complaints, the complaint or the allegation being that perhaps the doctors visiting personal care homes are maybe taking too cursory a look at their patients in the personal care homes, and I have heard that too. I guess with the Medical Review Committee it is their job to review billing issues related to physicians, or if it is a question of a practice pattern or a specific incident involving a doctor, the Manitoba College of Physicians and Surgeons could get involved.

Maybe the issue here is how does a complaint happen, and under the scenario the honourable member is hearing about and I am hearing about, it may be that there is very little a person could sink their teeth into in the sense of a complaint about a doctor, what is too cursory and what is not, and who is going to complain. It should be the subject, though, of discussion with the members of the profession itself who make it their business, I think, to look at their own practice patterns. I hear the honourable member, and I have heard the same thing.

I have heard how many times that Mrs. Jones, an elderly widow, visits the doctor quite often simply because she is elderly and alone, and it is a social experience for her. I hear those things, and yet any physician confronted with such a story is probably going to respond that, well, a physician is not doing his or her job properly if he refuses to see Mrs. Jones, because what happens if Mrs. Jones really has a medical issue that should be dealt with by a doctor.

\* (1110)

It is one of those so-called grey areas, I guess, that is a little bit difficult for us to build the kind of structure around that might properly address it, yet I share the concern of people raising it with me. If that is happening, then there are health dollars that are being billed for, claimed and paid out that could perhaps be paid out in a different way, which gives rise to the suggestion, why are you not looking at some kind of block funding or contractual arrangement with physicians for these types of things, or salary arrangements for physicians, all of which I agree that we should do and are doing. Through federal-provincial discussions and studies that are out there, the different models for physician remuneration are emerging and they are beginning to be discussed quite seriously with the profession. Frankly, there are a lot of people in the profession who are quite willing to look at these issues, and I appreciate that kind of co-operation.

I think that this is not something we are going to solve by passing a law or by doing something simplistic. I do believe that the results of some of the discussions that are going on will bring solutions to these problems that are brought to our attention. I do not know if it happens, I cannot prove it, but there are certainly enough people mentioning it that it seems to me, the department needs to

be aware of it, and I think the department is aware of it. In our discussions with the medical practitioners, we are beginning to address those things.

Block or personal care contracts sounds to me like something that should definitely be explored. If you have a personal care home with 60 people in it in a small community where there are one or two doctors, and one of those doctors is in charge of everybody at the PCH, there ought to be some other kind of arrangement besides fee for service that could work better. We are aware of this concern and we are looking at solutions. As the honourable member might be aware, the capitation applies in some places with respect to pharmacy in our personal care homes, and so some of those same principles might be brought to bear with respect to medical practitioners.

The honourable member on May 9 raised a question about the meaning of rapid response laboratories as recommended in the Urban Health Planning Partnership Laboratory Services Design Team report, and there was some discussion about what we meant by this. The Urban Health Planning Partnership Laboratory Services Design Team recommended the establishment of rapid response laboratories in each of the Winnipeg facilities. In principle, the design team recognized that it was not feasible to centralize all lab services at one site and remain responsive to those urgent requirements of a facility.

The intent of the rapid response laboratory is to provide for the minimum urgent requirements necessary to support the specific programs provided at each of the facilities. This would enable a significant reduction of onsite laboratory requirements at each individual facility with those tests which do not require a rapid turnaround provided by a centralized single-site laboratory. The design team envisioned that each of the rapid response laboratories would be uniquely defined to reflect the nature and scope of health services and programs provided within that facility.

I hope that prepared response will be satisfactory.

**Mr. Chomiak:** Just closing out the discussion with respect to the personal care homes and the doctors' visits, I think it is a much larger issue, as the minister has

indicated. It is a larger issue dealing with the rights and the dignity of people who are in a personal care home.

I am hopeful in presuming that some of those issues will be addressed when the minister gets back to me with information concerning the recommendations of his task force on personal care homes, because there was a discussion of rights of individuals in nursing homes and the ability of individuals in nursing homes to access complaint channels and to access ombudspople within the institution or otherwise to protect their rights. So I am assuming that we will have made some progress on that specifically when we see the recommendations.

**Mr. Chairperson:** Shall the item pass? Personal Care Homes \$242,655,900—pass; Drug Program \$7,081,800—pass; Adult Day Care \$3,312,600—pass; Other \$2,647,700—pass.

Item (e) Medical \$324,417,300.

**Mr. Chomiak:** Mr. Chairperson, we have discussed some of the aspects of the Medical grants previously during the course of these Estimates. I am again coming back for some clarification. There is a \$10-million pool to establish alternative physician funding mechanisms.

Can the minister give us a little bit more information about this pool? What I am looking for is, is this a one-time only pool? For example, is it going to take \$5 million and fund salaried physicians to go into nursing homes on a block or capitation basis as was sort of bandied about before, or is this pool going to be utilized to set up alternative mechanisms so that at some future points some money can come out of the Medical services grants to deal with it? Can the minister clarify some of the functions and roles of that \$10-million pool?

**Mr. McCrae:** Those dollars are separated out from the Medical appropriation to be administered by the department and to pay for alternative arrangements, to pay for block funding or contractual arrangements, for example, with emergency physicians at Health Sciences Centre, trauma people at Health Sciences Centre and St. Boniface Hospital, things like the Northern Medical Unit, things like the neurosurgery program.

It is to fund those programs separately, yet it is still part of the Medical services line in the Estimates, but it

is to allow for those arrangements with the department and the profession.

\* (1120)

**Mr. Chomiak:** I thank the minister for that description. So it is as it appears to be in the Estimates book. In the Estimates book, we see roughly \$11-million fee for service reduced, but, at the same time, sessional fees and Medical salaries are up \$10 million. So it is basically a shift from fee for service to Medical salaries. That is correct?

**Mr. McCrae:** That is correct, Mr. Chairman.

**Mr. Chomiak:** Mr. Chairperson, can the minister give us any idea of how much of that funding has been allocated thus far? Are there any targets for the allocation of that funding this year?

**Mr. McCrae:** About \$6 million of that has been allocated, and work continues to finalize how best to deal with the remainder.

**Mr. Chomiak:** Can I assume that the \$6-million figure that the minister indicated was already allocated includes the emergency doctors at Health Sciences Centre and the other matters referred to by the minister in the immediate preceding answer?

**Mr. McCrae:** Yes, Sir.

**Mr. Chomiak:** Would it be possible to get a general breakdown of that?

**Mr. McCrae:** At this time, no, but in due course we will be able to account for all of the dollars. Probably, by this time next year, when we are dealing with the Estimates, we can deal with the breakdown.

**Mr. Chomiak:** Can the minister give me a specific update on the status of the Physician Resource Committee?

**Mr. McCrae:** Mr. Chairman, I have now received the report of the Physician Resource Committee. I have not had enough time to deal with it in detail, but staff is analyzing and getting ready to advise me as to what they

suggest might be our response to the Physician Resource Committee's report.

We are glad to have it. We have been anxiously awaiting that report. We have had a hard time in the last couple of years with physician resources, especially in the so-called underserved areas of Manitoba. So we are very glad to have that report, and we are quite hopeful that it will help us address our requirements in the future.

**Mr. Chomiak:** Previously, in the Estimates, the minister had indicated that recommendations from the Medical Services Council are ongoing and still being considered. Does this minister have an update in terms of what the status is, and can he outline for us what items are being considered in order to meet the reduction of fee for service of around \$10 million to \$11 million?

**Mr. McCrae:** I await further word from the Manitoba Medical Services Council about other proposals. We have been working with the council and with the profession on issues like the physical exam and the special house call. Beyond that, though, I do not have anything formal from the council.

**Mr. Chomiak:** Last year's Estimates indicated that payments would be made to 2,055 medical practitioners. This year they are down, medical payments to 2,028, according to the Estimates book.

I expect we are going to disagree on this. The minister obviously has to indicate that within the area of physician retention that all is well. My inclination might be to say that all is not well. So we are going to disagree probably on that, but I do have a concern and it is a widespread feeling out in the community that we are losing some of our best and brightest in terms of physicians. That is certainly my inclination, and from discussions I have had with physicians that certainly appears to be the case. I just wonder if the minister might comment on that.

**Mr. McCrae:** I think, in general, we will not disagree too much. In specifics though, if it is 2,028 physicians, my suggestion is that is sufficient. The problem is the distribution of those physicians and their specialties. The number of physicians—I will say it and put it clearly on the record—is sufficient. Now, let us get that report from the Physician Resource Committee and use that resource appropriately throughout our province.

I do not know if the member thinks that we do not have enough doctors or not, but I do not think there is that much disagreement about the distribution issue. It is a problem and we acknowledge it. The only way to really solve a problem is to acknowledge that you have one and we certainly do that. We are not the only jurisdiction in Canada that has that problem, but people do tend to—I had an interview yesterday out in the hallway with one of the students from Red River Community College who is laid off by a doctor's office that is shutting down. I can tell her we have enough doctors till I am blue in the face, but it is not going to make her feel much better, because not only is she out of a job, but there are a number of patients who now have to find a new family doctor.

I do not diminish that as an issue for those people, but speaking in terms of the province-wide health system, I am advised that at 2,028, if that is the number, there are certainly sufficient numbers of doctors. If we could make sure we had the right number of cardiologists, cardiovascular surgeons and all the different kinds of specialties all in the right places, we would not have any problems in terms of medical resources.

**Mr. Chomiak:** I am pleased that the minister, in the latter part of the response—I was going to ask about distribution because distribution just is not geographic in this sense. Distribution is by virtue of specialty and the like, and one of the areas where surprisingly to some there may be difficulties is with respect to family physicians, because of the recruitment efforts from the United States and because of the kinds of physicians that we train in Canada. I will not belabour that point. Suffice it to say that I will be anxious to see what the PRC recommends, as well.

**Mr. McCrae:** The honourable member, I think, puts his finger right on it. Let me go back to Dr. Silverman, who is heading for Atlanta. We are not going to have the chest surgeon that we had in the Brandon and Westman area. Many people have benefited from the presence of Dr. Silverman, and that ought not to go unnoticed, and it will not go unnoticed.

So we are going to be looking to see what we require for Westman in regard to chest surgery, for example. We have had times when neurosurgeons was a problem. I think we have made some pretty good progress in dealing with that problem.

\* (1130)

Sometimes when we talk about this exodus of doctors to the U.S.A., we need to put it in perspective. There has been—is it 22 doctors that have gone to the U.S.A. since last August? I do not have the number for sure, but there are also doctors coming to Canada and to Manitoba, such that according to W5, at least, we have enough doctors in Canada for a population of 37 million people. Well, we do not have 37 million people. We have 27 million people. In fact, that same W5 program projected forward, and by the year 2020 at the rate that we were going, I am trying to remember what they concluded, but, ultimately, they had it that by 2020, if certain trends continued, every single person in Canada would be a doctor in the way the growth of that profession was happening.

So there is a tendency at first blush to say, oh, we have a terrible brain drain. The fact is that we have annually for years and years an outflow of doctors and an inflow. Because it is doctors, we tend to get excited about this. Professional engineers leave Canada, which they do, and professional engineers come to Canada, which they do. Architects, dentists and all these different kind of professional people are mobile. Some politicians are mobile. They leave the jurisdiction and they go somewhere else. Dr. Gulzar Cheema is an example. Here is a doctor who left our jurisdiction and a politician who left our jurisdiction. Now he is doctoring out on the coast and, I understand, he is politicking as well. So we tend to get very focused sometimes and jump to conclusions that are not always necessary to jump to.

But it is appropriate to be responsible and to say, okay, we have seen in the last year an escalation in this trend and we know why. Because when you are offered two and three times what you are getting now to work in a place where they are going to buy you a car or they are going to give you an allowance for your mortgage or they are going to do this, that or the other thing for you, you can be the happiest Manitoban around.

If somebody is going to offer you that sort of thing, you are probably going to have a look at it. Even I, as much as I enjoy my work, if someone were to say, we will pay you three times what you are getting somewhere else to do less work, I might look at it. I am not saying I will

not. I am pretty serious about what I am doing here, but let us be realistic about this discussion.

I find that Dr. G. Kindle, another doctor in Brandon, a radiologist, he left for the United States some time ago. There was an awful lot of discussion about that. It was in the newspapers and everything like that. Well, Dr. Kindle is back, and he is providing quality radiology services to us in the Westman area. Other physicians, Dr. Bill Lindsay, the head of our heart, our cardiac program is a returned Winnipegger. I mean, I think we forget about that part too.

There is no question but that the physician is an important member of the health care team, and we look with interest at the report of a Physician Resource Committee. Hopefully we will find ways to deal with the problems that will continue to present themselves in the future, and I look forward to reviewing that report and getting recommendations flowing from and then acting on them and trying to stabilize our physician resource problem in Manitoba.

**Mr. Chairperson:** Item 4.(e) Medical \$324,417,300—pass; Less: Third Party Recoveries \$2,827,400—(pass); Reciprocal Recoveries \$5,952,400—(pass).

Item 4.(f) Pharmacare \$37,591,800.

**Mr. Lamoureux:** Mr. Chairperson, this is an area in which, of course, the government's message that they have been attempting to get out is that those individuals who can least afford to pay for pharmaceutical supplies will in fact be better off; those who have more money will be taxed a little bit more. That is the impression that this whole reform package dealing with the Pharmacare proposal at least attempts to portray.

The bottom line, of course, is that there is a very significant cut, some \$20 million from this program, and many, including I, would ultimately argue that this is indeed another form of a tax that has been put on as a direct result. I am curious as to why the minister would have taken this sort of approach to get the \$20 million saving.

The people who appear to be hurt the most on this would be the working poor more than anyone else, and it

will have an impact on virtually everyone that prescribes for drugs in a very negative way. I am interested in knowing why. I am also interested because we do have limited time in getting some of the breakdowns of percentages of people that would be getting it at no cost as a direct result of the changes.

**Mr. McCrae:** Because the federal government has taken so many dollars away from the provincial jurisdictions that run these programs, something has to be done. I think that our Pharmacare program in Manitoba that we have developed now is the best possible alternative to, or the best possible option to, respond to the difficult, difficult fiscal environment that we are working in.

The honourable member has not offered us something else that I know of, a better option. We think it is fair in the sense that it asks those who can afford to pay, to pay. Those who cannot afford to pay, pay less. Those who are presently on the life-saving drug program continue under the old arrangements, those who want to. Those on welfare do not pay anything, and people who have means pay. I am having trouble understanding when the left-wing agenda says, make those who can pay more, pay more, and that is exactly what we are doing.

It is quite a stretch, Mr. Chairman, to talk about a drug subsidy as taxation or lack of drug subsidy or a reduced drug subsidy as a tax. I will never buy into that kind of argument. Pharmacare has never been part of the Canada Health Act, and it never will be part of the Canada Health Act. Manitoba has one of the most generous programs in this country.

\* (1140)

I just have not heard any alternative proposals from the honourable member that would be better. He is saying, do not take \$20 million out, I guess is what he is saying, and I am saying, go and talk to Paul Martin about that. If he has \$20 million that he can ship to us tomorrow, maybe we can review this, but, I think, even if he shipped us \$20 million, we still have developed a program that is income based, is fair and treats people who are poor as best as could be expected under all the circumstances.

Poor people are asked not to give us any more than two percent of their income to pay for their prescription drugs. We added that provision in there as an extra safeguard for poor people. So I really am having trouble understanding

the honourable member's concern here when he has offered no alternative, none, no alternative whatsoever. If I knew what the honourable member was offering, I could look at it, but he has not offered us anything by way of an alternative proposal.

**Mr. Lamoureux:** I guess what I am looking for is some sort of a justification for the size of the cut that has been put in, in this particular area, more than anything else. You know, the government made a substantial cut and then tried to justify the cut by saying, very poor people are not going to have to pay as much for their pharmaceutical needs.

The minister makes reference to Ottawa and attempts to blame Ottawa for the \$20 million, and that was, in fact, highlighted in the press release that actually went out.

I understood that it works out to about a 3.2-percent cut if you apply the funding formula from Ottawa onto the provincial health care budget. This is substantially more than a 3.2-percent cut. I am wondering why it is the government focuses so much attention or gave so much of a cut to this particular line. What was the justification? What was the rationale that was used in order to bring in this cut? Did, for example, the Minister of Health look across at neighbouring provinces and say, well, look, our program is far too wealthy, and as a result, we want to cut back? How did the minister come up with the size of a cut that he has decided to implement into this particular program?

The way in which it was justified in terms of putting it on a means scale in order to allow those individuals that do not have an economic income in some cases, and it is a very small percentage relatively speaking, the ability that they will come out ahead under this program, the vast majority of Manitobans that require prescription drugs are going to be paying considerably more. From some of those perspectives, they look at it as a direct tax increase. So how does the minister justify the size of a cut that he has put in on this particular line?

**Mr. McCrae:** Mr. Chairman, we knew we had to address our Pharmacare program. It was clearly something we could not justify anymore considering the federal reductions and the dollars that needed to be spent in other areas of the health system. With all those

considerations, we knew we had to have a look at our program. So in addition to everything else we did, we looked at other programs in the country and wanted to find a model that was acceptable and one that was meeting the needs of the people.

We looked to our neighbour to the west, the Province of Saskatchewan, and felt that their program was pretty good. I mean anything can be improved on, and indeed that is what we did. We adopted certain elements of the Saskatchewan approach, but we improved on it. For example, we do not think that you should pay more than 3 percent of your income for your prescription drugs; or if you are poor, we do not think you should pay more than 2 percent. In Saskatchewan, it is 3.4 percent.

We think the Saskatchewan program is pretty good, but we think ours is even better. In Saskatchewan, you have to make a co-payment. We decided that there should not be a co-payment in Manitoba. So we, I think, very carefully looked at what we ought to do and very carefully designed a made-in-Manitoba program which adopted some of the principles of the Saskatchewan plan and indeed improved on what they have in Saskatchewan.

I have a very brief little letter here that I wrote to a person here in the city of Winnipeg who wrote to me, or wrote to our department, with some concern. An HIV patient had some concern about the changes, and I suggested perhaps based on news reports or something like that rather than on what is really happening.

I will read part of my letter because it sets out how this new program benefits some people as follows: It is my understanding that under the previous Pharmacare program you had a deductible of \$237.10 per year and that you paid 40 percent of the cost of eligible prescription drugs in excess of this deductible. Under this old program you were paying an average of over \$700 a month. In the new income-based Pharmacare program you will have an annual deductible of \$739, and Pharmacare will pay 100 percent of eligible drug expenses in excess of that amount. It would appear that under the income-based Pharmacare program you will move from paying over \$700 a month for your drugs to paying \$739 once a year. This is a benefit to you of approximately \$8,000 a year. Clearly, this is a case of the new Pharmacare program doing exactly what it was intended to do, which is to provide assistance to those

who have high drug expenses in relation to income and for those who need it most.

Does the honourable member suggest I write to this person and deny this person a benefit of \$8,000 a year? The honourable member is opposed to what we are doing so he wants me to write to this person, change the policy back to what it was, and load on this HIV victim an expenditure requirement of \$8,000. That is where the honourable member for Inkster (Mr. Lamoureux) stands. Hit them where it hurts, Mr. Chairman, that is what the Liberals stand for.

**Mr. Lamoureux:** Mr. Chairperson, can the minister indicate what percentage of individuals who use pharmaceutical supplies would have a net gain over the new policy?

**Mr. McCrae:** Well, the honourable member has said that the \$20 million is coming out of this program, so obviously somebody is going to be affected. Lots of people will be. Presumably—not presumably, as a matter of fact, it will be people who can afford to pay who will be paying. The person like the one to whom I wrote the letter is going to see a big benefit, and the honourable member is against that.

I wonder why it is the Liberal Party one day stands for one thing, they shift to the left, and today they want to move to the far right by protecting those who can afford to pay for drugs at the expense of poor people or people with HIV, for example, who have very, very high drug expenses. He wants to punish those sick and poor people and reward those who can afford to pay for their own drugs anyway. I simply disagree.

\* (1150)

**Mr. Lamoureux:** Mr. Chairperson, the minister did not answer the question. The question was, what percentage of the users of this system will actually receive better or will have a net gain as the individual whom the Minister of Health has commented on? Ultimately, there are going to be a great deal more, a vast majority, of individual Manitobans and families that are going to have a negative, and a significantly negative, impact.

I could counter by suggesting to appeal to the minister and say, well, what about the family of four where there

is someone who needs insulin, it is diabetes, or individuals who have severe migraine headaches where they require certain prescription drugs? There are, I would hazard a guess, many more examples of the other extreme than what the minister has been able to cite.

Quite frankly, I am pleased for that particular individual. What I am referring to is that there is a significant increase that is going to be applied to the working poor, the middle class, as a direct result of the policy, not necessarily of the policy change but because of the amount of dollars that have been cut out of this particular program, which far exceed the 3.2 percent that, from what I understand, the overall cut would have been to the Department of Health from the federal government. And that is if you factor out the equalization payments which could have been there to supplement that 3.2 percent cut from the federal government.

In other words, the Ministry of Health, or this particular minister, has indicated that when it comes to health care needs, like the pharmaceuticals, it is not a priority with this government. It has demonstrated that by cutting it back from \$57.3 to \$37.5 million. A very significant cut. One would ask as opposed to asking about the details of the announcement in the way in which it has been changed, the more important question that needs to be answered is why was it determined that \$20 million could be taken out of this particular program? The \$20 million is the concern and the size of the cut. Why?

**Mr. McCrae:** Mr. Chairman, I did not hear in the honourable member's question an alternative proposal, unless he is saying, just go back to what we had. Maybe that is implicit in what is in his question.

Constructive criticism is welcome. We worked very, very hard to try to make this program the best we could with the dollars that we thought we could make available. There is a saving involved to the program and a lot of people will not get coverage that got coverage before, and I cannot quantify it. It is too early in the year for me to be able to do that, but it is significant and that is acknowledged. That was the hardest part of the decision, that a whole bunch of people were going to be affected by this. Yet when you take an income-based approach, you

can be left with some comfort that you are not being unreasonable to people who can afford to pay for their medicine anyway.

There are not very many people around who can afford to pay what this person who wrote to me had to pay under the old program. I mean, obviously, a lot of people were getting some benefits out of it and everything like that; benefits the government is not bound to provide to people, because there is nothing in the Canada Health Act about this. So we have to keep that in mind and yet, Pharmacare pharmacy brings about so much relief to people, prevents or postpones other surgery and that sort of thing, in some cases, forever. So there are really good features of having government involvement in the pharmacy business.

In the absence of a better response from a provincial government than what we have made, in the absence of that from the honourable member, I am at a loss as to how to comment. I mean, I am quite happy to defend the program that we have come forward with. It was the result of a lot of very hard work and a lot of very sensitive soul-searching on the part of policymakers to ensure that we were not hurting people that we did not intend to hurt, that we were not putting people to a disadvantage that could not handle that disadvantage.

I guess I go back to that point that leadership calls for making decisions and I am quite happy and I am sure that in future years there will be time to review this program and make revisions if necessary. I do not know that that will be true. I hope it is not, but if it is, the policy suggestions of the honourable member might at that point be useful.

If the honourable member is not supportive of what we are doing, then let him put down on the record of this committee his alternative proposal so that we can look at it, but also so that the people can look at what he is suggesting and make a judgment. Maybe the honourable member has something better. If he does, I would like to know about it. I would like to know what it is. If it is simply do not save \$20 million, I am sorry, it will not work, tell that to Paul Martin.

If the honourable member says, well, you know, you have taken a bigger chunk out of this program than out of other parts of the system, that is acknowledged. This is

\$20 million that can be used in a variety of ways. Maybe it is to forestall some change in the hospital system that the honourable member is upset about. Who knows, but he wants to take away every piece of flexibility the government has with which to govern.

You know, you have got to be reasonable. I am just asking the honourable member to be reasonable, Mr. Chairman, and to remember this person who wrote to me, and remember that if we followed the honourable member's advice so far, this person would be financially totally strapped. That is not something I want to see happen.

**Mr. Lamoureux:** Mr. Chairperson, the program and the policy of the program is something which, no doubt, could be debated in itself. I could think offhand of some personal thoughts as to why—or some modifications to it. That is no doubt something that we will work on as a political party over time.

The concern is, you have a very significant cut in this particular line, and what is to say that next year it is \$10 million less? How does the government justify or rationalize the size of a cut that has been put into such a very important program, a program in which many would have thought would be growing unless you have substantial decreases in medication cost? That is not the case. Or if you had fewer prescriptions going out, and I do not believe that is the case. So in part maybe what I should ask is, does the Minister of Health see today's figure as being a floor, that in future years we will not see continual decreases in this line? Does he value the Pharmacare system or providing assistance for the prescription drugs as something that is worthwhile and preserving?

**Mr. Chairperson:** Order, please. The hour being 12 noon, committee is recessed until one o'clock.

*The committee recessed at 12 p.m.*

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**After Recess**

*The committee resumed at 1:02 p.m.*

**Mr. Chairperson:** Order, please. The committee will come to order. This afternoon, we are dealing with the

Department of Health. At this time, we ask the staff to enter the Chamber.

**Mr. Chomiak:** Mr. Chairperson, where we generally see us going this afternoon is completing most of the items, if not all of the items, right through to the Minister's Salary. So that is roughly where we think we are going for the balance of the afternoon. I just thought I would let the minister be made aware of that.

However, prior to that point, I do have a few questions relating to—I am going to try very hard, during the course of the discussion about Pharmacare, to stay away from a lot of rhetorical flourishes, but I want to ask the minister, the minister made reference to the Saskatchewan plan and the minister's view that the Manitoba plan is an improved version of the Saskatchewan plan. I just want to raise a couple of points about the Saskatchewan plan.

I do not generally like to do comparisons between provinces because I do not think they really work, but, because of that reference, I just want to—there are a couple of aspects of the Saskatchewan plan. Firstly, with a population base similar, in fact, I think, smaller than Manitoba's, and, I think, demographically not significantly different, their budget for their Pharmacare program is far in excess of what the government is projecting for our program this year. They are projecting something like \$58 million. So that is one significant difference.

Some of the exceptions to the Saskatchewan plan where I understand they allow assistance on a 100 percent recovery basis are for some chronic diseases: paraplegic, cystic fibrosis, chronic renal diseases, palliative care and AIDS patients and the like. They make special exceptions for those chronic disease categories, and there is also an emergency assistance program, as well, that provides drugs on an essential basis for people who cannot pay. So there are some differences in Saskatchewan that I think are very positive and do differ from the Manitoba plan, not the least of which is, of course, the funding arrangements.

I wonder if the minister might want to comment on that.

**Mr. McCrae:** I think a key area in Saskatchewan that perhaps the honourable member, well, he did not mention

it, may be the fact that in Saskatchewan their personal care home residents' drug requirements are rolled in with their Pharmacare, which would drive up that number, I suspect.

That might account for about \$7 million, so in certain ways our program I think looks better and perhaps is better than the Saskatchewan one in that once you have reached the level of your deductible, there is no further co-payment here in Manitoba to be concerned about. I wanted just to mention that.

When I talk about Saskatchewan I am not trying to say it in such a way as to imply that somehow Saskatchewan does not have a good program. We think they have a pretty good program there, and some of what we have done is modelled after the Saskatchewan experience where, despite initial comment and so on when that program came in, it seems to be working fairly well, so I just wanted to point that out.

**Mr. Chomiak:** I wonder if the minister could outline for us why the 2 percent and the 3 percent levels were chosen as well as the \$15,000 cutoff. Several years ago when the government increased the rates on personal care homes, as I understood at the time, the rate was based on an assessment done by the department on incomes. There was a very systematic approach as to why those levels were chosen, and there was a very deliberate attempt to address that formula based on some criteria that had been developed by the Department of Health.

Can the minister outline for us the criteria that were developed concerning the 2 percent and 3 percent and the \$15,000 cutoff?

**Mr. McCrae:** In developing the new program, we worked very diligently at the changes in order to work within the fundamental principles that we laid down. Among those were that we felt that we did not want people at low income levels or people who have high drug expenses to be impacted in a way that could not simply be handled by these people.

We wanted to make it into a program of protection of vulnerable people and maybe move away from sort of the universal principle of Pharmacare, universal access being looked at from a point of view of everybody getting something, where there are people in Manitoba who can

afford to pay for a pretty significant amount of prescription drugs without any assistance from the state. I think that is a defensible principle.

There was analysis done respecting the various income levels by people in the department who are well qualified and trained in those kinds of things, and we made the decision that people who were really poor ought to be afforded some extra protection, and that is the difference in the 2 percent and the 3 percent. The decision was based on an analysis of a person's means, and a decision was made. It could have been 14,000, it could have been 16,000, but we opted for that particular level.

\* (1310)

We could have done without that altogether, I suppose, and still have been able to claim that nobody has to pay more than 3 percent of their income for prescription drugs, but we felt an extra measure of protection for people, and they have trouble enough, people earning under \$15,000 a year, just making ends meet and so on. We felt that it was a compassionate decision, whereas in Saskatchewan, I understand it is 3.4 percent across the board. Well, I am not saying they are not compassionate. I am just saying that we decided that an extra level of protection would be appropriate.

**Mr. Chomiak:** One of the things that I think is sad about this policy change is the elimination of the Life Saving Drug Program, because in the past we always had a catchall that we could shift into in terms of drug costs, and with the elimination of the Life Saving Drug Program, I suggest we lose a fair amount of flexibility in terms of the Pharmacare program.

Let me give you an example. Last year when there were concerns about the cancer drugs for children, the Life Saving Drug Program was utilized to try to bear some of the additional cost. Let us use the example of a child who has been diagnosed with cancer and requires immediate drug therapy and drug assistance. So typically, and under the chemotherapy, mom quits her job and mom stays at home, so the family has been knocked down in terms of income.

The new program takes into account previous income with respect to both spouses working. It seems to me that we do lose flexibility with respect to providing for

that child, and so I wonder if the minister might comment on that.

**Mr. McCrae:** Mr. Chairman, the honourable member raised the questions relating to the Life Saving Drug Program. The consistent protector in this is the fact that nobody, even somebody who needs very high volumes of expensive drugs under the old Life Saving Drug Program, nobody pays more than 3 percent of their income for medicine. That is the constant protector. I think it makes sense.

The honourable member talked about flexibility, and he used as an example the issue that arose last fall with regard to children's cancer drugs. Whether a flexible Life Saving Drug Program would have been available last fall or some other manifestation thereof, the determination was immediate that this problem was not going to be a problem for the parents and children, that whatever government and hospitals had to do to resolve the problem was the direction. Resolve the problem. So it was nice that the Life Saving Drug Program might have been part of the resolution of that, but it would not have been the only one. If it had not existed then, we still would have resolved that problem somehow, simply because it was totally inappropriate to leave the children and their parents dangling, and the government was not going to allow that to happen.

I have some other things here I could answer for the honourable member. On May 1, the member for Kildonan requested information respecting Manitoba Health's administrative process in verifying applications for Pharmacare. Manitoba Health has established guidelines to assess whether or not an application under the income-based drug program should be flagged for audit. Generally, the process is as follows.

An application form is received by the Pharmacare program. It is assessed in accordance with the audit guidelines. The application is processed for reimbursement under the program. Revenue Canada verification of reported income is sought. Action required as a result of an audit would take place after the fact. For example, if income reported on the application was incorrect, it will be adjusted at that time. This way application approval is not delayed because of the Revenue Canada verification.

I would ask that it be noted that as stated in the brochure published by the department, failing to accurately report family income could result in a fine and the loss of Pharmacare benefits. If a person's income changes by more than 10 percent in the course of a year, that is sufficient grounds to seek an adjustment. So that means if you lost your job or something like that, you would not have to rely on last year's income level. You could let the program know about it and adjustments would be made.

With regard to breast screening, for the nine-month period of August of '95 to April of '96, a total of 4,868 women were screened at the Winnipeg site at Misericordia General Hospital, and 1,704 women were screened at the Brandon site. The majority of women screened had a normal result. Less than 15 percent had an abnormal result and were referred to their physician for further examination or tests.

Right there is justification enough for having the breast screening program. Fifteen percent had abnormal results, and if it had not been for the program, that might not have become known. In those 15 percent of cases, those are real human beings who are going to have whatever issues flow from that positive result or abnormal result, they are going to get it dealt with sooner than they would have otherwise which sometimes can be a lifesaving difference. The screening program is reaching an underserved population.

Approximately 20 percent of women who come for screening have never had a mammogram before. So we are absolutely saving lives, there is no question about that. For an additional 20 to 30 percent of women, their last mammogram was more than three years ago. Manitoba Breast Screening Program staff have made 47 community presentations involving a total audience of 1,305 individuals. Staff have held 80 meetings with individuals in community organizations to promote the program. As well, they have responded to a total of 86 requests from professionals and individuals for program resources. I cannot think of a program that could be more rewarding to be able to report these kinds of results.

The honourable member asked on May 8 about the number of public health nurses in the province. There are 160.44 public health nurses in the province. I think that

means 160.44 equivalent staff years. I would not want to receive services from 44 of a nurse. Yes, that is 44 weeks—160.44. In Winnipeg, there are 58.5; in Central, there are 15; in Eastman, there are 9.47; in Interlake, there are 13; in Norman, there are nine; there are nine at nursing stations; there are 13 in Parkland; there are 15.5 in Thompson; 18.39 in Westman, for a provincial total of 160 staff years, plus 44 weeks.

\* (1320)

On May 3, the honourable member for Radisson (Ms. Cerilli) asked how much time departmental staff spend on child and youth initiatives. Within the Program Development branch, approximately six staff spend 20 to 40 percent on child and youth initiatives. It should be noted that many of our programs and staff are directed toward children and youth. That would be in addition to that six staff.

The long-awaited and much-anticipated list of our health reform established committees, I will make that available for the honourable member.

**Mr. Chomiak:** I thank the minister for that information. I had been advised that Health department staff had estimated that two-thirds of Manitobans who now receive Pharmacare benefits would not be receiving Pharmacare benefits. Is that figure accurate? If it is not, what is the accurate figure?

**Mr. Chairperson:** Order, please. Was the honourable minister tabling this or just making it available?

**Mr. McCrae:** One for each of the critics and one for Hansard.

**Mr. Chairperson:** Okay, it is tabled then.

**Mr. McCrae:** The honourable member may be aware that fewer than half the families in Manitoba accessed the Pharmacare program previously. Of the remainder that did access the Pharmacare program, approximately two-thirds will now probably not be eligible for coverage under the program, so what that means is that most people did not use the program anyway, and that is a good thing. It probably says they are healthy enough; they did not need to.

That is a good thing to say, but, on the other hand, of the clients that we had prior to that time, approximately two-thirds would likely not receive benefits anymore.

**Mr. Chomiak:** Mr. Chairperson, would it be possible to get a list of the senior personnel at the Pharmacare program who are presently occupying senior positions in the Pharmacare program?

**Mr. McCrae:** Mr. Ken Brown would be it; senior staff, Ken Brown.

**Mr. Chomiak:** Mr. Chairperson, how about the Life Saving Drug Program? Who is the senior person? Is it also Ken Brown?

**Mr. McCrae:** Yes.

**Mr. Chairperson:** Item 4.(f) Pharmacare \$37,591,800—pass; (g) Ambulance \$6,000,200—pass; (h) Northern Patient Transportation \$3,068,400; Less: Third Party Recoveries \$755,400—pass.

Resolution 21.4: RESOLVED that there be granted to Her Majesty a sum not exceeding \$1,485,043,800 for Health for the fiscal year ending the 31st day of March 1997.

Resolution 21.5: Addictions Foundation of Manitoba, Board of Governors and Executive \$170,600.

**Mr. Lamoureux:** I am wondering if the minister can give some sort of a percentage breakdown in terms of the Addictions Foundation on those that are there for gambling and those that would be there for alcohol. Does he have access to that type of information?

**Mr. McCrae:** We do and I can break that out for the honourable member at a subsequent time. We can make available to the member the number of people working in gambling addictions and the number of people working in other areas of the AFM's work. [interjection]

**Mr. Chairperson:** Are we doing this off the record, or are we going through the Chair?

**Mr. McCrae:** Sorry, Mr. Chairman.

**Mr. Lamoureux:** I know I could forgo a lot of questions and I would have if, in fact, I could get some

assurance from the minister that I am looking probably some time within the week you will attempt to get it to me, that kind of information.

**Mr. McCrae:** We will attempt to have that for the honourable member within a week, sure.

**Mr. Chairperson:** Item 5. Board of Governors and Executive \$170,600—pass; Finance and Personnel \$317,900—pass; Drug and Alcohol Awareness and Information \$511,600—pass; Program Delivery \$8,953,000—pass; Gambling Addictions Program \$966,500—pass; Funded Agencies \$1,861,400—pass; Less: Recoveries from Manitoba Lotteries Corporation (\$966,500) and Other Recoveries (\$1,376,000)—pass.

Resolution 21.5: RESOLVED that there be granted to her Majesty a sum not exceeding \$10,438,500 for Health Addictions Foundation of Manitoba for the fiscal year ending the 31st day of March, 1997.

Resolution 21.6: Evaluation and Research Initiatives (a) Manitoba Centre for Health Policy and Evaluation \$1,850,000—pass; (b) Manitoba Health Research Council \$1,752,600—pass.

Resolution 21.6: RESOLVED that there be granted to Her Majesty a sum not exceeding—[interjection]

**Mr. Chomiak:** Mr. Chairperson, can the minister explain what happened to the Foundations for Health-Research Centre?

**Mr. McCrae:** One moment, Mr. Chairman. The Foundations for Health-Research Centre received last year \$2.1 million in one-time financing and \$5 million for capital financing, and that was a one-time matter, too, for a total of \$7 million.

**Mr. Chomiak:** What kind of research did it undertake?

\* (1330)

**Mr. McCrae:** They have not finished building their building there, so that might be a good question next year, but it is not a very good one this year because the monies that we have made available are one time to get them going with their building in the program.

The honourable member on May 3, this is the honourable member for St. Boniface (Mr. Gaudry), inquired about the status of the eating disorders program at the Health Sciences Centre. The Health Sciences Centre continues to have a program for individuals with eating disorders. Inpatient and outpatient services are being provided by a multidisciplinary team including a psychiatrist, nurses, occupational therapist and a dietitian.

The honourable member for Kildonan has shown an interest in palliative care issues. The goal of the palliative care program steering committee is to facilitate the development of a co-ordinated provincial program that provides palliative care to Manitobans whose disease is not responsive to curative treatment, where the alleviation of pain and suffering and improvement of the remaining quality of life is foremost.

I have a paper here that sets out the membership of the committee and the program features, which I will table, so that honourable members can have that. There is an answer here that I have for the honourable member for Kildonan who asked about the Epidemiology unit projects.

There are public reports that are pending or have been completed: the Diabetes Burden of Illness report, the Health of Manitoba's Children, Injury Control in Manitoba, Review of Notifiable Diseases in Manitoba the Last Decade. There is the current research projects underway, the Manitoba HIV Prevalence Survey, the Effectiveness of Pertussis Vaccine in Manitoba, The Population Transmission Dynamics of Sexually Transmitted Diseases in Manitoba, and the Epidemiology of Inflammatory Bowel Disease, Crohn's and Ulcerative Colitis in Manitoba.

That is what has been done and what is being done by the unit.

**Mr. Chairperson:** Shall the resolution pass? The resolution is accordingly passed.

Resolution 21.7: Expenditures Related to Capital (a) Hospital Programs (1) Principal Repayments \$34,993,700.

**Mr. Lamoureux:** I actually have a few questions in this area that I was wanting to ask the minister. First of all,

I was not the critic for Health when the government had made the announcement in terms of the capital, even though I was a member of the Chamber. He might have circulated some sort of a list of the capital projects back in 1995 prior to the election. Does the minister actually have a copy of that that I would be able to refer to?

(Mr. Gerry McAlpine, Acting Chairperson, in the Chair)

**Mr. McCrae:** We have that and we can make it available. We tabled it last year, and we will get a copy for the member.

**Mr. Lamoureux:** I appreciate that. There are a number of issues which one could raise regarding the capital and where the freezes have been instituted. There are the two that I wanted to raise this afternoon, given the amount of time that we have left.

I talked about the capital freeze with the Cancer Research Foundation earlier, and now that we are on that specific line I am wondering if the minister might be in a better position to be able to comment on the most recent developments with respect to the Cancer Research Foundation.

**Mr. McCrae:** There have been very useful efforts made recently respecting the Manitoba Cancer Treatment and Research Foundation Centre capital plan. It, along with all the others, was suspended last winter, but it was made clear at that time that certain ones would, no doubt, get back on track before too long. Very good work has been done lately between people representing the Health department and the foundation. I expect within a reasonably short period of time to be bringing the honourable member and the public and everybody more up to date.

It is hard to be more specific yet, because we have not finalized everything, but it is important enough to say to the honourable member that cancer research and treatment is a provincial responsibility carried out through the foundation. So in that sense it is unique from most, or if not all, other capital items.

The discussions started off a few years back, and we were talking about a program that would be funded jointly, government and foundation. The scope of the

project in the planning stages just grew and grew from something that would have been \$15 million a few years back to something that moved all the way to \$60 million.

There has to be some sense that what we are doing is what we need to do and that it will achieve what we need to achieve. Discussions about that are going on now, and I expect, in a very short period of time, to be able to announce that something is forthcoming in this area. We have cancer patients. We are going to have cancer patients. The number of them is going to grow, and we must plan for that. I think there was a sense that because of the suspension of the capital program, we are going to forget all about cancer patients, but nothing could be further from the truth. I would hope, within a few weeks, to be able to talk more about our plans for cancer treatment and research in the future.

Mr. Chairman, in response to a question raised by the honourable member for Kildonan on May 8, some of the projects being supported by the Healthy Communities Development office in 1996-97 will include the mobile workforce Winnipeg region—and that is to test the feasibility of workers' vehicles being mobile workstations and reduce office space requirements—regulated midwifery, support of a midwifery implementation council to recommend on the implementation of regulated midwifery, including legislation, practice education and equity and access issues. The St. James-Assiniboia centre is a pilot seniors wellness centre operating as part of the seniors centre, additional care and support, special community support services to assist mentally ill and post-mentally ill persons re-establish themselves in the community.

\* (1340)

There are other types of projects, too, that are under consideration at this time, the Aboriginal Health and Wellness Centre to establish comprehensive culturally and community-based health services in the Aboriginal Centre of Winnipeg; the Community Nurse Resource Centre, that is to establish one or more centres in northern and central Manitoba; tobacco reduction enforcement, that is the inspections to enforce the prohibition against selling tobacco products to minors; and the children's asthma education initiative to improve home management of asthma.

**Mr. Lamoureux:** Is it then safe to assume that the Department of Health has been prioritizing those capital projects that were put on hold, or would he anticipate, with the possible exception of the Cancer Research Foundation, that the other projects will wait and be announced in one major announcement some time in the future, or is there that prioritization, and this year we might see the Cancer Research Foundation possibly getting the green light, possibly one or two others maybe the following year to pick up a couple, just some sort of indication on that point?

**Mr. McCrae:** Mr. Chairman, we are trying to deal with two or three matters here, and that is why it was necessary, unfortunately, to suspend the program. We have for 30 years been building hospitals and personal care homes and providing renovations and machinery and equipment and all of these things in a certain way. What we have been doing has been borrowing a lot of money to do it with.

So when you look at the performance of the fiscal side of things in Manitoba and you look at Manitoba's capital budget, you see huge, huge amounts of dollars going to the payment of interest charges for buildings, bricks and mortar, and equipment and all these other things that I mentioned. Should we not be living within our means is the question. Are we building something we cannot sustain?

This is not Saskatchewan where I do not want to go ahead with what is on the program and then have some future government come along and close all those hospitals. That is not what I want to see. Not only should we be learning how to expend our capital monies rather than borrowing to do it, we ought to live within our means, build what we can in any given year without having to borrow a whole bunch of money to do it.

We ought not to be overbuilding. In other words, if we are already over capacity in our rural hospital system, for example, or in Winnipeg for that matter, which we are in both cases, ought we not to pause long enough to look at what it is that is presently on our capital construction program? Is it something that we can sustain? Is it something that we are building the right kinds of buildings even though planning has already been done? Are we doing the right thing by going ahead with plans

that call for programming that we maybe cannot sustain for the longer term? That is no service to Manitobans. Can we afford what we are doing? Are we building the right thing, and do we have the right sense of how these things should be financed?

Personal care, for example, communities take quite a lot of pride in their personal care homes that they have in their communities. I know of one or two communities want to pay for their own. That makes sense to me. Why should the government buy everything? While this pause is happening in capital construction, we have now heard from two or three proponents who are quite willing to build their own. Obviously, we do not want them to build something unless there is a plan for how we are going to fund it on an annualized basis.

That is where the government comes in and has to be part of the process, because we have to agree that we need X number of personal care homes or acute care hospital beds, and so we are willing to be involved in the financing of the operation of those things. It is not good enough to just go and build a personal care home in a place you do not need it and then ask the government to come along and pay the annual operating costs for it when it is not necessary.

I know that the Boundary Trails people, they are very supportive of the proposal there. It is a fairly unique one, too, because it is the only one in Manitoba I know of where they are going to turn two hospitals into one. That is going to get the attention of government and it has got the attention of government. That is a project that is fortunate enough to have enough public support that people are willing to put their own money behind it. That makes sense in a situation where—well, I left out one of the most important parts. I do not like to bother the honourable member with it.

This little matter that the federal government is taking \$220 million away from us is no small item either, and the people out there recognize that is happening. They are willing to get behind their projects, and I want to see to what extent they are willing to get behind those projects, because those projects that we really need, if we can get them on the road sooner because the community got behind it and paid for it, well, obviously we are interested in those kinds of discussions.

So all of those were good reasons to suspend the capital program. We were careful, I think, in excluding from that suspension some of our mental health initiatives which need to be—we need to shut down that Brandon Mental Health Centre. We need to do that because it is no longer the appropriate way to provide service to people who need mental health services, but in order to shut down the Brandon Mental Health Centre we need to have some acute psychiatric hospital bed capacity in Brandon, Dauphin, Portage, Thompson, The Pas. All of those places, except Brandon, never had acute psychiatric services before, and now they are going to.

That is a really good thing to do, and that is why those features of the capital program suspension were exempted from that, so that those things could go forward. In addition, if there is a hospital with the roof about to cave in somewhere on the staff or the patients, we are going to have to fix that roof, so we had to have some allowance for that. That is why we have a little bit of a capital program, but the rest of it is suspended. I hope that is some background for the honourable member.

**Mr. Lamoureux:** I think in some parts of the minister's answers there might be some merit in terms of the justification. One of the parts where there is not merit yet, the minister, whether it is the Cancer Research Foundation or other groups, has tried to shift this particular delay onto the federal government, knowing full well that the Minister of Health knew, prior to even making the commitment, the cutbacks that were coming down from Ottawa, not to mention the cutbacks that the minister refers to are grossly exaggerated in terms of the \$220 million next year, the \$120 million this year, is not focused on the Department of Health.

There is a block component, and it works out to, I believe, somewhere in the neighbourhood of about 3.2 percent of the overall Department of Health budget, which is significant dollars, not to underplay the amount of dollars, but also the equalization fund, which is considerably up, in which the government has the access. I will save that discussion for when we get onto the ministerial salary.

There are personal care homes that were also involved in this freeze of capital dollars, and the minister started to talk about personal care homes in his response. There was the Oakbank Personal Care Home committee that

was established, and it has been working for the last number of years getting a phenomenal amount of effort from the community and endless hours of discussions from the volunteers. In fact, I believe that they raised in excess of 10 percent of the total requirement for the personal care home facility, which was just over \$400,000.

I understand even the province had provided dollars close to a quarter million of dollars, from what I understand anyway, in terms of doing some sort of feasibility or getting things ready. Here is a project that was about to go into the tender, and I guess maybe if the freeze would have come a month later it might not have had the impact on this particular facility. For many people from within the community, and particularly the volunteers that have put in endless amounts of time and effort and in many cases their own personal finances into this particular project, now they are sitting back and they are wondering, well, what is the government suggesting that we do. Should we have to look at other options? Is that what the government wants us to do?

Listening to the response from the minister previously, one might think that he is telling committees such as the Oakbank Personal Care Home that he wants them to revisit the plan. Is that what he would like them to do? Is the minister prepared to look at these different capital projects and give them some further direction in terms of what his government's anticipations are for these many different capital projects that are out there. In particular, I will use the Oakbank personal care home or the proposal as the example.

What should this committee do between now and whenever the government is prepared to make some sort of a decision on its future? Does he want them to make presentation to him as minister, maybe get some sort of direction for this group in particular, but also then to expand on other areas where there was freeze that took effect?

\* (1350)

**Mr. McCrae:** Mr. Chairman, earlier the honourable member for Kildonan and I were talking about the setup beds in the province including Winnipeg. I have two documents here called Briefing Note, one dated, June 14 of '95. I am sorry, it was dated June of '95, but it reflected the snapshot on April 1 of 1995 of the setup

beds. Now we have one, yes, I see, a snapshot of the setup beds on April 1, 1996. We talked about that, and I am going to table that.

Did you say you met with the people out at Oakbank? [interjection] Talked to some. He has been in touch with the people at Oakbank. The Minister of Highways and Transportation (Mr. Findlay), obviously, he has been in touch with them, too. I have been in touch with them. Staff of the department have been in touch with them, so we are certainly engaging in discussions with the people at Oakbank. That same sort of problem or issue exists in several other communities in Manitoba and we are aware of it.

I know the honourable member wants to discuss the federal cuts again. I try not to dwell on them too much, because even though it is the federal Liberal government and everything like that, and even though they said they would wipe out the GST, and even though they were going to rip up the trade deal and all those things, even though the cuts are deep and painful, there is no point talking about that, it is the federal Liberals that are doing it all. I will not talk about that because the honourable member does not want to talk about it either.

The only thing he should not try to do is minimize. I say \$220 million out of Manitoba's Health, Education and social services budget is a heck of a lot of money. Does the honourable member know how much \$220 million is? We talk about the Seven Oaks Hospital all the time, about \$30 million for the Seven Oaks Hospital. Well, how many times does 30 go into \$220 million? That is over seven times. That is over seven Seven Oaks Hospitals the federal government is cutting from us, and the honourable member wants to stand here and quibble about that every day. Every day he wants to stand up and defend that.

I do not even want to talk about it because I know the federal government has to do some reductions, I know that, but it is a reality. I do not mention it to blame the federal government, I mention it simply because it is a reality. It is \$220 million our government will not have next year to spend on personal care home beds in Oakbank or on Cancer Treatment & Research Foundation or Boundary Trails. Let us not forget little old Brandon General Hospital which is the No. 1 or No. 2 project in our capital budget in terms of its size and value.

I am trying to understand what it is the honourable member is suggesting, the same way on the Pharmacare discussion we had a while ago. What is he offering? If we knew what he was saying was better, we could go with it, but, no, I guess he leaves us to think well what we had before is better. That is the case where the AIDS patient has to pay \$8,000.

That is what the honourable member wants; I do not. I do not think that is fair. I would like to provide more protection for people who need protection because they need more prescription drugs or because they are poor. He wants to hammer those people with an \$8,000 drug bill. Well, that is not good enough for this government. It might be good enough for Liberals, but it is not good enough for us.

I talked a little while ago about the increase in personal care home capacity in Manitoba. Just in this last year alone Donwood Manor, 40 new beds; Killarney, 30 new beds, that is this year; St. Pierre, 6 new beds; Stonewall, 20 new beds, for a total of 96 new, additional add-on more personal care home beds. I mean, just the principal repayment schedule shows an increase for personal care from \$9.7 million to \$10.1 million year over year. Where everybody else's budget is sort of going downhill, personal care and home care up, up, up, up.

I understand where the honourable member is coming from. It was not an easy thing to have to go and freeze the capital budget. That was a very hard thing to have to do, but we were working with a system that was from another time, and it is hard to have a transition in the capital budget of doing it the old way to work your way into doing it the new way. You pretty well have to stop doing it the old way and then start doing it the new way, and the new way is now the subject of consultation and discussion with organizations like the proponents of the Oakbank Personal Care.

The member for Springfield, our colleague the Minister of Highways and Transportation (Mr. Findlay), kindly made sure that I attended there to meet with the people there and my staff has done that too. They are like so many other proponents in the province. Some projects have been talked about for as many as 15 years before they ever got built, and look what happens in Saskatchewan where they build them and then somebody comes along and shuts down 52 of them.

I do not want that for Manitoba. We are trying to avoid the wholesale hacking and slashing and cutting off whole limbs of the health care system. We are trying to avoid that approach which has been used in other provinces, notably NDP provinces, but Liberal ones too. We do not want to leave our friends the Liberals out of this criticism and even some Conservative governments have had to make some pretty hard choices.

I do not know what context the honourable member is coming at this from, but we do have to build what we can afford to build, and we have to be able to keep what we do build. I think there is a sense sometimes that our health care improves with every brick we add to a building and it does not work quite like that.

**Mr. Lamoureux:** I personally have not met with Oakbank Personal Care Home committee members per se, but I use it as an example because I think that there are many other groups that are in the same situation as the Oakbank Personal Care Home committee, and for these groups and the efforts that have gone into it, I believe, are owed some sort of an explanation.

The explanation, for example, that the minister just finished giving about the federal government is not good enough in the sense that they knew those cuts were there prior to the actual promise being given by this government. Do not necessarily blame Ottawa for this one. You can find many different things to blame.

(Mr. Chairperson in the Chair)

The specific question is to the Minister of Health. For organizations like the Oakbank personal care home committee and those individuals that are involved in projects of this nature, what should be their next step? Are they to review their projects, look at alternating their projects? How do they know if it is their project that will ultimately be getting the green light as being proposed? Is the minister sending out staff to some of these groups? Is there dialogue?

\* (1400)

Is there direction that is being given to these groups from the Ministry of Health, and, if there has not been that dialogue or some sort of indication to these groups, will the minister make the commitment that he is

prepared, through the Ministry of Health, to give some guidance to those organizations, such as the Oakbank personal care home committee, as to what they can anticipate the government is going to be doing with reference to their project, not only in terms of the short term, because the short term apparently is a hold on funds, but also the long term. Are they going to have to come back with a different proposal in other words, or can they just wait in the bank and wait for the government to come up with the dollars? What can the minister do to shed some light for these organizations? I will leave my capital questions at that. Thank you, Mr. Chairperson.

**Mr. McCrae:** I have a proposal for the honourable member, and I hope that he will support this. He spends a lot of time every day in this House defending his friends and colleagues in Ottawa in the federal Liberal government. I want the honourable member to do a little work on this, because I am serious in terms of a proposal. I want him to get out his calculator and figure out how much GST Manitobans have paid since the Liberal government in Ottawa came to office, because they promised to get rid of it, as I recall, and the honourable member supports them and still does.

So how much money have Manitobans paid? Let us be fair. They were elected in the fall of '93. They should have been able to get rid of the GST by, let us say, January 1, '94. So the whole of '94, '95 and up to now in '96, how much money have Manitobans paid on the GST? Get the federal government, not only to stop the collection of this GST, but to send us a cheque in that amount, and we can start a new capital fund for our hospital and personal care home program. We could build that Oakbank—we could have that thing up and running probably within six months if the honourable member does his homework on this, and he can really help.

The Cancer Foundation, I am sure we would have enough for that. We would have enough for Boundary Trails, Brandon. We could probably put our whole capital project right back on the rails again; just send us that cheque. If you can get Jean Chretien and Mr. Martin and all that bunch, even get Sheila Copps involved in this one; you know, she is running now. She could campaign on this, that you elect me, and I will send Manitoba a cheque for the amount of GST, a rebate for the GST they

have paid in '94, '95 and up to this point in '96. It would be a great campaign promise because it is health related. I am going to save health care in Manitoba. She can run in Hamilton West on that platform. She can get all the Liberals from across the country to come and help her out in the campaign, and every province gets the same rebate.

It does not matter where it comes from because Liberals never worry about that anyway. I think it is a great proposal; I would like to hear the honourable member's response. I do not know not know how much GST we pay. I wish my friend and colleague the honourable Minister of Finance (Mr. Stefanson) was with us because he probably has a general idea, but I will bet it would more than cover some of these important projects that we have been talking about this afternoon.

The honourable member is always so helpful, but he is a little defensive of his friends and cousins over there in Ottawa. So what does he think of my proposal?

**Mr. Lamoureux:** I would answer that question if the minister would actually answer the question I posed to him just three minutes ago.

**Mr. McCrae:** Well, one thing the people of Oakbank and everywhere else can do is await with bated breath the honourable member's response to my proposal, No. 1, because, if he can deliver—and he wants to be the leader and everything like that. He has to be able to deliver. Now, if he delivers, I can get right back to the people in Oakbank and say, let us get together right away, get this thing on rails, because we know we need personal care home spaces, and this is a made-in-Manitoba solution. Ottawa, I would even let them pretend they made it up instead of me, because I do not need the credit; all I need is the money. So, if I could get the money, I would really like to get on with the personal care projects. We are going to need more of that in the next few years.

I have already spoken to the people in Oakbank and told them the situation. Maybe the honourable member wants to know what I told them as opposed to what I am going to tell them, because I have already told them the capital program has been suspended. Well, we addressed the issues that I spoke about in my response, the issues relating to how we are going to pay for the projects we build, whether there ought to be more community participation in the construction of these residences.

These are not hospitals; they are residences in the case of personal care, but even hospitals, we are looking for community input. If a community wants to pay for a personal care home or a hospital and we think that it is needed as a department, well, we should get together, let them build their personal care home or hospital, and we can then be involved in funding the operations of it.

Maybe they can only pay for a portion, hopefully, a large portion, and these are the things that I talked to the people at Oakbank about. I talked to them about the need for us to build those kinds of partnerships. It is really encouraging to see communities in Manitoba not just coming to government saying, will you pay for everything for us, please. They are coming to us and saying, what can we do, how can we help, and we are telling them, be part of the solution here and help us with the fundraising, or help raise the funds that are required for the construction. Please understand that we are trying to expense things. One idea is that a community could put up the first bit of the money, which might hold us over for a year or so, so that the scarce dollars that the Health department has can be used on another project like the Manitoba Cancer Treatment and Research Foundation or something like that, or on the mental health aspects of our capital budget.

So it is those kinds of things that I have already told the people at Oakbank. I have written to everybody. I put an ad in the paper, or an open letter in the newspaper—criticized for doing that, but I did it anyway because I think people are entitled to know these things—to explain, among other reasons, that the federal cutbacks had a lot to do with this. The honourable member makes much of the point that we had some notice from Ottawa about their cuts, but, by the time we got them and the time to put this information out, there was not enough time there for all of that work to have been done. The honourable member knows that. Let us not make this into more of a political matter than it already is. For goodness sake, let us not build 52 hospitals that we would just end up shutting down at some point in the near future. Let us not do it that way.

**Mr. Lamoureux:** My answer to the minister's question is that I support or expect that the federal government will live up to its campaign promise as illustrated in the red book regarding the GST.

**Ms. Jean Friesen (Wolseley):** I wanted to ask the Minister of Health about Lions Manor in my constituency. Lions Manor has raised a considerable amount of money for a new addition which was specifically to have some specially designed areas for Alzheimer's patients. I think it was certainly at least one floor, it may have been four floors that were Alzheimer's patients. This is one of the projects that is now on hold, and I wonder if the minister could give me some perspective on it. Where does this rank in his plans? When are the people of Lions Manor or the Lions Club likely to hear anything further?

There are a number of concerns. One is, of course, as it is I am sure for a number of institutions, the impact upon their fundraising. They have raised a good deal. I do not know what their plans are at the moment for this, but I would like to know from the minister how this is affecting not just Lions Manor but the community fundraising that he wants to occur, how this kind of freeze is affecting that.

\* (1410)

My other concern is the Alzheimer's patients in particular, the nature of the design of this particular tower that is being proposed at Lions Manor, part of it is specifically for Alzheimer's patients. Obviously it is a growing area of concern for any province and for any Health minister, and I am wondering what the overall plans for Alzheimer's patients are in Manitoba and where Lions Manor fitted into that.

**Mr. Chairperson:** Order, please. Before we move on to the answering of that question, were the honourable members finished with the previous line, Hospital Programs?

**Ms. Friesen:** This is the Capital Reduction.

**Mr. Chairperson:** Your question is falling under Personal Care Home programs, is it not?

**Mr. Chomiak:** Mr. Chairperson, we are at 21.7 and I recognize while we are on (a) in the Capital, generally the questions, because of Capital, the way the Capital is allocated in the capital planning process, we are actually dealing with questions in general.

I might also indicate that when we discussed it previously with the minister, there is another capital planning portion and function appropriation in the budget, and we had talked about sort of doing it all in general under this particular appropriation. So I think it is with the approval of the minister that we are not being as issue specific but just all related to Capital.

**Mr. Chairperson:** I thank the honourable member for that. I did not know there was an agreement. So it is agreed then we will deal with the entire 21.7 as a whole? It is agreed?

**Mr. McCrae:** As I recall, it was agreed that when this passed, it was deemed that the Minister's Salary pass at the same time.

**Mr. Chairperson:** I do not think that is what they agreed to. I did not hear that statement being made.

**Mr. McCrae:** Oh, yes.

**Mr. Chairperson:** Good try, though. It is agreed. The honourable minister to respond.

**Mr. McCrae:** Mr. Chairman, here again with the Lions, the staff of the department has met with representatives of the Lions. I, too, have done that. So we have been engaged in discussions on how they can manage their programming while we wrestle with this problem of how we finance our capital program for the future. The Lions contribution in Winnipeg and elsewhere to community programs has been significant and very much appreciated. The honourable member is certainly doing the right thing by raising issues like this in the Estimates.

We have not had the last of our meetings with the Lions, so we will continue to work with them. It is a difficult job to take 101 programs which have already been deemed to be important under the old system and then make decisions about which ones ought to get back on the track and in which order. We will wrestle with each and every proponent though to make sure that their present responsibilities are something that they can carry out and get on with their future responsibilities as and when we can work that out between us.

**Ms. Friesen:** The second of my questions really dealt with the impact on fundraising. The minister wants to

ensure and encourage community participation in this kind of building and my concern is, and this is one example of that, of the implications of this freeze on the ability of communities to raise the funds that the minister is looking for.

This is an institution which has in a very short time raised a considerable amount of money with a great deal of enthusiasm. It is difficult under conditions of a freeze with no end, no time line for it, to continue that kind of enthusiasm both within any organization, not this one particularly, and within the community at large. I am looking for some indication from the minister as to how this can be dealt with. The general direction he is going is one that encourages community participation. How do we ensure that with the kind of freeze that is there now?

**Mr. McCrae:** I certainly do not want to discourage community participation. I know initially when something like this comes out there is an initial feeling that, oh, what did we go and raise all those funds for? We want to redirect that kind of thinking to something more positive, and that is what our efforts are directed at. We do not want to lose those partners who have demonstrated such a strong willingness to be involved, not only with their efforts, but also their cheque books, so we do not want to lose them.

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

This is equally true of funders for the Cancer Research and Treatment Foundation, and we are out there doing our footwork. If not on the front pages of the newspapers, we are out there to ensure that those people who have committed pledges are not going to be discouraged because of what we hope will be a relatively short-term suspension. Depending on who you are, short-term might seem long-term to somebody else, and I am trying to move this as best I can with the resources that I have at my disposal.

I will take what the member has said as an urgent bit of encouragement to move forward and not to sit on it for too long. I understand how people feel about these projects which are so important to them.

**Ms. Friesen:** The second part of my questions dealt with Alzheimer's disease, and this was a facility which was to, by design, through certain kinds of security issues, spatial

issues, deal specifically with Alzheimer's patients. It is obviously a growing problem for every province in health care.

I wondered where this particular proposal, this section of the institution, fit with the minister's overall plans for Alzheimer's disease and for the planning of special facilities, special training—leaving aside research for now, that is a generalized issued. But in Manitoba, as I understood it this was a first of a specially planned, specially designed, specially constructed Alzheimer's disease facility.

I would be looking for some guidance perhaps from the minister's staff on whether indeed that is the case. Are there alternatives? It was something I think which is very important to families as they look at the conditions of their older members of the family and older members of the community, a very serious and often a long-term disease. Could the minister give us some indication of the facility planning for Alzheimer's?

**Mr. McCrae:** The program had dimensions that were specific to Alzheimer's patients or residents. A lot of the new construction nowadays, if not all of it, is designed to house and care for a variety of people of—what is that expression I am looking for? People with Alzheimer's disease and other similar conditions. [interjection] No, if I knew what I was looking for I would come in my own, it would be there, you know. It is not right at the moment. It will come, it will come. I am having a block right here, right now.

Mr. Chairman, if I start over again maybe it would be better. The design of our modern personal care homes takes into account people with Alzheimer's and other conditions like that and—[interjection] No, it is not amnesia. So we are trying to build buildings that can accommodate the needs that people have and the Lions are front and centre in this whole area. So new buildings are like that, but their program is specifically designed for Alzheimer residents.

Our department is keen on their proposal, like we are keen on others, but certainly this one is a very exciting new direction for us to be taking. We would like just as much as the honourable member or the Lions or anybody else to get on with that. I wish I could tell the honourable member that next week on Thursday afternoon at two

o'clock, we are going to announce the resumption of the Lions project. I would like to do that but I cannot quite that quickly. All I can tell you is that my department is working very hard, and they are being urged by me to continue to do so.

\* (1420)

I am working within certain constraints that I cannot help, that I cannot change, cannot do anything about, but I think we will see programs start to come on stream again in fairly short order. Certainly with respect to the Cancer Treatment and Research Foundation one, it is going to be the subject of comment before very long and then others, as well. All I can do is take what the honourable member has said today as a representation, and I appreciate it as such.

**Ms. Friesen:** Mr. Chairman, this gets away from the facilities, but it is specifically dealing with Alzheimer's. Are there departmental studies or provincial studies, prognoses of the rate of the disease or the implications in demographic terms for Manitoba?

**Mr. McCrae:** We do not have that at our fingertips. We will follow up with that. If we have that type of information for Manitoba specific, we will get it to the honourable member. In any event, if there is some national study that has produced some kind of demographics on it, we will make that available for the honourable member, too.

**Ms. Friesen:** I thank the minister for that. My second question deals, of course, with the Misericordia Hospital, and I know that you have already been dealing with some questions with the member for Inkster (Mr. Lamoureux) on the Misericordia.

Some of the same comments apply. Some of the same concerns are that the Misericordia also has a hospital foundation which over the last number of years has been very actively trying to raise funds, and very successfully in some areas, in raising money for different hospital activities. Some of those we see today in the Care-a-Van and some of the external outreach kinds of communities that the hospital has been involved in.

Again the instability, the lack of decision on the Misericordia, both in buildings and in programs is

something which is making it difficult for the hospital to raise funds at the level which it would like to do. So I am looking both in terms of the building component of this that the minister has got on hold, as well as the long term plans of the hospital. Is there anything that the minister can give us that would give the staff, the patients, the foundation board some sense of timing? When will the uncertainty be over?

**Mr. McCrae:** We expect by the end of May to come forward with a response to the work of the Urban Planning Partnership. I do not know if we will have a total response to the KPMG, as well, but certainly more light to be shed on the Urban Planning Partnership effort along with that of KPMG. That is very much a discussion of the future role of the Misericordia General Hospital. I think the honourable member knows I have frequent contacts with people respecting the Misericordia Hospital. It includes the member for River Heights (Mr. Radcliffe), but it also includes Ted Bartman. I have a coffee date with him coming up very soon. We have kept up contacts.

That sense of partnership is very important not only to me, but I hope the people of Misericordia Hospital, too, because we are trying very hard to ensure that the people in Manitoba and certainly surrounding the Misericordia General Hospital see something going on there that has an important dimension or important element to it with respect to health care. We are proud of the eye care part of that operation there. We are proud of the breast screening centre that is there, and we are proud of some of the other things that they do there, and we are proud also of the culture that exists at the Misericordia General Hospital.

We are not unmindful of any of those things, yet we have got this big job to do with respect to the ordering of hospital and medical services in the city of Winnipeg. We will keep up those contacts and hopefully at the end of May, we will have something more to report to the honourable member.

**Ms. Friesen:** Mr. Chairman, how will that report be made? Will it be made to the Legislature? Will it be a report of the minister to the board? In what sense is there going to be a public report? Will that report include a response on the four capital projects that are listed in the minister's freeze here?

The Stage 3 includes the new bed towers, diagnostic and operating room space; Stage 4 which is renovation to patient bed areas and operating rooms; Stage 5 which is the new main entrance and cafeteria; and Stage 6 the remaining renovations in the longer term Misericordia plan. Is that going to be part of the response in May?

**Mr. McCrae:** No, we would not be talking about the specifics of the capital projects at Misericordia Hospital at that time. At that time, the end of May, we will be hearing from the Urban Planning Partnership and KPMG, and whether a government will be announcing its intentions at the end of May is not clear to me at this point.

I do not think we will be that far along, but certainly, no, we would not be talking about the capital projects at the Misericordia General Hospital at that early date.

(Mr. Chairperson in the Chair)

**Ms. Friesen:** Could the minister clarify what will happen at the end of May? What public process, what public information will be available at the end of May that is not available now that will give some indication to those groups who are fundraising and to those who are looking for the long-term or even short-term planning of their institutions?

**Mr. McCrae:** We have a moving public process. It is a daily public process. I am receiving concerns on a daily basis either by way of meetings or by way of written communications. Those are being turned over to the Urban Planning Partnership for their review and inclusion in their consideration of all of the different design team reports, so the public, not to mention the petitions and the large gatherings at the Legislature and other places where, in some cases, my honourable friend, the member for River Heights (Mr. Radcliffe) has attended on my behalf and on his own behalf, as well, so there is quite a very public-health reform in Manitoba is the most public reform anywhere in the country, so I am kind of proud of that.

This public process will be a continuing thing until we announce decisions, and we will announce decisions, but certainly it will not be before we have had significant public input which is underway now.

**Ms. Friesen:** Yes, indeed, there is a great deal of public discussion about health care in Manitoba, but at the moment it seems to be going one way. What I understood the minister say was that at the end of May the Urban Planning Partnership and KPMG would have reported to him and there would be something public for people in Manitoba.

**Mr. McCrae:** I would hope not to delay very long upon receipt of those to announce the directions that we will be taking. Do not forget we have to do that because, well, my colleague from Inkster (Mr. Lamoureux) does not like to hear about it but we have very significantly reduced dollars available to us, \$53 million has to come out of the hospital budgets and that is a lot of money. So we cannot delay very much past the end of May to announce the government's decisions respecting those recommendations that will be coming our way. Those recommendations will have been made after all the public input that we have been receiving in the past few months.

**Mr. Chomiak:** Does the minister believe that what we will see when the pause comes off a revised capital program—or will we be seeing a capital program in the near future?

**Mr. McCrae:** We have basically told you what our capital program is. There will not be anything formal brought forward for the capital budget this year.

**Mr. Chomiak:** During the course to the Estimates previously, the minister had made reference to \$10 million to be utilized for capital changes within the city of Winnipeg concerning either initiatives of the Urban Health Planning Council or other reform-related initiatives. Can the minister indicate where in the capital that \$10 million is?

\* (1430)

**Mr. McCrae:** In the budget we have set aside \$10 million for safety and security and \$10 million for capital renovation and improvement. I am not quite done. It does not show up anywhere. It is borrowed money. What you are looking at in the budget documents in Supplementary Information to the Estimates is where we pay back the borrowed money. That is my understanding of the way it is accounted for.

**Mr. Chomiak:** So if I am to understand it correctly, the minister said \$10 million for safety and security, and \$10 million for capital equipment and replacement.

**Mr. McCrae:** The \$10 million for programming changes is anticipated because of the recommendations of the design teams, the Urban Planning Partnership, that whole exercise. The other \$10 million is for fire upgrades and whatever is needed to make our institutions safe.

**Mr. Chomiak:** So out of the \$67.8 million that is allocated is expenditures related to capital. The actual expenditures related to capital are the \$10 million, the \$10 million the minister has identified, and the rest is related to—well, I suppose some is equipment purchases and replacement, but the rest is related to repayments of interest on the capital which I recognize as a roving account done with the facilities.

**Mr. McCrae:** I use the example of facility X. Facility X needs to fix its roof; it costs \$1 million cash, money. We, through our funding through the hospital lines, we give them authority and they borrow the money, and we pay them through, and that is what you see here. It is in the previous lines for hospitals and personal cares that the interest is built into their operating budgets.

**Mr. Chomiak:** I roughly understand the process. What I am trying to ascertain is, what are the actual projects that are going to be undertaken this year, and the minister has indicated \$10 million has been allocated specifically for reforms related to the urban—is it only in urban Winnipeg that the \$10 million is allocated?

**Mr. McCrae:** Mostly urban, Mr. Chairman, but, if something rural somehow qualifies for some of this, we would have to look at that too. But most of this is for the urban design changes.

**Mr. Chomiak:** Another \$10 million is safety and the like, so if hospital X did require that new roof, that would come out of the \$10 million that has been allocated this year?

**Mr. McCrae:** Yes, Mr. Chairman.

**Mr. Chomiak:** In addition, there is also capital equipment and replacement, which is also a separate category. Is that not correct?

**Mr. McCrae:** That is correct, \$9,250,000.

**Mr. Chomiak:** Mr. Chairman, \$9,250,000 just for capital equipment and replacement?

**Mr. McCrae:** Capital equipment borrowing.

**Mr. Chomiak:** So roughly this year, under this appropriation, we are looking at approximately \$30 million in actual expenditures on capital, or are we looking at \$30 million in borrowing for expenditures on capital or a variation of that?

**Mr. McCrae:** I am going to do this in bite-sized bits because I have enough trouble understanding the finance of the capital program. I want to get it on the record properly, and my staff will correct me as I go along here. We have to draw a distinction between borrowing and paying back. Some of these lines represent an amount that we are authorized to borrow, or authorize the hospitals or personal care homes to borrow. Some of these lines in the budget represent an amount we pay in interest charges. I will stop there. [interjection] Principal and interest charges, okay, principal and interest.

**Mr. Chomiak:** Therefore for a layperson to try to determine what the department will spend in bricks and mortar this year, I have been given to understand that \$10 million is planned to be spent on reform-related projects; \$10 million is going to be for safety and related projects; and, \$9.2 million on equipment replacement and the like. Is that a correct conclusion?

**Mr. McCrae:** We would authorize the facilities to spend that much money, yes. We will fund them the amount that the bank needs to be repaid this year.

\* (1440)

**Mr. Chomiak:** Of the \$39 million roughly that we are talking about, is it safe for me to assume that \$10 million is unrelated—well, I will take that back. Of the \$10 million for safety and related matters, has that money all been allocated this year?

**Mr. McCrae:** It is not all allocated now. There may be some of it at this early point, but it is the kind of fund that you identify a need for throughout the course of the year, and you apply that fund to those needs. As the year

progresses, it is over the course of time that the allocations take place.

**Mr. Chomiak:** How does this expenditure of roughly \$30 million compare to last year?

**Mr. McCrae:** It is much, much less this year. I think, I can set it out on paper for the honourable member to show him how it was last year and how it is this year, but it is much, much less.

**Mr. Chomiak:** I would conclude that because of the pause in the capital plan, that seems to me to be the reason why it would be much, much less, with the exception of \$10 million that is being allocated towards Urban Health Planning, which is my next question.

If, for example, the Urban Health Planning team determines that it is in its best interests to shut down or convert a hospital facility, then the hospital or the facility or the department would put in under the \$10-million fund to have the capital requirements to convert that facility to some other type of facility, would that be the process that we would go through?

**Mr. McCrae:** Yes, Mr. Chairman.

**Mr. Chomiak:** My only other question in this area probably will throw everything that I have managed to figure out in disarray, but (d) Other Capital Projects, what does that refer to?

**Mr. McCrae:** The \$5 million we talked about a while ago earlier on for the Foundations for Health, that was for their capital project. This year the Other Capital Projects is \$9,189,900, and some is for the capital projects to which we are committed relating to mental health facilities. This is product for money, no borrowing going on, we are expensing. This is a very good piece of news, I think. It is the start of what we set out to do when we suspended the capital program, to begin to build that which we can afford to pay for in the space of a year. If we can do this with all 101 other programs, we would be in really good shape, but this means we are making a good start at it to the tune of this \$9.2 million.

**Mr. Chomiak:** If the government were to renew some form of the Cancer Treatment & Research Foundation centre, where would that money come from?

**Mr. McCrae:** The honourable member would realize that the Manitoba Cancer Treatment & Research Foundation project, any project of that scope is multiyear, so that there is not going to be very much spent on that program this year. In any event, we already know the foundation has some of its money ready to go. It may be that through negotiations we might determine that in the first stages of this, that their dollars could get spent, and it would not show up on our budget at all. There is nothing in here that will show for the Manitoba Cancer Treatment & Research Foundation because it is a number of years before that project would be finished if we were on time today.

**Mr. Chomiak:** We can pass.

**Mr. Chairperson:** Item 7.(a) Hospitals Program (1) Principal Repayments \$34,993,700—pass; (2) Equipment Purchases and Replacements \$10,798,000—pass.

7.(b) Personal Care Home Programs (1) Principal Repayments \$10,087,000—pass; (2) Equipment Purchases and Replacements \$1,693,100—pass.

7.(c) Laboratory and Imaging Services - Equipment Purchases and Replacements \$1,100,000—pass.

7.(d) Other Capital Projects \$9,189,900—pass.

Resolution 21.7: RESOLVED that there be granted to Her Majesty a sum not exceeding \$67,861,700 for Health expenditures related to capital for the fiscal year ending the 31st day of March, 1997.

At this time we would like to thank the staff for their help and assistance. We would ask them if they could leave at this time, and we will deal with the Minister's Salary.

We will now revert to page 71, item 1.(a) Minister's Salary, \$25,200. Shall the item pass?

**Mr. Lamoureux:** I will definitely not say that the Minister of Health is overpaid, underpaid. I will leave those comments for other people that might want to participate in that. I will not at this point in time anyway.

Mr. Chairperson, last year, when we went through the Health Estimates, I had indicated to the committee that

this is really the first time, and what I was hoping to do was to gain some insights in hopes that the next time we went through Health Estimates, that next time being currently, we would be able to get into a more detailed discussion in a wide variety of areas. The biggest area of interest that I have always had is the area of insured services. That sort of discussion, unfortunately for a number of reasons, we really did not get to go into in any great depth.

\* (1450)

During the last number of hours, one of the commitments the Minister of Health did make to me is that he would try to get for me information regarding the insurance, and there was one binder provided already. I trust and hope that the next time we go through the Health Estimates, we will be able to enter into more of a discussion in terms of the insured services.

I know at times that could be quite a challenge in terms of you always have to be somewhat careful. Whatever words you might put on the record regarding this particular issue, but, ultimately, Mr. Chairperson, what I would like to see is more of a focus and clarification on those five fundamental principles of health care.

I recall that the Chamber passed a couple years back—it was sponsored by the member for The Maples, then Dr. Gulzar Cheema, and I believe the seconder was actually Don Orchard. When that resolution came to a vote, it passed unanimously from all members of this Chamber. Since then we have attempted to bring in a bill, Bill 201: I believe presently it is Bill 200. It talks about the five fundamental principles, in essence, taking the Canada Health Act principles and saying we should adopt them here in the province of Manitoba. The New Democrats have even gone a step further and, I understand, are suggesting that home care services be brought into the Canada Health Act, or at least let us make it law here in the province of Manitoba.

I think that there is a lot of merit to that argument. Home care services have been a major issue ever since the documentations were leaked out. How they were leaked, who knows, but the bottom line is that they were out, and there has been a great deal of discussion and debate both inside this Chamber and outside this Chamber in terms of the direction that the government is

taking home care services. That is the area which I wanted to put some comments on the record for, prior to passing the Minister's Salary or at least allowing for the vote to take place on the ministerial salary, primarily because we really do believe that the government is making a mistake in this area, that it is not much, and government has very little to lose to agreeing to a 12-month moratorium. We do not understand why it is the government has decided to persist and not allow for that moratorium to take place.

I have yet to have seen any indication whatsoever from the Ministry of Health or the Minister of Health that there was any rationale or any explanation that had been brought forward to justify privatization for profit. It seems to be more philosophically pushed, or from a knowledgeable perspective, as to why it is we are moving in this direction. I do believe that that would be mistake, that there are many other ways, if we are going to move towards change of home care services and the way they are going to be delivered, that the government can do that.

Ultimately, all it takes is the good will of the minister to reflect on the decision that he has made and to allow for that moratorium which would, for the first time, really allow for clients, home caregivers and other interested Manitobans to participate in trying to influence the government in terms of what direction it should be going on in home care services well into the future.

The second issue, of course, has been the one of capital and the whole urban health committee and the recommendations that have been brought forward. The Minister of Health, throughout the Estimates, has stuck to it in the sense of saying that a decision has not been made, and he has been saying that in essence from December, even though we know what the recommendations were. I trust and have faith that the minister has not been misleading us, and I look forward to actually seeing a decision.

A decision is important, Mr. Chairperson. Whether we agree with the decision or not, it is important that some certainty be given. I know the impact of rumours and recommendations have been fairly strong, and it has been quite negative in many different areas, so we anticipate that there will be some sort of a decision coming from the government. I could add in the capital and the

Pharmacare in terms of other major issues that have come up in the last six, seven months in particular. There have been a number of other issues in which I would have welcomed the opportunity to have had more dialogue or more debate. We do not necessarily have the amount of time that we would have liked to have had for the health care Estimates to be able to enter into that detailed discussion. One would think that if you allocate 50 hours in any given year, at the very least, you would be able to enter into a lot of detailed discussion.

I think, in the long term, what we might want to do is focus in on certain areas of the Department of Health every odd year and have some generalizations on an ongoing or on an annual basis, the issues of the date, for example. Ultimately, you know, I sat back and I listened as lines were passed, and the temptation was to stand up and ask a number of questions, but, given the number of hours and the limitations that are here, I had to hold my breath in some areas in hopes that next year maybe even I will be in a better position to question the Minister of Health.

I appreciate very much the good will that the member from Kildonan (Mr. Chomiak) has expressed in terms of co-operation with me in allowing me to get our party's perspective on the many different issues in health care. I know that it could have been a lot more difficult for me. The minister might want to respond or the member from Kildonan. Thank you, Mr. Chairperson.

**Mr. Chomiak:** We were sort of targeting, actually, not to carry it over the weekend. There are a couple issues that I wanted to briefly go at with the minister with respect to the matter I raised this morning about the cardiac program. The minister said he was going to come back and perhaps discuss that briefly. I do not anticipate we will go very long on Monday at all. If I were advising the other department, I would say, be ready to go almost right off the bat on Monday, but that is kind of where I see it.

**Mr. McCrae:** I can hardly respond in a moment or so.

**Mr. Chairperson:** Ten seconds.

**Mr. McCrae:** Am I done in nine seconds here?

**Mr. Chairperson:** Six.

**Mr. McCrae:** Six. I will do that on Monday, Mr. Chairman.

**IN SESSION**

**Mr. Chairperson:** The hour being three o'clock, committee rise.

**Mr. Deputy Speaker (Marcel Laurendeau):** The hour being after 3 p.m., the House is now adjourned and stands adjourned until 1:30 p.m. on Monday.

Call in the Speaker.

Have a great weekend.

# LEGISLATIVE ASSEMBLY OF MANITOBA

Friday, May 10, 1996

## CONTENTS

### ORDERS OF THE DAY

(Continued)

#### Committee of Supply

Environment	2029
Sustainable Development Innovations Fund	2047
Family Services	2051
Health	2074