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PROCEEDINGS
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MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Ninth Legislature

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GERRARD, Jon, Hon.	River Heights	Lib.
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LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, September 15, 2009

The House met at 10 a.m.

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

ORDERS OF THE DAY

PRIVATE MEMBERS' BUSINESS

SECOND READINGS—PUBLIC BILLS

Hon. Jon Gerrard (River Heights): Mr. Speaker, I believe there's leave to go to Bill 211, The Health Services Amendment and Health Services Insurance Amendment Act.

Mr. Speaker: Is there agreement to go directly to Bill No. 211? *[Agreed]*

Okay, it has been agreed to. I will now call second reading on public Bill No. 211, The Health Services Amendment and Health Services Insurance Amendment Act.

Bill 211—The Health Services Amendment and Health Services Insurance Amendment Act

Hon. Jon Gerrard (River Heights): Mr. Speaker, I move, seconded by the MLA for Inkster, that Bill No. 211, The Health Services Amendment and Health Services Insurance Amendment Act; Loi modifiant la Loi sur les services de santé et la Loi sur l'assurance-maladie, be now read a second time and be referred to a committee of this House.

Mr. Speaker: It has been moved by the honourable member for River Heights, seconded by the honourable member for Inkster, that Bill 211, The Health Services Amendment and Health Services Insurance Amendment Act, be now read a second time and be referred to a committee of this House.

Mr. Gerrard: Mr. Speaker, I rise to speak to this legislation which would bring in the principle of accountability to our health-care system and the delivery of health-care services in Manitoba. This

bill would also reinforce the five fundamental principles that currently exist in the Canada Health Act. This is an important piece of legislation and passing it would bring into being the principle of accountability in the management and the delivery of health-care services in Manitoba.

This approach was suggested in the Romanow report some years ago, and Roy Romanow, in bringing forward his report in November 2002, addressed the fact that there is no principle in the delivery of health-care services that addresses accountability.

He mentioned that during the consultation process that led up to his report that Canadians had deep suspicions about the way governments have managed their health-care system and where the money goes and that it is important to have accountability in health care.

Mr. Speaker, the past year has seen and provided evidence once again why this bill is so important. When Brian Sinclair died in the emergency room there was a lot of confusion, a lack of accountability in the initial stages, and clearly those problems arised the ire of the public in Manitoba as well as concerns about many people throughout our province.

There have been, of course, some improvements in terms of reporting of wait times, but we still have very long waiting times for many procedures, and I get calls practically daily from people who are experiencing undue delays, just yesterday from a—about a woman who is in dire need of mental health services and has been told that she couldn't possibly be seen by a psychiatrist before eight months from now. Well, that's not acceptable to any of us—

An Honourable Member: I don't believe you, Jon; put it in writing.

Mr. Gerrard: I will. The fact is that these sorts of instances come every day.

I would look at an area which is published and the minister who's responsible for Justice can argue if he wants, but these are data right off the government Web site, right off the government's Web site. When we're dealing with the wait times for hip and knee surgery there is a fundamental problem in that when somebody is referred initially who has a

problem with their hips or knee and they need hip or knee replacement that the first thing very often is the need for an MRI scan to look at the bone and joints.

Well, the wait for an MRI scan, Manitoba average, as reported today, is 19 weeks. After you have an MRI scan, or sometimes before, you need a specialist consultation. That information is not even provided on the Web site, but, you know, several, three months, four months, five months, depending on the circumstance, would not be unusual today for a specialist concentration. Sometimes it's longer and sometimes it does occur a little bit faster.

After you have the specialist consultation, the decision for the need for surgery, you have a median wait time in all facilities, again from the government's Web site, of 13 weeks. Now let's add that up: 19 weeks for an MRI scan, 10 weeks for a specialist consultation, 13 weeks for the surgery itself. That's about 42 weeks. That's the information that the government doesn't really want us to let to know, but in fact that is the information which is probably most important for somebody who comes in with a medical problem that needs a hip or knee replacement, that you're gonna be waiting 42 weeks, three-quarters or more of a year, and that's the standard. That's the average time. That doesn't take into account that some people may be waiting quite a bit longer than that.

And if the Minister of Justice (Mr. Chomiak) wants to quibble with what's on the government's Web site, then he should go and talk to the people in his own government and tell them that they're mistaken if so he wants to do.

An Honourable Member: No, that's not what you said. You said people don't know.

*(10:10)

Mr. Gerrard: Oh, you can get up and talk. The fact of the matter is that this legislation has been before this Legislature for more than five years now. At one point, the current Premier (Mr. Doer), Ambassador-designate, has said that he would be encouraging and looking at passing this legislation. But he's going to have to act quickly if it's going to be done before—while he's still around. But there is still an opportunity.

There have been, you know, other NDP MLAs who've talked about the need for accountability, but it's time now to stand up and add to the principle of accountability to the delivery of health care in Manitoba. It's just a basic and essential part of how

our health care should be delivered in Manitoba. And I suggest to the members on all sides that now is the time to pass this bill to—through second reading, to get it to committee stage and to get it passed so that we can have this principle accepted for all Manitobans. Thank you, Mr. Speaker.

Hon. Dave Chomiak (Minister of Justice and Attorney General): I rise to speak to the motion. I find it passing strange, Mr. Speaker, that the member, in talking about accountability, contradicted himself several times, which is why I did interject on occasion during his speech.

During his speech he said, you know, the government is hiding this information from Manitobans and then cited the Web site that he got the information from. It doesn't—it's not logical and it's like a lot of things that the leader of the opp—of the third party does, just not logical.

I think the leader of the third party is in a conflict of interest. He talks and practises as a doctor, Mr. Speaker, and he stands up as a Liberal leader. He was a Cabinet minister in a Liberal government that slashed health care tremendously, that meant that we could not do many of the things that we do. And I believe that's a conflict of interest. Yet—

Point of Order

Mr. Speaker: The honourable member of River Heights, on a point of order?

Mr. Gerrard: Just on a point of clarification on this issue. I am licensed with an administrative licence in terms of the College of Physicians and Surgeons. But I'm not practising and seeing patients, and I haven't for many years, actually, while I've been in this position.

So the Minister of Justice, I don't know if he is practising as a lawyer and also the Minister of Justice but he can let us know. But I wanted to make sure the Minister of Justice knew exactly what the situation was, in terms of my own practice of medicine or not.

Mr. Speaker: The honourable Government House Leader, on the same point of order?

Mr. Chomiak: Yes, thank you, Mr. Speaker.

I was only making the point, Mr. Speaker, and I know you're going to rule on this, but I was only making this point that an individual who's designated to do a particular position does not have that particular position. Just as the member for River

Heights says, I'm not practising as a doctor, therefore, he can talk about doctor issues. A person who's designated for a position can talk about those designated positions without being in conflict of interest, which, I think, is a contradiction of both what the member said yesterday and today.

Mr. Speaker: On a point of order raised by the honourable member of River Heights, he does not have a point of order. It's a dispute over the facts. Let's continue the debate.

* * *

Mr. Chomiak: Mr. Speaker, there's no question that we've entered a different era of public discourse with respect to the public health-care system, and all of our systems, in that transparency and accountability has become, has become the watchword.

When I was the third-party critic for Health, and when the critics for the Liberal Party and the Health Minister for the then-Conservative Party were toeing the same line, and I asked for lists of waiting lists, there was none. There was no waiting lists, never mind waiting lists on the Web, Mr. Speaker. So there was no ability to measure.

Now times have changed. Waiting lists and information provided on the public Web sites allows the public to look at that information and to make determinations. That's a step forward. That's accountability. That's being done across the country. In Manitoba, we've improved on our wait lists of more than—and I think the national study indicated more than any other jurisdictions.

Notwithstanding the member who once practised medicine will find one specialty that he'll find on a wait list and raise it. I know that that will occur, and when I had discussions with Tony Clement when he was minister of Ontario, I said you should put your wait lists on the, on the Web site; let the public look at it, and, you know, it can be decided. And Tony said, well, you know, every time there's one little specialty that goes higher, the opposition will attack us. I said, well, that's the nature of an opposition that's only out there to attack and doesn't, doesn't try to meaningfully look at the successes that's going forward, and you just have to accept that in public life.

And I think the public has accepted that by looking at our health-care reform and re-electing us three times, largely based on health care, largely based on the fact that the Conservative Party had no health-care platform in their election and that the

Liberals were all over the map. And one of the problems the Liberal have—it's a fundamental Liberal problem—is they like to make principles and they like to make annunciations and doctrines and bills, et cetera, but they don't do anything. They—and, of course, when they're in government they act like Conservatives and they cut and slash, that's what the—that what the member did when he was a member of Cabinet.

Mr. Speaker, significant improvements have occurred in Manitoba with respect to expenses, financial accountability, accountability practices, patient safety. Patient safety wasn't even a concern until after the cardiac—after the cardiac inquiry in which we—cardiac inquiry was started when we were in opposition. We were given the task of putting in place the measures, and we put in place some of the best patient safety information in North America and in the world.

John Wade is on the board of directors of the—was on the board of directors of the WRHA. He was the father of patient safety across the country. He was the deputy minister at one time in Health. He's the guru of patient safety. He travelled around the world in patient safety. He gave us advice in patient safety, and we have patient safety scenarios in place.

If situations occurred when I was the opposition critic, Mr. Speaker, no one talked about it, it was hush-hush; it was hide it. That was what happened. That's the reality. When I asked for accountability on patients being—we asked for the public accountability act for people in nursing homes. I put it on the Order Paper. I even told the Minister of Health: look, I'm not gonna make politics out of this, just put in The Protection of Persons in Care Act, because people are vulnerable in nursing homes. One, two ministers said no.

I didn't accuse the minister of the death that occurred, as I hear all the time from members opposite. I just said it was pretty bad that death occurred in nursing home put in places at—one of the first things we did when we came in office was to put in place The Protection of Persons in Care Act, not to mention all of the other acts in patient accountability.

So to make a political football out of the—out of these issues which happens every day, I understand in the due course of politics, but I think the member—the member would have a little bit more, a little bit more integrity by talking about the measures that have been done: The institute of patient safety, protection of persons in care, the medical act to

allow the College of Physicians and Surgeons to put patient-physician profiles, the Patient Safety Study, public patient safety week, more doctors, more nurses, MRIs outside of the-outside of the city of Winnipeg. And the telling point, Mr. Speaker, is that every one of these measures, the member voted against. He stood up and he said: you should do this; you should put this in place; you should have patient accountability; you should have transparency; you should have more MRIs; you should have more CT scans; you should have more specialists. We have all of those, and in every single instance the member voted against it.

The member didn't even talk about the five major principles of medicare that were put in place, Mr. Speaker, that are—that are, just by their nature, not only embedded in the health-care system that we've put in place, but in fact we actually believe in those. We actually live every day in this province fundamentally believing that those five principles guide. We don't need a sign or a bill from the member opposite to say these are very important, we live them every single day and we're quite able and quite willing to admit when things go wrong and to be public when things go wrong and to take responsibility when things go wrong.

Mr. Speaker, I've often cited the case of a surgeon who was doing a surgery and got into difficulty, left the surgical suite, phoned a specialist; the specialist came in and finished the surgery. That happened. That wouldn't have happened in the old days. The member knows that. We go public. We're not—we're not ashamed or afraid to go public with what goes wrong.

* (10:20)

I know the member's made several erroneous statements that he's had to apologize for in writing. I wish he would table those letters. I wish, for once, he would admit on several occasions when he's been wrong. Will the member make public the letters that he had to write of apology when he was wrong on instances he made? I mean, let's be consistent here.

You say that everyone in the health-care system should be 100 percent accountable. Yet, when you make mistakes, as I do, you never make them public. But you make public the apology letters you had to write? That you make—that you make public, the fact that you raised an issue about waiting lists when I was Health Minister when the program had stopped two years ago.

You know, Mr. Speaker, that's the kind of difficulty I have with a resolution like this insofar as we should be talking about, sure we've got some way to go, sure we have improvements, let's do the improvement. But let's also acknowledge the significant strides that have been made in this province.

You know, doctors alone—I mean we have a net gain of doctors every year since we've been in office. We have more nurses. When we came into office, they were graduating a handful of nurses; we put in programs. The members were out on protests saying we're going to destroy nursing.

Now that we're producing over what, a thousand nurses a year, Mr. Speaker, there are still gaps and there are still shortages, and we knew that. We knew that 10 years of lean Tory, mean cuts, would have an impact, and they did. And we are rebuilding the system.

But, you know what, Mr. Speaker? It's not a perfect system. It's a—it's a human system. But I heard on the radio the other day discussions about Obama's health-care reforms and a very prominent American said that the U.S.—anyone from the U.S., if they went up and talked to Canada, virtually everyone in Canada would say, it would—they would much rather have our system than the U.S. system. They'd much rather have the system we have than the system the member for Charleswood (Mrs. Driedger) would want, the Leader of the Opposition (Mr. McFadyen), of a—of a private health-care system. They tried to do it when they were in office. They literally tried to privatize home care—the very core of our system. They forget about that.

But, Mr. Speaker, watch for that to come back, watch for the privatization. The member for Charleswood has eased off on that the last little while 'cause they know it's a little bit taboo. But, I can tell you they're going there, and we'll be there to defend the five principles of medicare. We will be there to defend the five principles of medicare. Not in words, and not in discussion in the Legislature, but, in fact, by expanding resources, expanding facilities, expanding accountability, expanding the length and breadth and the reach of our health-care system. We'll be there in action, not in mere words as the Liberal leader has done. Thank you.

Mr. Speaker: Order.

Mr. Kevin Lamoureux (Inkster): I always find it a pleasure to follow the Minister of Justice inside the

Legislature. When he tends to speak, he seems to, at times, exaggerate, Mr. Speaker, and I'd like to maybe set the—set the facts straight so that the Minister of Justice has a better appreciation of what many across Canada believe is a very important element to health-care reform. And the person that we get this idea from, and we, in the Liberal Party, like to believe that good ideas should be acted upon and even if it doesn't necessarily originate out of the Manitoba Liberal Party.

But, in particular, Mr. Speaker, I would suggest to you that we need to reflect on the issue of accountability—what it is that this bill is actually asking for. It was actually Jean Chrétien that appointed Roy Romanow back right around the year 2000, and then a couple of years later, we actually had a report from the former NDP Premier of Saskatchewan who came out and said that we should incorporate accountability into health care, and that's, in essence, what this bill is doing. And, again, one could question why it is that the New Democratic Party here in Manitoba is ignoring the issue of accountability.

While one could argue that you could just look at their past record on health care and their past record has not been all that positive. Keep in mind, anyone can spend hundreds of millions of dollars and build capital projects, Mr. Speaker. Anyone can do that. The real question is: How are you managing the changes that are required in order to keep an ongoing operation of an efficient health-care system? That's the real challenge that government has to face, and, on that note, this government has failed, and they have failed miserably in terms of providing that quality, ongoing health-care management. All one needs to do is take a look at where we are spending our health-care dollars. Try to get an understanding. You know, last session or earlier in the session, I was trying to find out just how much money Brian Postl makes, and for a government that likes to think that they're accountable or they're being transparent, this government refuses to tell the public just how much money Brian Postl makes.

So, right from the very top, the government refuses to be transparent, whereas they like to believe that they have made major strides towards more accountability in health care. Why? Well, because now they have a few things appearing on the Internet, and some of those things are very encouraging to see, Mr. Speaker, but have I got news for the government. Other provincial governments are doing the same thing. Ottawa has been insisting

on doing some of the things that they've been doing for years. Yes, in certain ways, in certain areas, the government has made some significant and some positive changes, but the core problem that this government has is the management and being transparent in the way in which they're managing the changes in health care, and that's where they have been very lacking. This government does not accept constructive criticism well. The way they respond to constructive criticism is they dump their collective head in the sand and pretend it doesn't exist, that there are no problems at all within the health care.

You know, remember 1999 election. I remember it well. I remember all the propaganda that was going out, how the NDP were going to end hallway medicine, Mr. Speaker. Well, we all know that that is not the case today, that hallway medicine is there in a very real, in a very real way, and one has to ask the question, well, why is that, and, you know, when they start talking about the Ambassador-designate and his record on health care, you know, I think one could summarize it by saying, yes, he was very capable in terms of doubling the overall expenditure of health care, but to what degree was he effective at improving bedside care?

You know, the Leader of the Liberal Party (Mr. Gerrard) made reference in terms of waiting times, waiting times in critical areas. Whether it's hip replacements or issues of that nature, these are issues that affect us, everyday Manitobans, that require that type of medical attention. Well, what has the Premier (Mr. Doer) really done in that area? Or contrast that to the percentage of increase to bureaucracy compared to the percentage of increase to health-care delivery, Mr. Speaker. You know, those are the types of things in which I believe that the Premier will be judged on going into the future.

You know, when you're inundated with monies coming from Ottawa, it's very easy to see, well, let's throw a hundred million here or 10 million there or 5 million there and so forth, and that's in essence what we have seen in terms of the health-care expenditure. But let there be no doubt that the biggest benefactor to this health-care expenditure, rapid increase in health-care expenditure, has been actually the bureaucracy, Mr. Speaker. That's been the biggest benefactor of this particular Premier's rule over the last 10 years, and I think that what we should have been moving towards is more accountability in health care, so that we know that the money that we are spending is being spent the most effective way at delivering health care to

Manitobans. We're talking about the bedside care, providing better home-care services, dealing with the cost of pharmaceutical care or the importance of pharmaceutical needs that Manitobans have, and that's where we would have liked to have seen the government improve. That's where they have been most lacking.

* (10:30)

You know, earlier in the session, I was talking about the Seven Oaks Hospital, and, well, you know, we want transparency; we want accountability. We have a government that goes out and provides misinformation, Mr. Speaker, tells people in the North End Winnipeg that there is no change in emergency services because of decisions being made by this government, when we know that that's just not factually correct, that that is wrong for a government to be going out saying that there was no change when, in fact, there was change.

And that's what we mean about accountability, Mr. Speaker. There needs to be more accountability in health-care services being provided in this province, and I believe that, ultimately, if the government continues to fail on the issue of accountability that Manitobans are going to see, in a very clear fashion in the next—in the next election.

And the reason why I would point that out is because, you know, with the—with the recession and things that are happening, and even though Manitoba's been relatively okay going through it, there's always room for improvement, I must say. But relatively it's because of federal transfer payments, and with those cutbacks, potential cutbacks in equalization and transfer payments the government's going to have to be put into a position where it's not going to be able just to, to throw money around; that it's actually gonna have to start thinking. It's going to have to start doing what we in the Liberal Party have been telling the government to do, and that is to spend smarter, to watch the way in which you manage.

You see, the greatest threat to health care today, Mr. Speaker, is the way in which we manage it. If we don't manage it appropriately then we are not gonna be able to deliver the type of services that we could be delivering, and that's why, if I was to level one criticism at this government, the criticism would be was—would be that they have been unable to demonstrate that they have the skills and the management necessary in order to do the type of changes that are warranted in health care. And I

could come up with a number of examples that clearly demonstrate that, and that's why Manitobans should be concerned, and that's why backbenchers and even ministers that are not Minister of Health should be concerned. They should be talking about health-care reform. They should be talking about managing health care in their caucus a heck of a lot more than they are. I suspect they're not even talking about it, quite frankly. I suspect that they're not even talking about it in the Cabinet room or, they've all conceded it and whatever Brian Postl wants Brian Postl gets, and he is, in essence, the guru of health care in the province of Manitoba, and I have seen some dramatic mistakes that this individual has made; some poor decisions.

I believe that we need a government that's prepared to take control of health care and start managing and providing accountability on health care. Thank you, Mr. Speaker.

Hon. Peter Bjornson (Minister of Education, Citizenship and Youth): Mr. Speaker, it's a pleasure to rise in this Chamber today to speak on this bill and, first of all, I notice we have members from the Canadian Forces who have joined us in the gallery. They'll—they're here for a private member's resolution later on today, and I want to be the first to welcome them here, as the reason we enjoy this opportunity to debate is because of the sacrifices that they make on behalf of Canadians each and every day to—in the interests of democracy and the protection of democracy. So I welcome them here.

I'm also pleased to be standing in this Chamber. When I had the opportunity to travel with my family for a very short vacation in the United States in the middle of their debate on health care—and I'd rather be debating what we're debating today than the rhetoric and the extreme opinions that were expressed publicly about the health-care system in the United States, or the lack thereof, and the fact that so many go without insured health care in the United States. So I'm very pleased to be debating that here today.

One thing, though, Mr. Speaker, is we're talking about accountability, and it's interesting that this resolution would come from our Liberal members here in the Chamber because my first official opportunity to be in this Chamber was, of course, after the '03 election when we had the BSE crisis, and they rise on a point of privilege that they're not sitting side by side. Talk about accountability.

And when we're talking about H1N1, Mr. Speaker, yesterday, they rise and grandstand about the role of our Premier (Mr. Doer) who has this incredible honour of being the first Manitoban appointed to be the ambassador to the United States—so the ambassador-designate—and they're grandstanding about that.

And they talk about accountability. When the member from Inkster says, I will resign. He says that in this Chamber, if he's proven wrong—he's proven wrong, yet he still sits in this Chamber.

An Honourable Member: Point of order.

Mr. Bjornson: You talk about—oh. Hit a nerve. Hit a nerve.

Mr. Speaker: Order. Order. Order. The honourable member for Inkster on a point of order.

Point of Order

Mr. Lamoureux: Yes, Mr. Speaker, on a point of order, and I raise this in all seriousness, that members are fully aware of the fact that I am not obligated to resign. There has never been any evidence, not one shred of evidence provided to this Chamber—and the Premier (Mr. Doer) of this province and the minister has brought it up—if the member—if the Minister of Education has rhetoric that he'd like to put on the record, at least make sure that it's fact, if you have any integrity whatsoever, Mr. Minister.

Mr. Speaker: On a point of order raised by the honourable member for Inkster, he does not have a point of order. It's a dispute over the facts and also—order, order, order.

I want to remind all honourable members that when rising on a point of order it should be to point out to the Speaker a breach of a rule and points of orders should not be used for a means of debate.

* * *

Mr. Speaker: The honourable Minister of Education has the floor.

Mr. Bjornson: Thank you, Mr. Speaker, and you know the member, the member from Inkster also belittles the contribution of Dr. Brian Postl in this Chamber. He's done that very often, yet the good doctor, Dr. Postl, does not have the opportunity to defend himself in this Chamber.

So getting advice from the Liberals about accountability would be kind of akin to me giving

advice to my colleague from Wolseley on a vegetarian menu, Mr. Speaker. It just—it just doesn't make sense. But let's talk about accountability. Let's talk about the actions that this government has taken with respect to the public health-care system here in the province of Manitoba.

And there are many things that have been done to address the delivery of health-care services in rural Manitoba, for example, and I think to my own experiences in the community of Gimli, the constituency that I represent and the work that's been going on in that community with the construction of a brand new hospital.

Many of my constituents also will be looked after in the Selkirk hospital and of course we're moving forward with that new initiative as well, Mr. Speaker. Bringing health care closer and making it more accessible is something that we have been committing to do and we've done so by having more doctors in rural Manitoba, more doctors in the province of Manitoba since we've been in office, more nurses in the province of Manitoba, better health-care facilities, better access to care, putting MRIs and CT scans in rural Manitoba and having health care delivered sooner, quicker, closer to home. That's accountability.

So, if you want to talk about accountability, let's look at the record that this government has with respect to our health-care initiatives, and there are many that I could speak to. But if you want to talk about some of the other points that the member's raised in terms of accountability, November 8th of '07 we passed The Apology Act. Yes, it was a private member's bill allowing health-care workers and other professionals to make an apology without it constituting an admission of legal liability and it will help health-care workers to admit errors and keep communications open and moving forward on patient safety.

November 1st, '06, the regional health authority amendment act, enshrining in law the practice of reporting and investigating critical incidents. Under the new law, health workers are protected from any liability for participating in such an investigation.

The critical occurrence reporting put in place in 2003 is that results of investigations are disclosed to families. The Manitoba institute of patient safety, independent, non-profit organization, funded by the province to identify best practices for improving patient safety, Mr. Speaker. The Medical Act to

allow the College of Physicians and Surgeons to post physician profiles to provide greater transparency.

The list is long and it goes on and on and talks about accountability. It talks about transparency. It talks about a number of things which, quite frankly, Mr. Speaker, I believe, many of the members opposite voted against repeatedly. We like what you're doing but you're not doing enough, is usually what we hear from the members in the Liberal Party, and of course on any issue that we've had in health care, with two members in the House, they usually have three different positions on our health care, our health-care initiatives.

So, if you want to talk about accountability, yes, we are accountable as a government and we are accountable for the fact that we are not cutting medical school spaces as was done in the past. We are not firing 1,000 nurses, Mr. Speaker; we're hiring nurses. We're not freezing health infrastructure spending and letting our health facilities crumble. And our budget in 2009 ensures that we maintain quality health care for Manitobans in a time of global uncertainty.

And I've mentioned a few things we're not doing. We're not hiring an American consultant and spending \$3 million to have them come and tell us this is, this is a business model, not a public service; not a public service that should be cut because it's a business model, Mr. Speaker. That's not what we're doing. We're not doing that. So—[interjection]

* (10:40)

At any rate, what we're doing in our 2009 budget includes many important health initiatives, Mr. Speaker: increasing nursing training seats in Brandon, in Winnipeg and northern Manitoba, which the Tories didn't promise to train a single nurse in the last election. I know, last election, they promised to bring back one doctor, and that would have been the doctor that attended to the Winnipeg Jets that they promised to bring back as well. That's the only doctor I heard them reference.

That—we're strengthening our doctor recruitment and retention in northern and rural areas. We're expanding midwifery education in southern Manitoba. We're moving forward on important health capital projects. I've already mentioned the new hospital in Gimli and, of course, dialysis in Russell, Gimli and Winnipeg, the Westman Lab, the St. Boniface cardiac centre and the new Aboriginal personal care home in Winnipeg, new investments in

emergency care, including more staff and ambulances, as well as moving forward in the first-in-Canada mental health ER.

So you want to talk about accountability. We are accountable in all facets of health care, Mr. Speaker, and we've been accountable to people throughout the province of Manitoba.

It's quite fascinating, Mr. Speaker, to hear some of the members opposite, because I do recall the '07 election where it was stated by the Leader of the Official Opposition (Mr. McFadyen) that health care is done, it's time to move on to other priorities, and there wasn't any need to increase the budget substantially, if at all. And the same was said for the education system, that because of declining enrolment and because of smaller class sizes, et cetera, et cetera, that we wouldn't need to increase the budget to education. So, obviously, that's advice that we didn't take when we moved forward because we continue to invest in health care, we continue to invest in education, we continue to invest in the services that are important here in the province of Manitoba to the people of Manitoba.

When you look at The Public Health Act that came into effect on April 1st of '09, it ensures provisions are in place to help public health officials identify health threats and respond quickly in case of health emergency. It also requires chief provincial public health officers to report on the health of Manitobans at least every five years. It significantly raises fine levels from the current level of 5,000 to be consistent with other public protection legislation. In the case of an individual, up to \$100,000 for a conviction for failure to comply with an emergency health hazard or up to \$50,000 for other offences.

The list goes on and on, and I only have 10 minutes to talk about this, Mr. Speaker. If you talk about health-care accountability, we have done more in our 10 years in government to address this issue than has been done in the previous 10 years. No doubt in my mind.

So, again, to hear the member opposite give advice about accountability is a little disconcerting, given the lack of accountability demonstrated by the member opposite, Mr. Speaker. And we do have something that holds us accountable, and that is *Hansard*, and I will refer to that section in *Hansard* that the member seems to have selectively forgot exists, that there was a commitment made that he would choose to resign.

And, Mr. Speaker, again, a lesson in accountability from the Liberals—there's a lot of things I could say, but I prefer to reserve my comments on that. Thank you very much.

Mrs. Myrna Driedger (Charleswood): It's interesting hearing the Minister of Education (Mr. Bjornson) and the Minister of Justice (Mr. Chomiak) stand in this House and make some of the comments they did about this proposed legislation. And it's certainly selective cherry picking in terms of the kind of information they want to put forward, but they will cherry-pick their information and then they put phenomenal spin on it to try to make it look like the NDP are doing such grand things in health care.

Well, I guess they've learned how to put forward this kind of spin because this government spends almost a half a million dollars a year on spinners, and that is unconscionable in the budget. The last number I heard was over \$400,000 on NDP spinners, and that is what this government has done. Rather than truly want to be accountable to Manitoba taxpayers, what they've done is they've cranked up the number of people to help them put their spin out there, and then they selectively torque their spin so that what they get is the kind of information that they think people should hear, but not all of it is truthful and not all of it is accurate. But what they've done is they've certainly put a spin onto all of their information. And we see that over and over again.

Just as an example of what the Minister of Education just did, he just again talked about this wonderful dialysis that they're bringing to Gimli, but he didn't say that it's not there yet. He is standing up there, grandstanding, like, we've brought dialysis to Gimli. They've announced it many times, but they aren't even close to bringing it into Gimli. But you'll see it in all of their news releases, you'll see them stand and grandstand about things like that, but, in fact, they're a long way from accomplishing some of the things that they selectively put out there in their spin.

So accountability is a very huge aspect of health care that we do need to get our heads around, Mr. Speaker, and accountability, however, is not one particular element that this government can take any credit for because what we see—and particularly in health care—is not the level of accountability or transparency that we should be seeing in health care and that is a problem. It's a problem and no matter who's in government, I think the whole issue of

transparency and accountability is one that has to be paid much more attention to because the only way we are going to make a health-care system as good as it can be is if we ramp up the transparency and we ramp up the level of accountability of government to front-line workers, to patients and to taxpayers. And I think there are some great debates that need to be happening around the level of accountability.

You know, the members have talked about what is going on in the United States with the—with the dialogue that is going on there right now in terms of the debate on health care. And you know, I was down there this summer and it, you know, it's disconcerting to see both sides—and not as this government would say, just one side selectively getting out there and trying to, you know, massage and manipulate the information—both sides in the United States are out there doing whatever they can in getting their messages across and there is a lot of inflammatory comments being made and it's being made from both sides. It's not just being made from Republicans. Democrats are out there doing the same thing. So it's sad, too, because I think what President Obama was trying to do was the right thing. He has said there's not enough money in the system for having a sustainable health-care system and he's right. At some point—at some point—you're gonna hit the wall and then you're going to crash and burn. He wants to get in front of that and he wants to make changes and I wish him well.

I think we can't have an honest debate in Canada—and particularly in Manitoba—about health care. We can't have an honest debate here because the NDP will make the Tories look like bogeymen and they will paint them as right-wing extremists when in fact we're fully supportive of the principles of medicare. It was the Tories that brought medicare into Manitoba. We are very, very committed to the Canada Health Act. But there is an opportunity for innovation and that's what President Obama is saying. He and I are on the same page, so for anybody in this—in this government—to be criticizing or trying to say that the Tories are gonna come in and, you know, privatize health care is a crock. And this government tends to want to, you know, paint the Tories like that because it serves them politically.

What it doesn't do is it doesn't give anybody a chance to properly and effectively debate what needs to be done to make health care better for patients. And, frankly, Mr. Speaker, I am really sick and tired of the politics that get played by ministers, by backbenchers, you know, and by others across the

way to politicize health care the way they do. And somewhere along the line, we really have lost the patient as the centre of focus and it's time to get that back. It is time to try to work more closely together to try to find a way to make the health-care system better.

But we will never achieve it with this government that even after 10 years would rather stand in the House and focus their flame on the Tories and criticize what happened 10 years ago rather than standing in the House and talking about their accomplishments. When we were in government, after 10 years, we weren't standing in here remembering what the NDP botched up 10 or 12 years before we were in government. We stood in this House every day and we were able to say we did good things.

*(10:50)

And, in fact, I'll give the Minister of Justice (Mr. Chomiak) credit. There—when he first got into government, he said what the Tories did in health care, 90 percent was right and 90 percent was good, and he put that on the record many times.

That is actually a pretty darn good endorsement because nobody in health care is ever going to get a 100 percent, and you'd be an idiot, you know, to believe anybody would be naive to believe that that would ever occur. So an endorsement like that from the Minister of Justice is pretty darn good because he was a Minister of Health at the time. He came and he looked at the books, and he said the Tories did good. And, you know, every government does some good things, and every government is gonna have their challenge and make some bad decisions. But that's where we need to increase the level of accountability, increase the level of transparency, and maybe we can make things better.

I have never seen such a low level of accountability and transparency in health care as we see today, and it really, really is disconcerting. The biggest example, Mr. Speaker, is what we saw when Brian Sinclair died. And what we saw from the Minister of Health (Ms. Oswald) in her behaviour of handling that situation should be alarming to everybody because ministers of Health are to be accountable and they are to be transparent to the public. Instead what we saw from this Minister of Health was somebody that went into hiding, didn't want to face the media.

When they were exposed as not bringing forward true information, the Minister of Health was actually one that put false information on the record and then was the ringleader in an ER cover-up of the truth of what happened to Brian Sinclair. In any other province in this country that Minister of Health would have been removed from their portfolio. This Minister of Health was allowed to continue on. She's demonstrated that she has no accountability. She is far from being a transparent Minister of Health and we have no trust in what she says any more. So every time she stands in this House, why should we believe her on anything, whether it's about pandemic, waiting lists, you know, doctor shortages. She has not been forthcoming around what happened to a man that died in an ER after waiting 34 hours for care and if there was ever a failure by a government in accountability, that was probably the biggest one.

So I think it's a good opportunity for this government to be looking at this type of legislation where accountability becomes paramount in what we are doing to look at improving our health-care system. Thank you, Mr. Speaker.

Mr. Tom Nevakshonoff (Interlake): Good morning, Mr. Speaker, it's my pleasure to rise today to speak on behalf of the provincial government in response to this proposal, and I'd like to also begin my remarks in the same vein as the member for Gimli (Mr. Bjornson) by welcoming members of the armed forces to the Chamber today.

Over the 10 years that I've been in office, I've come to realize the most important speeches that I give are to our veterans on Remembrance Day and to our graduating classes where I remind them that we are the beneficiaries of the, of our forefathers of those who fought for us, who established and defended democracy, and we should never take that for granted. That is something that is under threat around the world. Our soldiers are today fighting in defence of this, and we could never underemphasize the service that people in the military serve.

When it comes to the act before us, the first thing that comes to mind for me is the blaring hypocrisy of members of the Liberal and Conservative parties, and I look back to the 1990s and under the leadership of the former Minister of Finance, Paul Martin and, of course, Premier Gary Filmon. We saw how members opposite treated health care by making, first of all, massive cuts to transfer payments at the federal level, which were then followed up at the provincial level here in

Manitoba by the Filmon government, to making cuts to health care. So we know where their priorities lie, reducing training spaces in our universities for doctors, firing nurses and so forth. These are the very things that put the health-care system in crisis in Manitoba. So it's quite disingenuous, to say the least, of them to rise on this point today and try to paint themselves as the heroes and the saviours while they're on the opposition benches when, in fact, when they were in government, both at the provincial and the national level, they showed their true colours.

The member for Charleswood (Mrs. Driedger) was critical of us in our politicization of the health-care industry, and that, too, I find quite ironic because if there was ever one who politicized this, it's her on a daily basis, here in this Chamber and in the media as well.

I know that she recently took a—took a run at me in—over actions in the community of Eriksdale and I'd maybe like to address that a little bit, how there was minor, minor issue to deal with an autoclave and she tried to ramp this up like it was the greatest crisis of all time. Whereas, really what it was, was a regionalization of services, suggesting to the people that this was imperilling their health was the absolute epitome of politicization. So we really have to take her comments with a fist-sized grain of salt.

When we look to Eriksdale, a very good example, I might add, of the activities of this government, and numerous examples of that. For example, the hospital in Eriksdale today is under—currently under a major capital upgrade. We're spending close to a million dollars to improve a wide variety of systems within that—within that facility and that's just the very beginning in the community of Eriksdale.

If you want to look to regionalization of services, and I mean moving them out of the city into rural areas, the very topic of ultrasound comes to mind, where, thanks to activism at the local level, we were engaged and indeed today there is an ultrasound unit in the community of Eriksdale that also serves the community of Arborg. So I think services such as that are pretty important, much more so than other issues that she has raised.

And I might take it a step further. In the community of Eriksdale, currently under construction across the road from the hospital is a new wellness centre. Again, leadership at the local level, and I might mention the reeve, Brian

McKinnon as the leader in that regard. These are critical fundamental services. And when we look to the wellness centre, part of the services that this facility will offer to the people of the area are cancer-care services. Now if that isn't important, I don't know what is.

You know, we may have to be innovative in sterilizing the instruments, but I think delivering things such as cancer-care services to people in rural areas, that's what matters, that's where members opposite were lacking. That's where this government does deliver. So that's just one community. I could—I could list a number of communities where this government has delivered on health-care services and upgrading our facilities and so forth.

Waiting lists—I look to—well, I mentioned cancer just a moment ago. And it wasn't a little more than a year ago, my mother passed away from cancer. Her diagnosis came too late, unfortunately, but I recall the day that we got the diagnosis. When the doctors confirmed that it was cancer, we went from the local hospital to CancerCare Manitoba for her initial visit. And while our wait lists have been reduced to a week for radiation services, my mother received her first radiation treatment the very day she had her consultation at CancerCare Manitoba. So if that—if that's not an improvement over the delivery of cancer-care services from members opposite, I don't know what is. To have treatment, critical treatment like that the same day that you arrive at the facility, I think, speaks volumes.

If you experience a heart attack for instance, the same scenario applies—

* (11:00)

Mr. Speaker: Order. When this matter is again before the House, the honourable member for the Interlake (Mr. Nevakshonoff) will have three minutes remaining.

The hour now being 11 a.m., we will now move on to resolutions, and we'll deal with resolution No. 18.

RESOLUTIONS

Res. 18—Reserve Forces Day

Ms. Bonnie Korzeniowski (St. James): I move, seconded by the member for Elmwood (Mr. Blaikie), that

WHEREAS the Province of Manitoba recognizes the many citizens of the province who

are, and have been, members of the Canadian Reserve Forces, and who make a significant continuing contribution to the cultural, social, and economic fabric of this province; and

WHEREAS the dedicated women and men of the Navy, Army, Air, and Communications Reserves are integral members of the civilian community and also serve in Canada's Armed Forces on a part-time basis, thereby fulfilling a vital role in the maintenance of Canada's defence commitments; and

WHEREAS the Province of Manitoba appreciates the service that reservists provide to those outside Canada through peacekeeping and other military and humanitarian missions; and

WHEREAS the skills, values, and knowledge reservists acquire through their military training make them valued employees and exemplary citizens.

THEREFORE BE IT RESOLVED that the Legislative Assembly of Manitoba urge the provincial government to consider recognizing the third Saturday in September as Reserve Forces Day in Manitoba to acknowledge the important role and value members of the Reserve Forces have in our province and our country.

Motion presented.

Ms. Korzeniowski: Mr. Speaker, I rise today to introduce the Reserve Forces Day resolution. This resolution urges the provincial government to recognize the third Saturday in September as Reserve Forces Day in Manitoba.

This resolution recognizes the important role and the value that the members of the Reserve Forces have in our province and nation. Their appreciation of this resolution, I believe, is in presence in the gallery today.

The Canadian Reserve Forces have always held a special part in my heart. My father was a reservist when the Korean War broke out and was called upon to serve. The Canadian Forces reserve members serve in the Navy, Army, Air Force, and medical components and are all volunteers made up of Canadians who are students or are employed in almost every profession and vocation, performing part-time duty in hundreds of communities across the country.

The strength of the Reserve Force in Canada totals some 25,000, 700 of whom are in Manitoba. These personnel who have served our nation in times

of flood, not only in the 1997 flood, but there are some of us, myself included, who will remember the 1950s flood.

Fire. They've served in Manitoba as well as, we all know, recently in B.C., and ice and snowstorms which also they helped in Ontario and Québec.

They've also served our nation in overseas deployment around the world. The reserves make up to 40 percent of peacekeeping, peacemaking and humanitarian missions with NATO and the United Nations commitments.

Other subcomponents of the reserves are the cadet instructor cadre who lead the Canadian cadet movement and the Canadian Rangers who serve in remote areas of Canada and who support the Junior Canadian Rangers program. The value of reservist training extends to almost every milieu of employment. The skills and expertise include logistics, leadership, personnel management, communications, administration and instructional skills which are easily applied to civilian occupations.

The military training encourages the development of such values as integrity, self-discipline, teamwork, and loyalty, and you can't pay for that. Reservists undergo trade and occupational training that is transferable to their civilian workplace or training in careers such as clerical worker, vehicle mechanic, airplane technician, financial and project management, and many others.

The Reserve Force is an important part of Canada's heritage and traces its origins back to the 1700s, and became official with the passing of the Militia Act in 1885. The Reserve Force was key in the expansion of the nation's military for both world wars, and Manitoba units serving the vanguard of critical battles and campaigns in the First World War, notably at Vimy Ridge, then again in the Second World War in Hong Kong, the Dieppe raid, the Normandy beaches on D-Day and throughout the liberation of Europe in France, Belgium, Holland and Italy. Manitoba units and individuals played extensive support at sea in the Battle of the Atlantic and the invasion of Europe, and in the air war during the Battle of Britain and the European campaign. Manitoba has the highest percentage of Victoria Cross recipients of any province, three of which lived on Valour Road in Winnipeg, and home to Canada's most decorated war hero, William Barker, hails from Dauphin, Manitoba.

The primary roles of the Canadian Forces are to defend Canada, to contribute to the defence of North America and to contribute to international peace and security. The reserve and regular forces are a total-force model as partners in defence. Since the year 2000, more than 4,000 reservists have been deployed in Canadian Forces' operation extensively in Afghanistan, Bosnia, Croatia, Haiti and other international locations where their professionalism, hard work and compassion have earned them high praise from the local populations and from the international military they served alongside. They have represented not only Canada, but as ambassadors of Manitoba as well.

Reservists assist or participate in cultural events, parades, festivals and other public events and communities across the province. As well, almost all reserve units support cadet units and provide honour guards in most towns in the province on Remembrance Day.

As the Military Envoy of Manitoba, I was honoured to participate with members of the Fort Garry Horse who provided honour guards at a dozen memorial services in villages—at villages and towns in Normandy, France, in July of this year. Many of the Manitoba reserve units make annual pilgrimages to the battlefields in Europe. Next year they will celebrate the liberation of Europe and Holland. The reception given our men and women in uniform by the citizens of France and Holland is extraordinary. I was tremendously touched. No Canadian who attends these memorial services will ever forget the sacrifices made by Manitobans in two world wars.

The Naval Reserve Unit in Winnipeg is *HMCS Chippawa* and commanded by Lieutenant Commander Margaret Morlock. Members of the ship have served in many locations around the world, including the following: Petty Officers 2nd Class, Duncan Bowes, Brad Froggatt, Adam White and Master Seaman Dwayne Huot all served in Afghanistan, and Warrant Officer Denise Gipp in Cyprus, and Lieutenant David Podolchuk in Bahrain.

The Army Reserve is located across Canada and locally by 38 Brigade Group which includes Saskatchewan and east of Thunder Bay and commanded by Colonel Robert Poirier located in Winnipeg. In support of the Canada First Defence Strategy, the Brigade is training an Arctic Response Company in northern Manitoba with support from 4 Canadian Ranger Patrol Group, 440 Squadron,

735 Communications Regiment and 17 Field Ambulance.

The Brigade units in Manitoba are the 26 Field Artillery Regiment in Brandon, 13th Field Battery in Portage la Prairie are under the command of Lieutenant Colonel Ross Thompson and 116 Battery in Kenora commanded by Major D. Dalal.

*(11:10)

The Winnipeg units include the Fort Garry Horse, an Armoured Reconnaissance Regiment and the 31 Combat Engineer Squadron located at McGregor Armoury. The Queen's Own Cameron Highlanders of Canada and the Royal Winnipeg Rifles, both infantry units at Minto Armoury, along with 17 Service Battalion, a Combat Service Support Battalion. The military police are represented by six Int Coy, 15 MP Platoon under command of Second Lieutenant Scott Wiley.

Also located at Minto Armoury is 753 Communications Regiment and commanded by Major Jay Weinbender.

The Air Reserve in Winnipeg includes the Director General of the Air Reserve, Brigadier General Eldren Thuen, 402 City of Winnipeg Squadron under the command of Lieutenant Colonel Marc Rittinger and 17 Wing Air Reserve Flight commanded by Major Ian Burke.

Many have established ongoing community support groups, programs, and a few of special note are: Lieutenant Colonel Dave Atwell, the Commanding Officer of The Fort Garry Horse, reported that the Garrys have, over the past 30 years, taken part in the delivery of Christmas hampers through the Christmas Cheer Board in an activity they call Parcel Push. Over 10 vehicles and 30 soldiers deliver hampers to needy families in the core area of Winnipeg, and I think we all recognize how many people would be hesitant to wander into the core area Christmas Eve. So they ensure our children in the core area get a nice parcel.

The vehicle group called The Ghost Squadron initiated the Yellow Ribbon project where thousands of Manitobans signed hundreds of yellow ribbons which were then fastened to a Manitoba flag and then sent to Camp Canada in Afghanistan. The squadron maintains 17 operational vehicles including a Sherman tank. They attend over a dozen community events throughout Manitoba during the summer festival season, and last year members of 17 Service Battalion volunteered their time to help

with the Chip It program. They picked up used Christmas trees for recycling and also delivered two truckloads of trees to line The Forks skating trail which won the title of Canada's longest skate trail from the long-term holder.

Mr. Speaker: Order. The honourable member's time has expired.

Hon. Dave Chomiak (Government House Leader): I wonder, just under the circumstances, if the House may extend leave for the member to complete her statement.

Mr. Speaker: Is there leave for the member to continue? *[Agreed]*

The honourable member, to continue.

Ms. Korzeniowski: The program worked so well the Commanding Officer Lieutenant Barbara McManus advised that they plan to continue the effort on an annual basis.

Mr. Speaker, 402 City of Winnipeg Squadron started their Adopt a Vet program as a way of honouring our veterans at Christmas. Corporal George Stetina started the program a few years ago to raise funds to be able to provide gifts to those veterans who had no family or other means of support outside of Deer Lodge Hospital. This initial number of veterans served was 20.

This year the number expanded close to 150 and, with the help of local military community at 17 Wing, donations from other military communities across the country, each veteran was given a substantial and personalized gift. The Commanding Officer Lieutenant Colonel Marc Rittinger has advised that the program will continue. The squadron has just recently celebrated 10 years of working with Habitat for Humanity, building homes with the support of 17 Wing.

And reservists from a number of army units in Winnipeg assembled by Lieutenant Colonel Brett Takeuchi, Commanding Officer of The Royal Winnipeg Rifles and The Queen's Own Cameron Highlanders of Tactical Group helped to clean up Truro Creek in the spring and did such a good job in such inclement weather, they are worthy of naming: Captain Dave Carpenter, Corporal Janelle Chartier, Private Cameron Oudenampsen, Rifleman Allden Adison, Corporal Brian Trenchard, Private Edward Desjarlais, Private Evan Jordan, Private Josh Baskes, Corporal Sophie Boucher, Master Corporal Juanita Lonny.

The 17 Wing Field Ambulance, under the command of Major Dave Ayotte, has for many years participated in the annual Teddy Bears Picnic at Assiniboine Park. Reservists man a field medical MASH tent where children can bring their teddy bears for medical treatment. They also sponsor an Army Cadet Corps at Cross Lake with the partnership of Bob Smith, and I think we all remember that Oscar Lathlin was a major part of that.

Although reservists are everyday citizens who devote a portion of their spare time to military service, some also serve on a full-time basis to fill a shortfall of regular positions at *HMCS Chippawa*, 38 Canadian Brigade Group, 17 Wing and 1 Canadian Air Division, Canadian NORAD Region.

The reservists and their units are supported by a number of volunteer agencies, including family support groups from units whose members are serving abroad, and the Canadian Forces Liaison Council, recognize employers who allow their employees time off when the reservists are training or are deployed. All reserve units who deploy troops around the world have strong support from their unit family members and other agencies such as the Military Family Resource Centre in Shilo and Winnipeg.

I've had the great privilege to see the training that the reservists get first-hand through ExecuTrek, organized by Chairman Bob Vandewater of the Canadian Forces Liaison Council. I was aboard the *HMCS Brandon* and was surprised to learn that 90 percent of the crew, including the captain, were reservists.

I also attended field exercises at Canadian Forces detachment Dundurn, Saskatchewan, and viewed the gruelling training, carried out often under extreme weather conditions. I know it rained both days I was there and it was the only reason I was happy to wear that five- to 10-pound helmet.

Reservists often give up their vacation time from their regular jobs to train in addition time to—granted by employers. I was impressed to discover a Winnipeg Police officer, through whom I recognized from the division in St. James. He takes three weeks of holidays over and above to do this.

I attended another ExecuTrek visit in Colorado Springs and learned about the efforts of the Canadian and American military at the command centre for NORAD, and these experiences have enriched my

life and I encourage individuals to take these learning experiences if they ever have the chance.

Mr. Speaker, the members of our Reserve Forces truly contribute to the betterment of our society. For this reason, they are twice the citizen. These men and women have signed up to serve our country and help support our military. Their dedication and hard work has benefited us all.

It is with great pride and excitement that I introduce this resolution. Our government is committed to recognizing Manitobans and their accomplishments and this resolution is a tribute to our reservists. I encourage all members to support me and ensure the passage of this resolution. Thank you.

Mr. Cliff Cullen (Turtle Mountain): Mr. Speaker, and I'll thank you very much for the opportunity to join in discussion on the resolution brought forward by the member for St. James, and I do just want to take a moment to recognize her work as the special military envoy here in the province of Manitoba. And I know she will be getting advice from people around Manitoba on her position, and, hopefully, she will take that advice for the betterment of the people that are serving our armed forces and our reserve community.

I do want to, on behalf of the Progressive Conservative caucus, welcome all the military and reserve people to the Chamber today. Thank you for taking time out of your busy schedules to join us today.

And we certainly are speaking in support of the resolution brought forward by the member. We think this is a very important initiative: to recognize the important role that reservists play here in the province of Manitoba, and we certainly look forward to having the third Saturday in September recognized as Reserve Forces Day.

Mr. Speaker, we know the Canadian Reserve Forces have played an important role in fulfilling Canada's defence commitments and in Canadian culture since the 1800s. The naval and air reserves were important additions in 1914 and 1924. From the beginning, reservists have supplied important personnel for the Canadian Forces, including both world wars and, of course, many United Nations humanitarian missions.

Since the year 2000, over 4,600 Canadian reservists have served in important international cases such as Afghanistan, Bosnia and Haiti. There

are over 25,000 Canadians who are—currently belong to the Reserve Forces and who play a vital role in both in Canada, by supporting the Canadian Forces both within our country and abroad.

* (11:20)

Within our borders, the reserves have made many important contributions to the safety and security of Canadians and they certainly contribute to many safety and security operations across our country. In Manitoba, the reserves have also played an important vital assistance in terms of flood relief and fire operations from time to time as well, and the skills that the reserves receive means that they have valuable contributions and can make valuable contributions to the workplaces they support and to the communities throughout our province and throughout Canada.

Many reservists serve their communities by holding full-time positions outside of the Canadian Forces. As we know, they encompass many different careers: health, social work; some are also students. Mr. Speaker, as we know, this certainly calls for some understanding and accommodation by employers across the country and, for the most part, I think employers have been supportive of what the reserves mean to Manitoba and to Canadians.

Now, we know the reserves also play an important role in communities by participating in culture events that arrive from time to time, whether they be parades, festivals or any other public events. Now, through participation in these public events, reservists provide an important link between the Canadian Armed Forces and the civilian population.

Many reservists also work internationally, and through participation in peacekeeping and humanitarian missions around the world, Canadian reservists work to bring the kind of peace that Canadians enjoy.

Mr. Speaker, we know there are many reservists working here in Manitoba and I know some of them are working in Canadian Forces Base Shilo. I grew up very close to CFB Shilo, so I'm certainly familiar with the operations there. You know, as a young farm boy growing up, you could hear the operations and the activities there on a daily basis, and it was quite interesting when you have company come and you could hear the shells go off and the windows would rattle, so it's quite an—quite an experience.

You know, as we know, CFB Shilo's certainly an important part of the economy of southwestern

Manitoba and it's glad to see the federal government has made fairly substantial financial contributions there, and certainly the facilities there are second to none. And it serves as a tremendous training base for our military and our reservists.

We know that there's another bunch of military people will be going to Afghanistan from CFB Shilo very shortly, so we certainly wish them all the best and certainly hope for their safety and their return—safe arrival back home.

Sometimes, Mr. Speaker, we, you know, we forget the personal nature of what these people do for us and I guess we just want to acknowledge the, you know, the personal contributions that these reservists make and also the military people make for us, you know, across the world.

And I do, Mr. Speaker, want to make note of one individual, and it's Private Lane Watkins. Private Watkins was a member of the 3rd Battalion Princess Patricia's Canadian Light Infantry, which was based in Edmonton. He was killed July 4, 2007. He was killed along with five other Canadian Forces members during—and one Afghan interpreter—when the vehicle was struck by an improvised explosive device. Mr. Watkins grew up in Clearwater, Manitoba, a small town in my constituency.

So those kind of things just put the personal, you know, face on the military activities and I just want to say, on behalf of the Progressive Conservative caucus, we certainly support this resolution. Thank you.

Hon. Bill Blaikie (Elmwood): I'd begin by extending my congratulations to the Member for St. James (Ms. Korzeniowski) for bringing forth this resolution, and for the fine remarks by my Conservative colleague across the way.

Understand that there's—we may want to adjourn a little bit early so that there's a—there's a reception to be enjoyed and the first rule of public speaking is never to stand too long in the—between the crowd and the reception, so, but I do have a few things that I would like to just say, of course, and that is to express my—the support and I assume the—along with every other member of the Legislature for this resolution that urges the government to recognize the third Saturday in September as Reserve Forces Day, recognizing the important role and the value of the Reserve Forces.

Now I'm not exactly sure what the total strength of the Reserve Force is because one speaker said

23,000 and one speaker said 25,000 and probably none of us are exactly sure exactly how many thousands. But it's true that there are a great many Canadians that serve in the Reserve Forces and in my view, there should be a whole lot more.

And one of the things that was always a mystery to me in my life as a member of Parliament was that there was a consensus among the political parties about the importance of the Reserve Forces and the need for more support for Reserve Forces, and no government would ever have gotten into any trouble with any political parties as far as I know had they announced more support for the Reserve Forces. And yet it was a struggle, always, to make this happen, and I always attributed it without wanting to get into trouble with the regular forces, but it was more of an internal thing to the Armed Forces, the lack of support for the Reserve Forces. But as someone who had been active in the and involved in the reserves myself, I always had a special place in my personal and political heart for the Reserve Forces, because I grew up in an environment, both in terms of family but also in terms of my personal experience that was very appreciative of the role of the reserves.

I grew up with stories of my dad and his experiences at Dundurn before the, when he was a, when he was a young man in Saskatchewan that came to Winnipeg and was active in the Camerons and then, of course, ended up joining the Royal Canadian Naval Volunteer Reserve like so many other prairie sailors of his day.

In fact, it's been suggested to me that we might some day have a monument to the prairie sailor and the great many prairie Canadians who joined the navy at that time or even, for that matter, going further back to my grandfather who had served in the reserves in Scotland in the 6th Scottish Rifles and then he just got here just in time for the declaration of war in 1914 to join the First Canadian Mounted Rifles and go back overseas. Or myself, and I'm dating myself here with the reserves because I actually remember going to the old air force barracks on Carlton Street. I don't know how many of you remember that but I'm looking up at the gallery, and I was only there for a short time when I was 10 or 11. I was actually starting as a student with the 402 Squadron pipe band at the time. And when my instructor passed away very suddenly and I ended up in another stream which led me to Minto Armouries for the scout band and into the Cameron Cadets and into the Queen's Own Cameron Highlanders. And there was a time when I felt like I spent my whole

life in Minto Armoury. I was there three or four days a week because I was playing in three different bands, two of them military.

So I've always had a great appreciation of the Reserve Forces and I think we need to appreciate even more the role that they play now in the total force structure of the Armed Forces and in our various deployments overseas, and particularly now in Afghanistan. Because it wasn't always the case, at least not in the time that I was in the reserves. It seemed to me if I remember correctly, and I stand to be corrected, but there was the odd member of the forces that got to go to spend the summer in Lahr or Baden-Baden or some place like that. But there wasn't the same need for the reserves as there is now to be involved in the deployments of the Canadian forces are involved in at the moment.

So our Reserve Forces are much more on the front lines than they were back in the '60s and the '70s. They're put in harm's way more often and they deserve even more honour and support and credit for the role that they now play in the, as I say, in the total force structure of the Canadian Armed Forces.

I'm going to be just partisan for a minute, Mr. Speaker, and note that next year, 2010, will be the 100th anniversary of the Queen's Own Cameron Highlanders and the formation of the Camerons. The Camerons are now grouped in a tactical grouping with the Royal Winnipeg Rifles which was a concern to many that this might presage the disappearance of these two famous Winnipeg regiments. We still have that concern, but the, the command of the tactical group is all alternating between the Rifles and the Camerons and so we are somewhat less concerned, but we still look forward to the day when these two regiments are restored to their, to their former glory.

* (11:30)

So, Mr. Speaker, just on a final note, I think the reserves are, as the honourable member from Winnipeg St. James said, are a good influence on young people and I've heard people say, you know, if you give them a team they won't have to join a gang. Well, it's also the case, give them a regiment and they won't have to join a gang. Thank you.

Hon. Jon Gerrard (River Heights): Mr. Speaker, I rise to support this bill to recognize the third Saturday in September as Reserve Forces Day in Manitoba.

It is timely and appropriate that we recognize the contributions of those who have contributed so much

in our Reserve Forces, those from Manitoba and of course those from across Canada. The Manitoba Liberal Party, of course, is in full support of this, so we are, I believe, gonna be unanimous here in support of this effort, and I think all of us look forward to making sure that this day, the third Saturday in September, from here moving forward, will be a Saturday that really lives up to the name, and that we have appropriate activities and festivities and cultural events that will in fact remember and reinforce for all Manitobans the critical role that the reserves have played.

I think it's important to remember the role that the reserves have played in wars, when Canada has been at war, the First and Second World War and many subsequent—Korean War and most recently Afghanistan. It is important to remember that—the role the Reserve Forces have played in peacekeeping operations around the world. I was accosted by somebody recently who said well, you know, it's the other activities which are already always referred to but the peacekeeping activities don't always get mentioned. And this was a woman who had members of her family who had served in peacekeeping operations in the reserves and wanted to make sure that every time that we're talking about the contribution of the reserves and the armed forces that we recognize the tremendous role that our Canadian forces and our reserves have played in peacekeeping operations around the world.

I too can be a little partisan perhaps and remember the contribution of former Liberal leader, Gil Molgat. He was active in the reserves throughout his life. I think perhaps, you know, this may have come about in part because of an experience that he had very early on. When he was in the early days of the World War II, the ship *Athenia* was torpedoed and sunk by a German U-boat, and among the people on board the 13,500-tonne glider was 12-year-old Gil Molgat.

Now, he survived that Atlantic crossing and the torpedoing of the *Athenia*, but he went on to serve nobly in the reserves in—and was in fact an Honorary Lieutenant-Colonel in the Royal Winnipeg Rifles in 1966, an Honorary Colonel in 1985. He was the founding president of the Manitoba Army Cadet League in 1971 and the president of the Army Cadet League of Canada from 1977 to 1999. And I just want to recognize that, you know, there have been people from all parties and who have made contributions to the reserves and I think that, you

know, that's why there is all-party very strong support for the reserves in Manitoba.

I want to also mention briefly the, what is happening in Cross Lake with young people getting involved in the cadets there. And that activity, I think, is particularly important, and the fact that there can be potential similar activities for young people in many other communities to help give young people in northern communities, in communities throughout Manitoba, an opportunity to participate and to learn and to, indeed, serve in the reserves. And as the member for Elmwood (Mr. Blaikie) has said, as an alternative to gangs.

But I think it's very important to look at the positive things that have come from the reserves here at home in terms of the development of young Manitobans, and for that we say thank you to all those who have served in the reserves and who have participated, not only for what you have done for Manitoba and for Canada, not only for what you have done in remembering celebrations like Remembrance Day, memorials like Remembrance Day, but particularly for what you have done in training young Manitobans and giving young Manitobans a sense of their province and their country and the opportunities to serve.

So I say thank you, and I thank the MLA for St. James (Ms. Korzeniowski) who has brought this forward, and I thank the others in this Chamber for the support in recognizing the importance of the reserves, and we will now do this year-in and year-out on the third Saturday in September. Thank you.

Hon. Jim Rondeau (Minister of Science, Technology, Energy and Mines): Mr. Speaker, first I'd like to thank the special envoy for military affairs, the member from St. James, who's affectionately called our second Minister of Defence. So you're Manitoba's Minister of Defence.

I thank her because when we started in 1999, the military were really—didn't have a visibility in our community. And they've contributed a great deal over the year, sometimes the member for St. James and I kid ourselves, because being air force brats and army brats, we knew the importance of the military. We knew it in St. James, we knew it in our community, we knew it in our country and now we do know it around the world, and it's an important

message to get across to the general public. And I'd like to thank the envoy, because what she's done is we've had now an example of peacekeeping, where we had a peacekeeping memorial, and we now make aware to the public all the different things that we've done in the past.

When I got in this position, I was amazed that we had, at that time, 149 peacekeeping missions. Now it's gone over 150, and that's a huge contribution to the world. And it makes a difference. It makes a difference because Canada is requested to be peacekeepers around the world and it makes a difference.

Last, I'd also like to think that they make a difference in the country, and they do, because when there's a natural disaster, some sort of issue, the military is there, the reservists are there and they do make a difference, and we do count on them, whether it's the Flood of the Century, and I'm sorry, I wasn't there in the 1950s, but I was there in the last flood and I do know that they make a difference. And in other times I've had briefings where people have made the difference.

And lastly, I'd also like to think they make a difference locally. I know a lot of the reservists. My special assistant is a reservist and a lot of the people in my community, the scout leaders, the cub leaders, the different organizations, the community clubs are all run by reservists and military personnel. They make a contribution to the community, to our province and to a country, and I think that we do have to recognize them, and I thank the special envoy for doing that.

Mr. Speaker: Is the House ready for the question?

Some Honourable Members: Question.

Mr. Speaker: The question before the House is the resolution brought forward by the honourable member for St. James.

Is it the pleasure of the House to adopt the resolution? *[Agreed]*

The motion has been carried.

Mr. Gerald Hawranik (Official Opposition House Leader): I would ask that it be recorded that there is unanimous support for this resolution.

Mr. Speaker: Okay. It will be recorded as passed unanimously.

* (11:40)

House Business

Hon. Dave Chomiak (Government House Leader): Yes, Mr. Speaker, on House business. I'd, first of all, like to thank the House and all the members for their attention and for the fact that everyone would really like to speak to this motion, but the fact that we unanimously have agreed to this motion, I think, reflects the nature of the Legislature, and we also want to call it 12 noon so that some of us and the reserves can have a chance to interact over this period of time.

So I thank my colleagues in the House for their attention and kindness in this and you, Mr. Speaker, and for everyone in the gallery.

* * *

Mr. Chomiak: Call it 12 o'clock?

Mr. Speaker: Is it the will of the House to call it 12 o'clock? *[Agreed]*

Okay, there's agreement. Okay, the hour now being 12 noon, we will recess and reconvene at 1:30 p.m.

LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, September 15, 2009

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