

**First Session - Fortieth Legislature**  
of the  
**Legislative Assembly of Manitoba**  
**DEBATES**  
and  
**PROCEEDINGS**

**Official Report**  
**(Hansard)**

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**MANITOBA LEGISLATIVE ASSEMBLY**  
**Fortieth Legislature**

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## LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, May 29, 2012

*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 and know it with certainty and accomplish it perfectly for the glory and honour of Thy name and for the welfare of all our people. Amen.

Good morning, everyone. Please be seated.

**Hon. Jennifer Howard (Government House Leader):** Mr. Speaker, would you see if there is leave to proceed to Bill 300, followed by Bill 210.

**Mr. Speaker:** Is there leave of the House to proceed directly to Bill 300, followed by Bill 210?

### ORDERS OF THE DAY

#### PRIVATE MEMBERS' BUSINESS

#### SECOND READINGS—PRIVATE BILLS

**Mr. Speaker:** Orders of the day. Is there leave to call the Bill 300, followed by Bill 210? *[Agreed]*

#### Introduction of Guests

**Mr. Speaker:** Prior to calling the bills, I'd like to draw the attention of honourable members to the public gallery where we have with us today from the Jewish Child and Family Service Heather Leonoff, president; Bruce Caplan, vice-president; Emily Shane, executive director; Al Benarroch and Merrill Shwaid, who are also the guests of the honourable member for Kirkfield Park.

On behalf of honourable members, we welcome you here this morning.

#### Bill 300—The Jewish Child and Family Service Incorporation Act

**Mr. Speaker:** So, second reading of private bills, Bill 300.

**Ms. Sharon Blady (Kirkfield Park):** Yes, I—Mr. Speaker, I move that Bill 300, The Jewish Child and Family Service Incorporation Act; Loi constituant en corporation le Jewish Child and Family Service, be

now read a second time and be referred to a committee of this House.

**Mr. Speaker:** Honourable member for Kirkfield Park, do you have a seconder for your—

**Ms. Blady:** Yes, the honourable member for Tuxedo (Mrs. Stefanson). My apologies if I did not put that clearly on the record.

**Mr. Speaker:** Okay, thank you.

#### *Motion presented.*

**Ms. Blady:** Mr. Speaker, it is an honour to rise today and begin second reading debate on Bill 300, The Jewish Child and Family Service Incorporation Act. It is also a pleasure to have very special guests in the gallery today from JCFS, because they are just a few of the incredible and dedicated members of the JCFS community.

This community is celebrating a century of caring this year, and there is so much to celebrate. I would like to begin my remarks by reflecting on the rich history that has built the organization that we know today as JCFS.

In 1912, the Jewish community of Winnipeg, that numbered approximately 10,000 people, recognized the need for social services that respected the cultural and religious values of their community. The original soup kitchens, free dispensaries and mutual aid societies began an informal network of community aid and support that grew, so that by the first decade of the 20th century, Winnipeg was already home to such organizations as the Esther Robinson Jewish Orphanage and Children's Aid Society on Selkirk Avenue. This orphanage was home to 60 children who were not only cared for but also kept connected to their heritage.

In addition, the United Hebrew Charities and North End Relief helped families who faced numerous obstacles as they struggled to make a life for themselves in a new country. These latter two organizations would merge in 1916 to become the United Hebrew Relief of Winnipeg.

With early leaders like Reuben Robinson, Elias Levin and A.H. Arnovich and the support of groups like the Hebrew Ladies' Orphans Home association with its over 300 members who fundraised to support

the orphanage, you can see how even at these early stages, the groundwork was being laid for a strong commitment to well-being and support within the local Jewish community.

It is a foundation that has been maintained and grown over the decades, making JCFS an organization that has consistently been on the forefront in delivering social services within Manitoba. This nascent sense of community support was furthered with the addition of agencies including the Knesseth Israel Sisterhood and the National Council of Jewish Women's social service department. The provision of housing, medicine, clothing and kosher food were among the many services that these local organizations provided to those who needed them within the community. These needs and these services grew as members of various European Jewish communities moved to Manitoba to escape persecution in Europe, including the Shoah and eventually the devastation of two world wars.

But as early as 1932 money was being raised within the community to ensure that everyone had the special foods necessary to celebrate Passover, a program that still exists today to help those who might not otherwise be able to partake in important religious dietary obligations at this and other high holidays without such assistance. And as the communities and the related agencies grew, the desire to ensure co-ordinated and effective service delivery saw the beginning of the amalgamation that would grow into today's JCFS.

Knesseth Israel Sisterhood and the National Council of Jewish Women's social service department would amalgamate into the Hebrew Social Service Bureau in 1942, which, in turn, would later become the Jewish Family Service Bureau, which would then combine with the Children's Home and Aid Society to become Jewish Child and Family Service, incorporated in legislation in 1952.

It is that original act that is being modernized and updated by Bill 300 to better reflect the changing needs of the community that JCF serves—JCFS serves, pardon me. Bill 300 also enshrines the names of the founding members of JCFS, including its first board of directors: President Samuel Nitikman, vice-presidents Frank Billinkoff and Isabel Wolinsky, Honourary Secretary Myer Galpren and Treasurer Israel Brotman.

Mr. Speaker, I wonder if those original board members had any idea how this agency would grow over the next decades. As the primary provider of

social services to the Winnipeg Jewish community, JCFS has continued to provide an array of counselling, educational and advocacy programs that have not only been on the forefront of social service delivery, but most importantly, helped community members adjust to changes, cope with challenges and regain control of their lives—no small task, considering the many social and economic changes of the past six decades.

This leadership in providing service where compassion is combined with high standards of professional practice and service delivery meant that in 1958 JCFS was the first child welfare agency to pioneer the use of foster homes. And in 1963 it was the first to open a group home dedicated to providing treatment for emotionally disturbed adolescents in Manitoba. Also, as the first agency in Manitoba and among the first in Canada to provide services designated and designed to meet cultural and religious values, it served as a model for the devolution of child welfare services to Aboriginal authorities.

\*(10:10)

Mr. Speaker, while this is an impressive list of accomplishments, what is most important and why I am humbled to be the sponsor of this private act, is the ongoing and passionate commitment of those who are part of the JCFS community. I think that this commitment is best summarized by the words of the current executive director of JCFS, Emily Shane, and I hope she doesn't mind my quoting her: That this celebration is an acknowledgement of our community's adherence to the ingrained sense of communal responsibility that is a part of who we are. *Kol Israel aravyim zeh la zeh*: We are indeed responsible for one another.

This is a standard that we should all hold ourselves to, and one which JCFS so wonderfully embodies in delivering care that is both leading edge and culturally grounded.

Mr. Speaker, as part of the process of sponsoring this bill, I was fortunate to attend the Century of Caring Gala dinner last Thursday, along with the member from Tuxedo. And I can tell members of this Chamber that the sense of community that I have been describing is alive and growing, and that to see the warmth and caring there was inspiring and demonstrated the ongoing commitment of the community to support JCFS in their mandate to providing a wide range of supports and services to those who rely on them.

What was so impressive was the range of—and diversity of services and the ongoing relationships that are built and fostered by JCFS within the Winnipeg Jewish community. JCFS does so much more than provide services to those in need. It touches lives and it gives hope in ways that seem to go beyond what words could ever truly express. On Thursday night, stories were shared about how JCFS and its founding organizations were vital in welcoming families newly arrived to Winnipeg. Whether it was 50 years ago or two years ago, JCFS was what made coming to Winnipeg coming home for so many newcomer families, whether they arrived from Europe, Russia, Israel or Argentina.

In serving 4,000 community members a year, JCFS touches the lives of people from all ranges and all walks of life. Whether it's support—it is supports to families struggling with poverty issues through counselling and interest-free loans, or engaging children through their Big Brother and Big Sister program, the protection, nurturance and development of children remain central to JCFS's mandate.

One of the most compelling and heart-touching moments last Thursday night, was listening to a young man share the role that JCFS had in his life, which took him off the streets and into a loving foster home. He has gone from homeless and feeling alone and helpless in the world, to being a promising and hopeful young law student; a future that likely would not have existed for him without JCFS.

While being known to many as a child welfare agency, JCFS does so much more. Mr. Speaker, we all recognize that seniors are vital to any community and they are a group whose needs vary based on so many factors, including the presence and proximity of family members. JCFS provides services to assist seniors in living independently or in providing volunteer and chaplaincy visits for those who reside in care facilities and hospitals so that they can maintain connection to their community and to their heritage. Seniors within the Winnipeg Jewish community may also face the additional legacy of being Holocaust survivors and JCFS provides counselling and programming to meet their unique needs.

Mr. Speaker, in closing, I hope that I've been able to adequately, albeit briefly, express the vital role that JCFS plays within our community, and I again thank JCFS for allowing me to play a small role in this important time in their history. Marking a century of caring is no small accomplishment, and

one that could not have happened were it not for a century filled with caring community members, dedicated volunteers and passionate advocates and leaders within Winnipeg's Jewish community.

In closing, I would like to congratulate all of those who have given something of themselves over the years to make JCFS the remarkable and compassionate organization that it is, because this century of caring is truly worth celebrating. I would also like to thank them because their gifts have not only enriched the lives of the individuals and families that they have supported, but it has enriched the larger community of Winnipeg and, I would also say, the larger provincial community. Thank you for living your values in the spirit of Tikkun olam, for you truly are doing your part to heal the world.

I look forward to remarks from my colleagues and hope that they will join me in supporting the work of JCFS through the unanimous passage of this bill onto the committee stage. Thank you, Mr. Speaker.

**Mrs. Heather Stefanson (Tuxedo):** And I want to thank the member for Kirkfield Park for bringing this bill forward in the Legislature, and I also want to welcome our guests in the gallery today from Jewish Child and Family Service. Welcome here today to all of you.

I am pleased, Mr. Speaker, to have the opportunity to second this Bill 300, The Jewish Child and Family Service Incorporation Act. This year marks the 60th anniversary of Jewish Child and Family Service in a hundred years of Jewish social services in Winnipeg.

Last week, Mr. Speaker, I had the honour, along with many of our guests in the gallery and the member for Kirkfield Park and others, of attending the Century of Caring Gala event held at the Fort Garry Hotel in celebration of these two milestones. And I just want to take a few moments to talk about that gala because it was a very moving event to be at, the hundreds of people that were in that room and the kind of energy that we saw within that room all going towards this incredible cause. It was a wonderful evening, and I just want to take this brief moment and this opportunity to congratulate the gala co-chairs Sherry Lercher-Davis and Tracy Leipsic and other gala members including Heather Leonoff, the president of JCFS, and Emily Shane, executive director of JCFS, and others, many, many others who were also involved in that night.

The event was a tremendous success and, as I gather, has raised more than half a million dollars towards Jewish Child and Family Service in Winnipeg, and so I just think that is an incredible thing that we should all celebrate in this House, Mr. Speaker.

I also want to congratulate all the founding members, the past presidents, the former executive directors and the past and present board members of the JCFS, as well as all the donors, staff and support services, all of whom have contributed to the ongoing support for Jewish Child and Family Service in our province.

Mr. Speaker, I just wanted to take an opportunity—I know the member for Kirkfield Park talked a little bit about the history of JCFS in our province and I wanted to read a brief history that was—that I saw in the Century of Caring Gala program from last Thursday. I believe it most accurately and thoroughly depicts the history of JCFS and the importance that it has within Winnipeg and our province. And so if I could maybe just read that into the record, I think it really encapsulates what—the importance of this organization: There have been many changes in Winnipeg Jewish community since the founding more than 100 years ago, but its commitment to social, emotional and financial welfare of its members has never wavers. In the early days of the community, social services were delivered through an informal network of soup kitchens, free dispensaries and mutual aid societies. By the first decade of the 20th century, the Esther Robinson Jewish Orphanage and Children's Aid Society had taken charge of dependent children, while the United Hebrew Charities and the North End Relief were vying to meet the needs of the community's indigent and immigrant members.

In 1960—in 1916, these latter two agencies merged into United Hebrew Relief of Winnipeg. In the years that followed, the work of the United Hebrew Relief was supplemented by many agencies, including the Knesseth Israel Sisterhood and the National Council of Jewish Women social service department. In 1942, these initiatives amalgamated into the United Hebrew Social Service Bureau. A decade later, this bureau, by then renamed the Jewish Family Service Bureau of Winnipeg, merged with the Children's Home and Aid Society to create Jewish Child and Family Service.

Since that time, JCFS has been the primary provider of social services in the Winnipeg Jewish

community. For 60 years, without pause, it has offered an array of counselling, educational and advocacy programs that have helped community members adjust to changes, cope with challenges and regain control of their lives. As a centralized multiservice agency, JCFS has evolved with the times, expanded its services and reached out with compassion and care to all those in need. Children and teens, newborns and newcomers, the lost and the lonely, the elderly and unwell, the broken and the bereaved have all found solace and support from JCFS capable staff and volunteers.

\* (10:20)

JCFS's impact has been immeasurable. By embracing those who are most vulnerable, the agency has been instrumental in creating a happy, healthy, viable, vibrant and benevolent Winnipeg Jewish community, a community in which everyone matters and everyone can feel safe and secure.

So, Mr. Speaker, I believe that that encompasses a lot of what Jewish Child and Family Service is and the importance that it has within our community. So, again, I want to take this opportunity to congratulate all those who have played a role in strengthening the JCFS in Winnipeg.

Mr. Speaker, I am proud to be a supporter of JCFS. I am proud to be a supporter of this bill, and I'm honoured to have had the opportunity to second it today. Thank you very much.

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

**Some Honourable Members:** Question.

**Some Honourable Members:** No.

**Hon. Jon Gerrard (River Heights):** Mr. Speaker, I rise to speak briefly in support of this bill for The Jewish Child and Family Service Incorporation Act.

I rise to recognize the contributions over a hundred years of caring, of 60 years of the Jewish Child and Family Service's involvement with children and with families here in Winnipeg and in Manitoba.

I think it's an extraordinary record. The name itself, as we know, and the attention, not just to children but to families, to make sure that families are supported when they're in difficulty and the children are where they possibly can be with their families.

I think this is an extraordinary job that the Jewish Child and Family Service have done over so

many years, and I'm just very pleased to be here today in support of this legislation to take the next step moving forward.

**Hon. Jennifer Howard (Minister of Family Services and Labour):** I, too, just want to very briefly add my congratulations to the board and the staff at Winnipeg—at Jewish Child and Family Service in Winnipeg.

I was also at the gala last week, and I think the highlight for me was the video that they had commissioned for their anniversary that told the stories of the people that they helped and the diversity of the people that they help. I think, as has been mentioned before, they work with older Manitobans, they work with new Manitobans, and they work with kids who need them, who need a loving, stable place to grow and flourish. And to hear the stories of what that organization has meant in the lives of Manitobans, how that organization has provided friendship and compassion and caring to people, maybe whom the rest of us don't necessarily see, the fact that they do that because they firmly believe that it is our responsibility to look after each other, I think, is a tremendous contribution to Manitoba.

It's been a tremendous contribution to the child welfare system in Manitoba, and I just want to add my congratulations to them and let them know that we are looking forward to working with them for many, many years to come. Thank you very much.

**Mrs. Bonnie Mitchelson (River East):** I just want to add a few comments in support of Bill 300, Mr. Speaker, and congratulate the Jewish community for the work that they've done over the last century and will continue to do for many centuries to come.

Mr. Speaker, there's often times in this Legislature and—when Manitobans think that there's only controversy in this House, that we—and that seems to make the news, when we disagree. And that's what democracy is all about. We do, from time to time, have differences of opinion on how things should move forward and how laws should be made, but in this instance, there is unanimous support for passage of this bill to pass second reading and onto committee. And it's a great day when that kind of co-operation can happen because we know the value of the organization that we're supporting here today.

Mr. Speaker, we know that Jewish Child and Family Service has been a role model for our Manitoba community. And when we look back over

the 60 years of the history of the organization, we know that the safety of children has been the first and foremost priority, as well as the support for families and community and those that are in need.

So, Mr. Speaker, we should look to Jewish Child and Family Service as the role model that they are. We should congratulate them on the good work that they've done serving families, serving children, and we wish them well as they continue in that role. And they also have that ability within the community to raise funds, which this legislation, of course, allows them to do. That ensures that, you know, it's not government alone that's asked to be everything to families and children in the Jewish community. They rise to the challenge to generate the revenue that they need to enhance and support the work that they do.

So our congratulations to them, Mr. Speaker, and we wish them well in all of their future endeavours as they continue to serve the families and the needs of the Jewish community. Thank you.

**Mr. Speaker:** Any other debaters? Is the House ready for the question?

**An Honourable Member:** Question.

**Mr. Speaker:** The question before the House is second reading, Bill 300, The Jewish Child and Family Service Incorporation Act.

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

**Mrs. Mavis Taillieu (Official Opposition House Leader):** Yes, is it the will of the House to call it unanimous, Mr. Speaker?

**Mr. Speaker:** Is it the will of the House to call this passage of this bill unanimous? *[Agreed]*

Thank you to members.

## SECOND READINGS—PUBLIC BILLS

### Bill 210—The Participation of Manitoba in the New West Partnership Act

**Mr. Speaker:** We'll now proceed with Bill 210, The Participation of Manitoba in the New West Partnership Act.

**Mr. Dennis Smook (La Verendrye):** I move, seconded by the member from Emerson, that Bill 210, The Participation of Manitoba in the New West Partnership Act, be now read a second time and be referred to a committee of this House.

***Motion presented.***

**Mr. Smook:** Bill 210, The Participation of Manitoba in the New West Partnership Act, requires the government of Manitoba to contact the governments of British Columbia, Alberta, Saskatchewan to begin negotiations to join the economic partnership known as the New West Partnership. The partnership focuses on trade, international cooperation, innovation and procurement.

Mr. Speaker, Manitoba's economic success is linked to trade. We cannot afford to ignore opportunities for increased trade. The New West Partnership Trade Agreement moves barriers—removes barriers to trade, investment and labour mobility across all three provinces. The New West Partnership encompasses an economic region of 9 million people and has a combined GDP of more than \$550 billion. This is the largest agreement on trade and labour liberalization that Canada has ever seen.

The key elements of the New West Partnership Trade Agreement are non-discrimination: workers and businesses from the three provinces will be treated equally; transparency: provinces will notify each other to ensure that measures, including standards and regulations, are not unnecessarily different or result in new impediments to trade, investment, or labour mobility; streamlined regulations: unnecessary differences in provinces' businesses and occupational-related regulations and standards will be eliminated; legitimate objectives: provinces continue to have the flexibility to protect important public interests, such as public security and safety, human, animal or plant life, health, the environment, the health and safety of workers, and the provision of social services and health services; procurement: public procurement will be conducted openly and transparently ensuring equal opportunity for suppliers in all provinces.

\* (10:30)

Mr. Speaker, under the New West Partnership's international co-operation agreement the provinces will collaborate on joint international initiatives including undertaking joint missions or marketing visits, sharing resources in international markets and sharing market intelligence. The first major outcome of the New West Partnership was a joint mission to China and Japan in May of 2010. Since that trip, the western provinces already see more trade with China, more than the rest of Canada.

Under the New West Partnership innovation agreement the provinces will work together to co-ordinate provincial activities in research and development.

Under the New West Partnership procurement agreement the provinces will work together to jointly purchase goods and services in order to 'chieve' efficiency and cost savings. I believe that Manitoba's participation in trade agreements such as the New West Partnership are integral to the advancement of our economy.

Mr. Speaker, we have CentrePort. CentrePort is North America's newest inland port, with 20,000 acres of industrially zoned land and a foreign trade zone unique to Canada. Trade accounts for 15 per cent of employment in Manitoba, and transportation and warehousing account for 6 per cent of further employment in this province. CentrePort and trade will grow under the New West Partnership.

Failing to participate in what would be essentially a single market that will make our western neighbours highly competitive will hurt Manitoba. The New West Partnership is aimed specifically at the expansion of economic ties to Asia, which is a market Manitoba would profit from enormously. This would also decrease our vulnerability to downturns in the US economy.

Mr. Speaker, the NDP feel that the New West Partnership would not open any doors that aren't already opened. The NDP feel that the New West Partnership dispute resolution mechanism is not a position that is consistent with theirs. This is one of their main reasons for not joining the partnership. How different would the New West Partnership dispute resolution mechanism be from that of the NDP's? Would the NDP not join a pan-Canadian partnership if the dispute resolution mechanism was different from theirs? The NDP feel that their focus is on a larger pan-Canadian agreement. Would joining the New West Partnership not be a good start to forming a larger pan-Canadian partnership?

Mr. Speaker, during—last year, during his opening comments at Estimates, the Minister of Entrepreneurship, Training and Trade (Mr. Bjornson) stated, Manitoba continues to work with other jurisdiction to reduce interprovincial trade barriers to trade and mobility, and goes on to say, that we'll continue to work on interprovincial trade barriers this coming year and my department continues to work with other governments in the US and international



jurisdictions to foster strong relations to advocate in support of Manitoba's interest in the global arena. Working together kind of sounds like the New West Partnership, doesn't it?

Earlier in the session, the member from Elmwood was talking about an east-west power grid and how important it is to work together to achieve this. Mr. Speaker, the words "working together" are very important words in this world. We do it every day. We all know the saying strength is in numbers. Working alone is not the answer.

Earlier in this session one of the backbench members from across the room made the comment, if I thought that the New West Partnership was the answer to all the problems. No, it is not, but is a sure good start to them. And I'm glad the member realizes that they have problems.

What would be wrong with entering into a partnership with Canada's top economic performers? Mr. Speaker, we have an opportunity to position Manitoba as an economic player in Canada. We have the opportunity to sit Manitoba in an exclusive trade deal with our wealthy economic neighbours to the west, and being—to beginning to grow our economy by taking advantage of the opportunity those economics can provide. This agreement would make Manitoba a much more attractive place for investments. I am at a loss to understand why the NDP are not—are turning down a golden opportunity to grow the Manitoba economy in such a straightforward way.

Mr. Speaker, the NDP complain about the lack of transfer payments from the federal government, but when they have an opportunity to help Manitoba's economy, they say no. They say no to future revenue. They say no to future trade. They say no to easier investment in the province. They say no to Manitoba's future business people and leaders. They are saying no to Manitoba's future.

Mr. Speaker, trade is very important to Manitoba's economy. Trade between provinces should not be a restrictive thing but a positive one, fostering growth in many different sectors of the economy of each of the provinces. The NDP should do the right thing and negotiate Manitoba's membership in the New West Partnership. It is time for the government to rectify its past mistakes and pass this bill and sign on to the New West Partnership. I urge all members of this House to support this bill. Thank you.

**Hon. Peter Bjornson (Minister of Entrepreneurship, Training and Trade):** It's a pleasure to rise in the House to speak to this particular bill as brought forward by the member from La Verendrye, and it's great because it provides us an opportunity to talk about all the great things that we have been doing and will continue to do as we grow Manitoba's economy. And, yes, there are a couple of things that the member opposite said that I agree with: One, Manitoba is very much dependent on trade for its economic growth and prosperity, which is why we, as a province, have been doing a lot of things that we have been doing this past decade and will continue to do, as we move Manitoba forward, with respect to tapping into new markets, expanding on existing markets, and continuing to provide opportunities for the many great small-medium enterprises and multinational enterprises that are located here, that are part of a very integrated, global supply chain, Mr. Speaker.

And it's rather interesting, listening to the member from La Verendrye because he's saying that we, as a party, are saying no to Manitoba's economic future. It's rather fascinating because members opposite have repeatedly voted against budgets that we have put in front of this Chamber that have repeatedly invested in the infrastructure that's necessary to create that environment that we need to stimulate the economy and to continue to provide the infrastructure that small, medium, and large enterprise needs to participate in the economy.

They continually vote against budgets that provide the training opportunities, Mr. Speaker, that are necessary to provide the human resources to these small, medium, and large enterprises that are growing our economy. They continue to vote no against budgets that are investing in the educational supports for these businesses that are—they continue to vote against budgets that have brought in tax relief for these businesses. And I'm glad that they do recognize, though, the importance of CentrePort Canada because this has been an initiative which we have embraced and we have run with and we continue to support as a provincial government. And, yes, that is a game changer for the province of Manitoba.

I hear one of the members chirping about, start with the New West Partnership. *[interjection]* Well, I'd like to assure the member that we have been working on a pan-Canadian approach, on an Agreement on Internal Trade. Now, this notion of

subregional trade agreements—it's a rather fascinating notion that they're purporting, Mr. Speaker. There are obstacles inherent in subregional agreements. It's not the be-all and end-all.

In fact, what we have been working towards on an Agreement on Internal Trade, a pan-Canadian vision. Maybe their vision is very myopic and, you know, they don't see beyond certain borders but, Mr. Speaker, our vision is for a pan-Canadian vision. And what has that meant in the last few years in the work that we've been doing? Well, first of all, labour mobility. In 2009, we were the first province to pass labour mobility legislation and continue to advance the Agreement on Internal Trade with legislative amendments.

\* (10:40)

And I think there's a great example of why we needed to do that. In my own personal experience, when I was teaching in Gimli High School, and I was the co-operating teacher to a gentleman from British Columbia who had 10 years' experience teaching at the college level, had a master's degree in education, but he couldn't get recognized and certified as a teacher here in Manitoba because of his credentials being from British Columbia. And to think that that was the case—I had half the experience he had; I had a B.A. and a B.Ed.; I didn't have a master's degree, but he had to go through the process to have his credentials recognized, even though he had more experience and more academic credentials than I did.

So that was a great example to me, as a teacher, how we needed to do something about labour mobility in this province. And that has been one of the things that we have been championing with the Agreement on Internal Trade, to recognize qualifications and credentials coast to coast to coast to the border, Mr. Speaker, so we'll continue to do so.

And we've been involved in a number of different partnerships with the west. I don't see why members opposite see this as a be-all and end-all, to focus on the west only; 44 per cent of our exports domestically go to the west. We already have a very integrated export market with our western partners.

We have our priorities, as a province, to explore new markets in—we have our priorities, as a province, to explore new markets which we've attested to in the Throne Speech, and talked about the BRICS, the Brazil, Russia, India, China and South Africa markets, as target markets. And we're going to

continue to do so, where we have boots on the ground with representatives from the Province of Manitoba, and very strategic in terms of how we invest in those individuals as consultants working in these areas on behalf of exporters here in Manitoba. And, in fact, today I'll be speaking at a luncheon about doing business in southeast Asia because of the connections that we have with the different organizations that are looking towards expanding our markets here for Manitoba companies.

So it was interesting to hear the member opposite say—now, what was he talking about—he was talking about our vulnerability to downturns in the US economy. Well, the member clearly doesn't understand the Manitoba economy and the fact that we are the third-least dependent province on the American economy. We are very diverse in our manufacturing sector and we are diverse to the point where we are expanding to different markets. That is why we weathered the economic downturn as well as we did, Mr. Speaker, is because we're the third-least dependent on the American economy.

That said, we recognize the importance of the American economy and we work with southeast United States-Canadian provincial alliance. We work with the International Legislators Forum, which members opposite will be attending. We'll be participating in that event in North Dakota in the next couple of weeks and going to that event. It was founded on the basis of sharing the common problems associated with living in the Red River Valley flood plain, but now, as minister responsible for trade, being the Manitoba lead as the delegation, we are looking to bring trade issues to the fore to discuss the importance of that trade relationship with the United States because it's still a very important partnership.

Of course, we're involved with the federal government, and I thank them for that, to be involved in the comprehensive European trade agreement, so we can put Manitoba's concerns on the table as far as our position on a number of very important issues that are important to Manitobans on trade, and, of course, as I said, very actively involved in pursuing new markets.

In fact, we had a economic—or pardon me, a minister's advisory council for trade where we had many stakeholders at the table who talked about our plan, and talked about our strategy, and a couple of the recommendations that came out of that, first and foremost, was the establishment of a world trade

centre. And I have to really applaud our partners who have brought forward this initiative and who have actually successfully raised the money to apply for and successfully receive the franchise licence agreement with the world trade centre.

And, of course, our support for small and medium enterprises, from coast to coast to coast here in Canada but also 40 different economic regions that'll be represented here at and in the chamber of commerce in the Centralia event bringing businesses face to face to work out business deals right here in Winnipeg.

And I think that's great because Winnipeg, as members should know, historically was the meeting grounds at The Forks for trade caravans among our First Nations communities, among our Métis communities and, of course, with the trade relationship of the Hudson Bay and North West Company. Historically this is a centre for trade in the country, and it always has been and will continue to be.

But to suggest that we need to pass legislation that would force us to negotiate is—there's no substance to that bill, Mr. Speaker, because we are in discussions with our partners to the west; we're in discussions with our partners to the east; we're in discussions with our partners to the north; we're in discussions with our partners to the south. And we'll continue to work with all regions that are interested in lightening the regulatory burden in streamlining the regulations as we have done. And we've done so by having great meetings, first-ever Cabinet meetings—joint Cabinet meetings held between Saskatchewan and Manitoba, first in Brandon and then in Yorkton, Saskatchewan, to discuss how we need to eliminate some of these barriers to internal trade; transportation issues, trade issues, and, of course, labour mobility were among the issues that we discussed.

So we are working with all partners, Mr. Speaker—all partners—to find ways to expand Manitoba's trade base to grow our economy, and we'll continue to do so. We'll continue to do so by investing in 'improtant' infrastructure to that end, by investing in the human resources to be champions with their boots on the ground in international markets who are very well versed in what is strategically important for Manitoba as far as having an understanding of the diversity of product and services that are manufactured here and processes

that are employed here in Manitoba. And that has been our focus.

Our focus is national. Members opposite, their focus seems to be regional; our focus is global. And we'll continue to do all the good things that we have done in the past 10 years and expand on the good things that we have done in the past 10 years as we work with a common goal of growing the Manitoba economy.

So I thank the member for bringing this resolution to the floor. At least it gives us an opportunity to talk about what we are doing and what we will continue to do on behalf of Manitobans who are working very hard every day to provide services and products and grow our economy. Thank you, Mr. Speaker.

**Mr. Cliff Graydon (Emerson):** It gives me great pleasure to rise to put a few words on the record today on my colleague from La Verendrye's bill, the New West Partnership act.

Mr. Speaker, it's clear that the minister from—or the member from Gimli in his 10 minutes today did convince lots of us here that he does understand that they do have a problem, and he has pointed out very clearly that he has no support in his Cabinet to join the New West Partnership. That's exactly what he said. It took him 10 minutes to say it, but he did a fine job of it.

He knows that CentrePort and the trade will suffer if Manitoba isn't in such an agreement. He also knows that Manitoba isn't—its isolation from these ties and partnerships under the NDP hurts our economy. He also knows that a big portion of our trade is interprovincial, and he also knows that in eastern Canada they do have a trading bloc, and in western Canada they have a trading bloc. But he also knows that neither one of those trading blocs want to have a welfare partner. He knows that, and unfortunately he wasn't able to convince his colleagues to join either of them.

It's just unfortunate as we go forward. And when he talks about, we want to be global, he has to understand that you have to be able to walk before you run. And Manitoba's not big enough—not big enough—to influence a global market. I'm sorry, but it just isn't. You'll realize that soon, as you mature.

When he talks about subregional challenges that he's unable to address, aw, it's going to be too bad. I hope he can read *Hansard*.

At any rate, Mr. Speaker, when we speak of some of the issues, agriculture is one of the big drivers in the province of Manitoba, and when we talk about interprovincial trade, we need to remove the barriers of a lot of the products that we value-add in our province.

This government today has talked for years about building a slaughter plant in the province of Manitoba. They can't export to Saskatchewan unless it's federally inspected. We don't have a plant here that's federally inspected.

We can't access the European markets that the minister's talked about. We can't access those markets. They're wonderful markets. Minister Ritz has done a great job opening up markets all over the world, whether that's in Europe, Korea, Japan and China, and we can't access them because we can't produce. We send our product to the New West Partnership to be value-added. That's the mentality, and it's unfortunate that's the mentality of this government.

\* (10:50)

When he talks about subregional—or, yes, subregional trade agreements, he's afraid of the challenge to sit down and discuss things, because he has to be transparent, and this government has a problem with transparency. They say one thing before an election and they do something right after the election that's totally opposite. They raise taxes; they said they weren't going to do that. They put on a gas tax and, man, they were upset about the price of gas, and today there's a big gas tax out there that's supposed to go into the roads. Yes, and I believe they will put that \$50 million into the budget for roads, but at the same time the guys from Saskatchewan have put away more into the roads, and we can drive on their roads; we can't drive on ours.

We need to have standardization. When we talked about the labour agreement that goes between the provinces, I would like to say to the member from Fort Garry that he knows very well, as a welder, that he has to go and take tests when he goes to the other provinces. There is no standardization. That member has to take tests and so do all the rest of them have to take tests. But that isn't what we heard from the minister today or the member from Gimli.

So, Mr. Speaker, with those few words, I'd like to give some of my colleagues an opportunity to put

their thoughts on the record as well. Thank you very much.

**Mr. Bidhu Jha (Radisson):** It's a great pleasure for me to rise and put a few comments on this particular bill. And, by the way, the theme of the bill is not bad, but the content and the whole conclusion or proposal does not make much sense to me.

I have—this particular bill is of interest to me, Mr. Speaker, because of my own personal interest and experience in international trade for a number of years. And I think that this is very interesting for me to hear from both members talking about the value of trade. Of course, we all need to have economic development based on trade, and nobody's denying that. The fact is that we—our approach is a little bit global, a little bit bigger, and to debate whether the number three is larger or number seven is something that I think even a grade 1 student can understand. When you want to make this thing bigger, you have to have the bigger vision. And this is a country—Canada is a small country compared to the global context. We have hardly 30-some-odd million people here, and if we want to divide this country in different zones and say this is how we will do and this is how you will do, the country's whole character will not be recognized as it ought to be.

We are expanding. We are expanding our trade nationally; we are expanding our trade internationally, so we have to understand it is not something that we are denying that we will not work with. We are working with western partnerships. We are working with them. But I think to focus in a narrow way is something that will defeat the whole purpose.

I think that the minister of enterprise, trade and training just mentioned about some of the things we have done in 2009, in the Agreement on Internal Trade, which is relating to the labour mobility from provinces all across Canada. Now, we cannot say we have a west partnership, but Ontario, we don't want to deal with you; Québec, we don't want to deal with you. But we have got to really open this and see how we make the whole country, in terms of labour mobility, which we already have done in 2009 by passing that act.

So I would say that these ideas which we are talking about is much valuable, much bigger and much futuristic. I mean, the world today sees free trade agreement going on from one country to another country, and I remember at one time when

the Free Trade Agreement was being done between Canada and the United States, there was resentment; there were people did not like it, but, at the end, we all benefit today. And I think some of us will be participating in the Midwestern Legislative Conference, which I happen to be the member of the economy and trade, and we talk most of these times about how we can make even the labour mobility from these two countries, and I gave the example of our internal trade agreement—which we'd signed in 2009—of labour mobility.

So let us not narrow our vision. Let us not look at things that is not going to be beneficial for our province and our country.

So I would say that the minister of trade and training mentioned there are one factor which also called qualifications of people who come from other jurisdictions and they need to practice here. We have been very innovative in that. There are engineers, there are technicians coming from other jurisdiction from all over the world and they don't get qualified; they don't get licence. So the member who was talking about licensing, yes, we are working on that. We are working on to make engineers be qualified by going through the training program, the University of Manitoba, and get certified engineers. So this is absolutely wrong for them to think that we are not looking at those issues. We are and we are succeeding, Mr. Speaker.

One of the things that I would like to say that we have developed a strategy—international trade strategy as the minister mentioned about BRICS, which is the countries that are really going to be using our product. And at one time I must mention, Mr. Speaker, when I came to Canada some 40-odd years back, I was bubbling with ideas to say how to make Manitoba grow. And would you believe I started working on international trade—*[interjection]* Kindly listen to me, sir, you'll be happy to know what we have done in the last few years.

I happened to visit the Indian High Commission—the Canadian High Commission in India and trying to find out if somebody from that country wants to come and invest, where will they go. Would you believe, Mr. Speaker, and does the House know, that the literature which I found in the Delhi High Commission would list provinces and a map; Manitoba was not even mentioned at one time. I'm talking about not 100 years back; I'm talking about the mid '90s. Manitoba was not even known by people of US south the border, and I have a story

which I have limited time but I was in one of the US states and they looked at my licence plate, Manitoba. Where is it? I said in Mexico. Oh, okay. So they did not even understand Manitoba is part of Canada. Manitoba is part of this country. But we never promoted Manitoba.

And I must with a great honour say that 2006 when the Premier led the largest trade mission, largest trade mission Manitoba had, we went to India, which is the country that now is rising power. And, Mr. Speaker, just a few weeks back a very big industrial house, a billion dollars net worth, came here and invested—more invested in the—our hydroelectric generation station which I must congratulate and thank the Minister of Innovation, Energy and Mines (Mr. Chomiak), who silently is working on some of these files which makes Manitoba not only a small province that grows wheat. We are a province that has aerospace industry, leading. We are a province that are great in mining. We have a province that is great in manufacturing. We have a composite centre that will be one of the best to make automobile.

So I think we are not narrow; we are bigger. Question is we take a pride in this. We take an approach to make expand. That's what we are talking about, Mr. Speaker.

So, Mr. Speaker, when this business invested—this is one of the largest transformer manufacturers in the world—and they are exploring ways to advancing innovative hydroelectric transmission, a smart grid enhancement, and other renewal energy technologies by investing in Manitoba. That company which came here did not really come because they something they dreamt. We have been going there; we have been talking to them; and we are working on them. So I think that the idea is we are looking at building our province. We are looking at building our economy, and that trade is one of the factors.

Thank you very much, Mr. Speaker.

**Hon. Dave Chomiak (Deputy Government House Leader):** House business, Mr. Speaker.

#### House Business

**Mr. Speaker:** Honourable acting government House leader, on House business.

**Mr. Chomiak:** Yes, pursuant to rule 31(8), I'm announcing that the private members' resolution to

be considered next Tuesday will be one put forth by the member for St. James (Ms. Crothers). The title of the resolution is Bullying Prevention.

**Mr. Speaker:** It has been announced that, pursuant to rule 31(8), that the private member's resolution to be considered next Tuesday will be the one—the one that will be put forward by the honourable member for St. James. The title of the resolution is bullying.

\* (11:00)

### RESOLUTIONS

**Mr. Speaker:** The hour being 11 a.m., it's time for private members' resolutions.

And before we get to that, of course, I'd want to indicate to the House that the matter that had been under consideration by honourable members will be open for debate.

We'll now proceed to the resolution since it is 11 a.m., and the resolution under consideration today is the one brought—to be brought forward by the honourable member for Brandon East titled Brandon Health Care.

#### Res. 8—Brandon Health Care

**Mr. Drew Caldwell (Brandon East):** Mr. Speaker, I move, seconded by the honourable member for Radisson (Mr. Jha):

WHEREAS health care is a top priority for all Manitobans; and

WHEREAS timely access to quality health care is vitally important to the ongoing prosperity and productivity of Manitobans; and

WHEREAS Brandon is Manitoba's second most populous urban area; and

WHEREAS families in Brandon were concerned about health care in the 1990s when \$6 million in provincial funding was cut from health care in Brandon and promises to rebuild the Brandon hospital were repeatedly broken; and

WHEREAS since 1999 the provincial government has been committed to improving access to health care in Brandon, including investing over \$100 million in health-care infrastructure; and

WHEREAS this amount includes over \$60 million invested to rebuild the Brandon Regional Health Centre; and

WHEREAS in 2001 the provincial government opened the new, \$24-million Western Manitoba Cancer Centre in Brandon to bring straight of the art cancer care, including radiation 'theraree' closer to home for western Manitoban residents; and

WHEREAS in 2011 the provincial government officially opened the \$12.2-million Westman laboratory expansion, providing extensive laboratory services for the health centre, medical clinics, nursing homes and other health-service centres within the Brandon Regional Health Authority; and

WHEREAS Budget 2012 includes funding for four more paramedic firefighters which enables the Province to put another ambulance on the street in Brandon; and

WHEREAS the provincial government recently committed to further improving Brandon health care by expanding and upgrading Brandon Regional Health Centre's medical ward, including a 25 per cent increase in the number of medical beds and expanding home care services to be more responsive to the needs of seniors and their families.

THEREFORE BE IT RESOLVED that the Manitoba Legislative Assembly recognize the progress made in improving access to health care in Brandon; and

BE IT FURTHER RESOLVED that the Legislative Assembly urge the provincial government to continue to build on its accomplishments to further improve the health and well-being of Brandon and area residents by meeting its health-care commitments.

**Mr. Speaker:** Is it the pleasure of the House to consider the resolution as printed? [*Agreed*]

*WHEREAS health care is a top priority for all Manitobans; and*

*WHEREAS timely access to quality health care is vitally important to the ongoing prosperity and productivity of Manitobans; and*

*WHEREAS Brandon is Manitoba's second most populous urban area; and*

*WHEREAS families in Brandon were concerned about health care in the 1990s when \$6 million in provincial funding was cut from health care in Brandon and promises to rebuild the Brandon hospital were broken; and*

*WHEREAS since 1999 the Provincial Government has been committed to improving access to health*

*care in Brandon, including investing over \$100 million in health care infrastructure; and*

*WHEREAS this amount includes over \$60 million invested to rebuild the Brandon Regional Health Centre; and*

*WHEREAS in 2011 the Provincial Government opened the new, \$24 million Western Manitoba Cancer Centre in Brandon to bring state of the art cancer care, including radiation therapy, closer to home for western Manitoba residents; and*

*WHEREAS in 2011 the Provincial Government officially opened the \$12.2 million Westman Laboratory Expansion, providing extensive laboratory services for the health centre, medical clinics, nursing homes and other health-service centres within the Brandon Regional Health Authority; and*

*WHEREAS Budget 2012 includes funding for four more paramedic firefighters which enables the province to put another ambulance on the street in Brandon; and*

*WHEREAS the Provincial Government recently committed to further improving Brandon health care by expanding and upgrading Brandon Regional Health Centre's medical ward, including a 25% increase in the number of medical beds, and expanding home care services to be more responsive to the needs of seniors and their families.*

*THEREFORE BE IT RESOLVED that the Manitoba Legislative Assembly recognize the progress made in improving access to health care in Brandon; and*

*BE IT FURTHER RESOLVED that the Legislative Assembly urge the Provincial Government to continue to build on its accomplishments to further improve the health and well-being of Brandon and area residents by meeting its health care commitments.*

**Mr. Speaker:** The honourable—one moment please. The honourable—okay. The honourable member for Brandon East—and before I get to him, it's been moved by the honourable member for Brandon East, seconded by the member for Radisson (Mr. Jha), that:

WHEREAS health care is a top—dispense?

**Some Honourable Members:** Dispense.

**Mr. Caldwell:** Mr. Speaker, it is a—very much a pleasure and a privilege to rise to speak to this

resolution. I have no illusions that members opposite will be voting against this resolution or speaking it out. I have no illusions about that whatsoever, however I would ask and request that members do listen to the context of this debate and appreciate that, not only is this a celebration of the work that's been done by this government over the last 12 years, but it's an encouragement for this government to continue to do more to build health-care infrastructure in western Manitoba and, indeed, throughout the province of Manitoba.

The intent of this resolution, as I said, again, is to celebrate the accomplishments that we've made to date, but, more importantly, to continue to build into the future, health-care excellence in Brandon and western Manitoba.

My association with health care in Brandon goes back to the Filmon years. I was a founding director of the Brandon Regional Health Authority, appointed by the City of Brandon as the city councillor at that time, in 1998. It's one of many, many non-profit boards—or—community organizations, Mr. Speaker, non-profit boards, non-profit community organizations, that I've been involved with over the years in a formal way. I believe it's very important for citizens to be active in their communities, to participate in the building of the communities through supporting in a very real way organizations that are seeking to build a better Brandon, in this case, but a better community more broadly speaking wherever we may live in the province.

So I was very proud to be appointed to the Brandon Regional Health Authority in 1998 as a founding director by the City of Brandon. And I continue to be proud to serve on non-profit boards presently and a number of non-profit boards that I've served on in the past to build Brandon, western Manitoba and this province as a whole.

When I was appointed to the Brandon Regional Health Authority, on that initial board in 1998, we had gone through, in Brandon, a decade of severe disappointments, and that's understating the case. For 11 years, during the time of the Conservative Party rule in this province, the Brandon Regional Health Authority was—and previous to the creation of the Brandon Regional Health Authority, the Brandon hospital board was confronted with a series of broken promises with regard to the reconstruction of the, at that time, the Brandon General Hospital and then becoming known as the Brandon Regional

Health Centre in 1998. Seven times during the 1990s members opposite committed to building the Brandon Regional Health Centre infrastructure. To put it into context, Mr. Speaker, when I was appointed a member of the founding board of the Brandon Regional Health Centre, we were operating in 1950s and 1960s infrastructure, infrastructure that was a half a century old.

That is why, Mr. Speaker, it was so important that the Brandon General Hospital and the Brandon Regional Health Authority undergo a capital expansion during the 1990s. And that is why, when members opposite, the Conservative Party of Manitoba, decided to make promises to build the—on that infrastructure and renew that infrastructure, people in Brandon and western Manitoba were very enthusiastic and very supportive of the commitment. But it was repeatedly broken, seven times over 11 years. In fact, there was not any work done on that 1960s, 1950s infrastructure during the time that members opposite held power in this province. And there is no doubt that dealing with infrastructure that was a half a century old caused people no end of harm and, in fact, it probably caused the loss of life during that 12-year period that members opposite were in office and breaking their promises to rebuild health-care infrastructure in Brandon.

So when I was appointed to the Brandon Regional Health Centre board in 1998 under the auspices of the city of Brandon and under the direction at that time of the Filmon Conservative government in this province, we were faced with the very, very, very challenging task as a brand new board, as a founding board of the Brandon Regional Health Centre, and that was to build that health-care infrastructure in the face of no provincial government support, repeated broken promises and, indeed, Mr. Speaker, real cuts to health-care funding in the city of Brandon and in western Manitoba and, indeed, throughout the province as a whole. It really was an impossible situation for all of us joining that initial board because we did not have a partner. There was no provincial support. There was no provincial government that was interested in investing in health care. In fact, the record shows that there were cuts in support to operations at the Brandon Regional Health Centre and health care in the province of Manitoba widely. And not only were there no investment in the health-care infrastructure in western Manitoba in the 1950s and 1960s infrastructure, but worse than no action, there were

promises of action and then repeated broken promises and retreats from those promises. So people's expectations were raised a number of times over those years and then dashed severely, which, as I say, caused no end of hardship to western Manitobans and was, no doubt, a contributing factor in the loss of some lives in that region during that time.

\*(11:10)

So, Mr. Speaker, in 1999, still sitting on the board of the Brandon Regional Health Centre, I let my name stand as a candidate for the NDP in the 1999 election and was subsequently elected in that election along with a new government. And the first, the very first initiative that we took on upon our election to office in this province was a major reconstruction of the Brandon Regional Health Centre—a \$60-million reconstruction of the Brandon Regional Health Centre—finally confronting the crisis situation, the severe infrastructure deficit, that we had in Brandon and western Manitoba with—not just with words, but words backed by action and backed by dollars to build that health-care infrastructure; dollars, incidentally, that were opposed in this House by members opposite during budget votes.

After 12 years of broken promises building—towards building the Brandon Regional Health Centre, members still—members opposite, the Conservative Party, still felt it necessary to oppose the investment that was being made by the new government in the Brandon Regional Health Centre. And, Mr. Speaker, that theme has continued throughout the last 12 years. Every single penny that's been invested in health-care infrastructure in Brandon, every single nickel of that \$100 million has been opposed by the Conservative Party of Manitoba in this House during those budget deliberations.

So, Mr. Speaker, I'm very, very proud that we have, as a government, withstood the cynicism and the opposition of members opposite who seek only to hobble and destroy efforts to build not only health care in this province, but education in this province, roadways and infrastructure in this province. Every single initiative, in fact, that this government has undertaken over the last 12 years has been opposed by members opposite in budget votes in this House, and that's an important consideration when one does reflect on the fact that in 1999, '98, we were living with 1950s and 1960s infrastructure in Brandon and western Manitoba.



Today, I'm proud to say, Mr. Speaker, after the significant investment in the Brandon Regional Health Centre, in the MRI suites, in the western Manitoba cancer treatment centre, in the Westman lab, in the health access centre in downtown Brandon, a new ambulance fleet, in emergency and protective services to support that ambulance fleet, I'm very, very proud that Brandon and western Manitoba is now home to what is a world-class infrastructure in terms of health care. In fact, the Mayo Clinic was up in Brandon not that long ago to take a look at our new western Manitoba cancer care treatment centre to use it as a model for their own operations in Rochester, Minnesota. So I'm very, very proud to stand with this government in investing in health care in our province, investing in health-care infrastructure in my home community of Brandon.

We have accomplished much, Mr. Speaker. There's still much more to do, but this is a government that is committed to doing it, it's committed to supporting it, it's committed to funding it, in the face of hostile opposition from members opposite.

Thank you, Mr. Speaker.

**Mr. Reg Helwer (Brandon West):** I'm pleased to speak to this resolution concerning health care in Brandon, something with which I am acquainted all too well, as I've spoken about in the House here before.

The member from Brandon East spoke about the money for buildings that this government has put into branding—Brandon funding that was announced. And apparently, they did learn well from their predecessors: announce, reannounce, reannounce, reannounce—how many is that? I kind of lost track; we did in Brandon, too, because it kept going on until, you know, it was built. So—but, however, let's talk about what's there now. What the Brandon East—member from Brandon East missed is that, you know, buildings and structures don't heal the sick and injured, but people do.

However, let's look at what we have in Brandon. We have a wonderful atrium—attractive, yet we can't use the stairs because of two tragic deaths. When I visit friends and family in the bed tower that is quite old, I look out at the atrium and I see the lovely beams out there that we can't figure out how to clean, so there's dust and dirt and such on the beams that, you know, maybe the design was in need of a little bit of planning there. However, as I said, the bed

tower was old and in need of maintenance, and it had no beds so we had to go through a private fundraising campaign—\$5,000 a crack for a bed; you, too, can own a bed in the Brandon Regional Health Authority—and a very, very successful campaign, Mr. Speaker, from the private sector to put beds into this public facility—you know, very, very, very sad. And how many beds? Well, two, three, four per room. Again, some of their supporters have complained about the ability to transmit disease in these rooms that you have two, three, four people. And we've heard in this Chamber before, about the dignities—the indignities that you see in some of these rooms. Dignity in health care in Manitoba, Mr. Speaker, is something you lose very, very quickly.

So, what else do we have there? You know, we—new operating rooms—lovely rooms but 50 per cent of the orthopedic surgery from Brandon residents has to go elsewhere; we have to go to Boundary Trails, we have to go Minnedosa. And, it's great that we have those facilities to use but, another, you know, onerous journey for the people from Brandon; that they or their family members have to take them there, have to take them back and forth, have to go for pre-ops, et cetera, et cetera, et cetera. Isn't this what we were supposed to be able to do in Brandon? And, of course, wait lists that continue to grow for those types of surgeries.

The Brandon laboratory—I was told by many friends that I have that work in there, that the original renovation was supposed to be \$1.5 million. And, I was told, just recently, it was \$11.5 million that the renovation cost. But, I see here, from the member from Brandon East, in fact, it cost 12.2 and it's still not what the staff need to do their job well. I could go into stories in detail about how things, you know, are troublesome in that area but, again, those are individual stories.

Now we do have a CancerCare centre. A lovely, lovely facility that—you know, the premise started from the private sector. This is what we need in Brandon; we need something like this so we don't have to travel to Winnipeg all the time. And the government 'evegally' did take—

**An Honourable Member:** There's not private money in there, is there?

**Mr. Helwer:** Oh, well, there started to be, but that fundraising is now going into the hospice that we're building because the government didn't build places for people to stay in Brandon. So, that fundraising is

doing very, very well, and I will speak to that this afternoon.

So, anyway, we have this lovely facility, fine facility but, however, it's not fully operational. I have many friends that still make the journey into Winnipeg for treatment that they can't do in Brandon. They've got all the equipment there, they have some of the staff, but they can't run this fully operationally yet. And, again, we still have to travel into Winnipeg. Nothing against Winnipeg for the people that live here, but we do want to have health care in Brandon when we have those facilities.

Another thing that we have to do is—speaking recently to some cancer patients, they were going through treatment, and the first thing you do is you're given an oncologist to talk to. Well, that oncologist is in Winnipeg; we're in Brandon. We have oncologists in Brandon. We have very, very good oncologists in Brandon. You have to make sure that you can push hard to make Winnipeg understand, that I want an oncologist in Brandon, that they want to be able to deal with people there, rather than have to travel to Winnipeg. And, sometimes that's hard to push through that Winnipeg-centric tendency that we have in the health-care system.

As I said earlier, buildings don't cure people; people do. And, we have many, many fabulous people in health care, especially in Brandon. Now, my experience, mostly, of course, is with the dialysis unit there. And it was a challenging experience, of course, with our daughter in there, three days a week, several hours of the day. They run three shifts there, six days a week. The staff do a wonderful job, but we have one nephrologist, Mr. Speaker, for all those shifts, plus he has to see patients in his office.

And, you know, he might want to actually have a life. I'm concerned for this individual; he's a friend. How long can he keep this up? We certainly need another nephrologist in Brandon to deal with this issues because that facility is full.

If you need dialysis treatment in Brandon now, and there is not an empty space in the dialysis unit—there usually isn't, it's full—you have two choices: you can go to 'peritonatal' dialysis or you can travel to Winnipeg.

When you're on dialysis, Mr. Speaker, it's very challenging, especially when you have dialysis on the Friday or the Saturday, and you have to wait two days to go into your next dialysis treatment. That first one, on the Monday and Tuesday, it's difficult,

and to have to travel to Winnipeg to have that treatment is very trying on the people, very trying on the patients. And what does it do to their health?

So, how do you get a spot on the dialysis unit? Well, if you're fortunate, there's a good-news story. There's a transplant that happens and that patient is removed from the dialysis unit. But that's, unfortunately in Manitoba, not all that common. And, I know we're working on it, and I know we have fabulous people working on that, but we need more of that and we need more people to donate their organs for when they pass away, unfortunately.

\* (11:20)

So what else can happen to get a spot on the dialysis unit? Again, it's a bit—a less of a good story, because someone must pass away for you to get that spot. Otherwise, you're travelling to Winnipeg, on that road, again and again and again. And, that does get trying, Mr. Speaker, that does get trying.

Now, we hear rumours of, maybe, a half-time nephrologist or something like that, but haven't seen anything happen yet and I'm, you know, really quite worried about how this is going all take place.

So now, on the medical floors we have in this old tower that we built—that we have still beside that new atrium with those brand new beds that the private sector bought and donated, it's interesting environment in there. The staff works exceedingly hard, and we have this structure that's called a hospitalist. They're on staff there. They're very good people and they work shift work, but there's a disconnect between your family doctor and the hospitalist.

You have your family doctor that has been treating you for 10, 20 years, longer. They know your care. They're a primary care physician. When you're admitted to the medical floors and you're dealing with the hospitalists, they get some of your work through because our electronic systems or medical records—we're still working on those—but there's no communication—not great communication to that medical doctor. In fact, when my father-in-law was in the hospital and he was in there for a while and we were working with the staff, you need to be in there 24-7. A family member needs to be in there to help with the care, to help the nurses, to help and deal with the hospitalist because they're busy, and when they're doing their rounds, you don't know when that is. It might be at 9 o'clock. It might be at 10 o'clock. If you miss them for that day, there might

be some critical care that you miss the information on and a decision.

So all that is a challenge for families; how to put somebody in there, you know, full time. That is, indeed, a challenge. When my father-in-law passed away, I saw his primary care physician a couple of days later. His question was, how is George doing? There's no communication, Mr. Speaker. He did not know that his patient had passed away in the hospital because there is no communication in our system.

Primary care is challenging but the people are great. We have hallway medicine again. We still have that everywhere, and this government can't deal with it. My—one of my fine aunts, she was in the hallway waiting for open-heart surgery. This dignified aunt sitting in a hospital bed—lying in a hospital bed in the hallway, waiting for surgery for several days. We still have that. As I said, Mr. Speaker, dignity is the first thing you lose in our health-care system. The waiting times, and it goes on and on and on.

So this resolution does miss the mark. It's not the buildings, it's not the structures that we—won't need to celebrate; it's the people, the staff, the nurses, the doctors, the front-line staff, Mr. Speaker. Those are the people we need to celebrate in our health-care system. Thank you.

**Mr. Speaker:** I want to—in case I've made an error—I want to, perhaps, announce to the House that the private member's resolution that had been called or announced by the Government House Leader earlier, I may have omitted one word from the title of that resolution, so I want to ensure that the record is accurate, and the title of the resolution that will be considered next Tuesday will be the one for the—by the honourable member for St. James (Ms. Crothers), and the title of the resolution is Bullying Prevention. Just to ensure that the record is accurate.

**Hon. Theresa Oswald (Minister of Health):** It's my great privilege to stand in the House today to speak to this resolution concerning health care in Brandon. Of course, it is a good opportunity to recognize the progress that we have made since forming government, and it's also a good opportunity, Mr. Speaker, to speak about where we can go in the future and how we can continue to build our health-care system.

I would begin, Mr. Speaker, by making reference to, and, indeed, paying my respect to the member from Brandon West. I will say that, of

course, prior to the election, I did not know the member for Brandon West, (Mr. Helwer) and, indeed, after the election, in the busy life of an MLA and a minister, I had not had the opportunity to get to know the member from Brandon West, but, recently, I was able to learn more about his personal circumstances and his life; in particular, his life concerning the health of his daughter, and he was very forthcoming about the journey that they were on, which, really, of course, is a journey that no parent wishes to go through. No parent wants to see their child ill for one day, let alone over an extended period of time. And it was through our initiative in partnership with Transplant Manitoba that I got to learn of this, because the member, who, in, I would argue, a non-partisan way, came forward to what would be perceived as a government announcement to show his support in promoting to all Manitobans the importance of having that conversation with your family about becoming an organ donor.

And it's my belief, Mr. Speaker, that we will very likely, as being opponents politically, not agree on everything. That will be the day-to-day without a doubt, but on those days when we can separate partisan politics, come together as human beings and as parents, and say, this is what we can do together; this is what we can work on together to make life better for all Manitobans and, indeed, all Canadians, and stand shoulder to shoulder and say, Manitoba, sign up for life. That's exactly, I think, the kinds of things that Manitobans expect from us day to day; it's the kinds of things—it's the kind of thing that Canadians expect from us.

And so, I want to pay tribute to him; I want to wish him and his family and his daughter all the best in the days ahead. And I want to say to all members of this Legislature, [www.signupforlife.ca](http://www.signupforlife.ca), and have that conversation with your families. It's arguably the most precious gift that you will ever give to another family.

It's my pleasure, of course, to stand and say that we have worked very hard since 1999, Mr. Speaker, to make investments in Brandon. They range, of course, from the expanded, redeveloped Westman lab; the new Brandon hospital; an investment that we've made to undertake a feasibility study concerning a Brandon medical school led by Dr. Poff, from Brandon University, and Dr. Postl, from the U of M's faculty of medicine; we've worked to invest in diagnostics, bringing the first MRI outside of the city of Winnipeg to Brandon; the

province's first 64-slice advanced CT scanner was placed in Brandon; we added the second echocardiogram back in 2007 to double the number of echocardiograms done per year.

Many people still don't know, but it's so critically important that we built for, roughly, \$8 million, the Manitoba Transportation Co-ordination Centre, or MTCC, and housed it in Brandon to ensure that we're doing the best that we possibly can for dispatching our emergency medical services.

It may interest you to know, Mr. Speaker, that recently the STARS helicopter program took a trip to Brandon to have a look at MTCC. And while, in many respects, the STARS program is viewed across the nation as being second to none, they looked at MTCC and said there were many things going on there that they had not yet adopted in Alberta, and they were working very closely with our officials and continue to work with our officials to bring themselves up to the same standard that MTCC has to offer.

So, there are many investments that we have made, Mr. Speaker, in Brandon and that, of course, we're going to continue to make. I would note that the member for Brandon West (Mr. Helwer), passionate as he was, did indeed say the—something, and I believe I'm quoting here, that buildings don't heal people, health professionals do, and we need to celebrate health professionals.

And curious strange that the member would make such a statement like that when his party, the Conservatives, when facing difficult economic times in the '90s, made a very deliberate choice to rid themselves of health professionals, the same individuals I would suggest that the member, today, says that we should celebrate. But the decisions made, while they had their hands on the steering wheel, Mr. Speaker, were so clearly in direct contravention to what the member is saying.

We know that, in an effort to balance the books back then, decisions were made to do away with nurses: a thousand fired out of the workforce and another 573, to be precise, were driven from the province because of the working conditions. And, of course, at that same time, ironically, while our government is funding a feasibility study to see if a medical school in Brandon is appropriate, the decision that was made by members opposite to balance the books, Mr. Speaker, was to cut the medical school down from 85 seats to 70 seats.

\* (11:30)

So I must say, Mr. Speaker, while on the one hand I celebrate the member from Brandon West on the journey he's been on with his daughter, I need to say that his words ring so very hollow when he suggests then, that, perhaps, his party would suggest that we don't need to celebrate buildings, we need to celebrate health professionals when we know that when given the opportunity their attitude was about getting away or moving away from having nurses in the workforce and, indeed, hacking and slashing the opportunities for doctors to become educated. So I just would suggest—and while we're on the subject, I would suggest, Mr. Speaker, buildings don't heal people. This would also be consistent, I hasten to add, that the policy at that time, in addition to dumping nurses and hacking medical school spaces was to freeze all construction on health facilities during that time, freezing health capital and issuing a news release saying, well, essentially we have no choice.

And I respectfully disagree with that, Mr. Speaker, that there are choices that have to be made during uncertain economic times. Our choice is to protect front-line care. Our choice is to push forward with capital construction and then to fill those buildings with newly educated, newly minted, newly recruited health professionals that can work and provide that care that we all so sincerely appreciate when we are arguably at some of the most difficult times of our lives. We know that not only are we now at a count of over 3,000 more nurses working in the province of Manitoba than were working in 1999 and we're at 500 more doctors. We've also been on recruiting missions to the Philippines in particular and brought nurses to western Manitoba where they are indeed thriving and working and building communities and providing care. And we are very, very grateful for those efforts.

So I would suggest to the member that not only can we celebrate the investments that we've made, but, indeed, we should look to what we're doing now and in the future. Arguably, most importantly, in tandem with the new western cancer centre, would be our government's decision to fund oral cancer drugs. And, again, so very interestingly we know that during the election campaign the Canadian Cancer Society called upon all parties to make a commitment and say: Will you fund oral cancer drugs for Manitobans? And we came forward clearly and said, yes, we will. And yet when we go online and see—when we go on—*[interjection]*

And the opposition party is chirping. They're still saying, no. I believe it was a letter written by the member for Charleswood herself that talked about this and talked about that, and griped about this and complained about that, and I've searched with a heat-seeking missile for the one sentence in that letter that would say, yes, the Conservatives will fund oral cancer drugs. And I could not find that sentence. I couldn't find that paragraph. I couldn't find that word, yes, or, no.

And so, Mr. Speaker, I celebrate Brandon today—

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

**Mrs. Myrna Driedger (Charleswood):** I'm pleased to have an opportunity to stand and add my comments to this resolution.

And, Mr. Speaker, I want to say that I'm sure everybody remembers that when the NDP arrogantly came into office in 1999 they promised to end hallway medicine in six months with \$15 million. And after 12 years of NDP rule and billions more pumped into health care, we still have hallway medicine, but we have a lot more problems and these problems also are occurring in Brandon.

Mr. Speaker, the NDP wanted to fix health care when they came into office, but they failed on many fronts. Since the NDP have been in office in Manitoba, 1,800 doctors have left this province to work in other jurisdictions. We see many more broken promises on the way.

And right now, when we look at what the NDP are doing with amalgamating regional health authorities and saying that they're going to save \$10 million over three years, we really were quite startled with their comment that it's only going to be \$10 million over three years. Because it seems to me, Mr. Speaker, that if they were really to do it properly, they might be able to do a much better job of looking at what the savings could be. But, also, they could certainly be doing it with a lot more respect for the front-line health care workers. Instead, we see the NDP jumping on this issue right after an election and doing it in a very chaotic way that is really scaring a lot of people out in the community.

And, Mr. Speaker, this isn't the first time we've heard the NDP make this sort of claim. In fact, in 2000, the member from Brandon East, who was the Education minister at the time, said that school division amalgamation would save \$10 million. So,

again, they pick a number—\$10 million right out of the air. So it sounds awfully familiar, but it didn't save any money. In fact, school division admin costs have grown 36 per cent since then. So we don't have a lot of faith in what this government says and then what it does, because what they're saying isn't working out.

Now, the minister—or the member from Brandon East has conveniently left out a whole bunch of issues in talking about what is happening in Brandon. And my colleague from Brandon West has so aptly said it: buildings don't cure people; people do. After 12 years, what we're seeing, Mr. Speaker, there's a lot of shiny, new edifices out there, all bought with borrowed money, but there's not enough people to staff these buildings. So they're putting money into buildings but they've ignored a very crucial part, and that's the people that you put in them to do the job.

So the NDP like to talk about the money they're putting into buildings, but, in fact, Mr. Speaker, they like to brag about all the health-care investments they're making in Brandon, when, in reality, it's been a very slow process. In fact, after 12 years, Brandon has only seen slow and marginal improvements.

Mr. Speaker, I would like to bring to the member for Brandon East's (Mr. Caldwell) attention the issue of the nursing vacancies, the nursing shortage in Brandon. He forgot to mention this, and it's made headlines in the Brandon Sun, but for some reason he likes to get his, you know, comments on the record about his shiny edifices, but they don't have enough people to actually take care of patients in those buildings.

In fact, Mr. Speaker, a nursing shortage in the Brandon Regional Health Authority is becoming an increasing concern, according to their CEO, and he's saying, while the nursing shortage is felt right across their region, it is most significant in long-term care where the elderly are, where the vulnerable are. And, in fact, they are talking about the possibility of having to maybe shut down admissions to some of the personal care homes because they don't have enough nurses to actually care for patients. In fact, he's also mentioned that they're bringing in agency nurses from out of province to come in and augment their existing staff. And, he forgot to mention that a large number of long-term care nurses are often forced to work back-to-back shifts.

Now, I don't know why the member from Brandon East neglected to mention this. He was so

focused on his shiny, new buildings, but he forgot that there's a nursing shortage and a doctor's shortage in Brandon, and they can't do the job that all the patients so desperately need.

Now, the CEO for the Brandon Regional Health Centre said he hopes they don't have to stop admissions to the personal care homes, but he can't guarantee that it won't happen in the future; it depends how things go.

And, in March, just a couple of months ago, there were a numerous number of nursing vacancies posted on the Brandon Regional Health Centre website. There were, in fact, 52 job posting for registered nurses, eight for LPNs and 12 for psychiatric nurses. Mr. Speaker, that is a huge, huge vacancy for the city of Brandon. And I don't know why the member for Brandon East would neglect to talk about it, because that makes a huge difference in the ability of a hospital and a regional health authority to provide care to people. How can you have shortages like that and sit in his seat, as he did today, or stand in his place and talk about the successes of Brandon when they are struggling with such a significant nursing shortage.

\* (11:40)

And, Mr. Speaker, the health authority is also having difficulty attracting doctors and surgeons, and, in fact, they have one OR closed. They can't do all of the surgeries that they would like to do because, in his shiny, new building that he was talking about, they can't even open one of the new operating rooms. They don't have enough surgeons and they don't have enough anaesthetists.

And, Mr. Speaker, the other concern that has happened in Brandon over the last number of years is the shortage of pathologists and lab technologists and the turnaround time for lab tests. There has been a significant issue with the lab system in Brandon, and because of that, the amount of time some people are having to wait for their lab tests to see whether they have cancer or not, to see when they can get treatment, is a very, very serious concern. And it's too bad that this member did not bother to mention that in the comments he made.

Now, the other issue that is of extreme concern to me, and I would note that Deveryn Ross very eloquently wrote about it in the *Winnipeg Free Press*, and it was about how this NDP government plays politics with Westman's health. And he makes

a really good point. You know, if the NDP were so worried about wait-times, why did they wait so long to mention some things, and why did they wait for an election to introduce some of the policies that were so important to people? You know, they've been—they held over a lot of things to the election rather than putting them in their budget or rather than putting them into policies years before.

One of the really troubling issues for me is the issue of cancer drugs, and, Mr. Speaker, this government, time after time after time, after many years, refused to fund cancer drugs for patients. The people representing CancerCare or the Cancer Society asked them year after year after year to fund cancer drugs. This government actually refused each and every time until it came to this last election when they thought they might lose this election; then all of a sudden the issue of funding cancer drugs in the community became something that was important to them.

Mr. Speaker, I really question the ethics of it, and I question what this government is feeling and should be feeling in terms of what they did because what they did is deny people for many years the opportunity to get cancer drugs, and I think it's shameful. And while the Minister of Health (Ms. Oswald) likes to stand in here and crow about that, she was the one that refused it, year after year until this election.

Deveryn Ross is right. If people choose to read his editorial on September 14th, 2011, they will see where he talks about how this NDP government plays politics with people's health in Westman. And the member from Brandon East didn't mention that at all.

So the arrogance of this government, the arrogance of this member's resolution in forgetting to mention some of the significant parts of Brandon East, I think speak a lot to how this government is doing business.

**Mr. Speaker:** Order, please. Order, please. The honourable member's time is expired.

Is the House ready—the honourable member for Spruce Woods.

**Mr. Cliff Cullen (Spruce Woods):** Certainly I welcome the opportunity to put a few words on the record in regard to the resolution brought forward by the member for Brandon East (Mr. Caldwell). And clearly we know the history of the NDP here in

Manitoba, and we know their political maneuvering and the things they do about—in regard to politics on the backs of people in Manitoba. And with the NDP, Mr. Speaker, it's all politics, all the time.

You know, we on this side of the House believe in results. You know, when we as legislators and you as the NDP government, through you, Mr. Speaker, are investing taxpayers' money, we want to make sure we're getting value for the use of taxpayers' money. And we can clearly see that through this resolution, the NDP have certainly spent money in Brandon, in the community of Brandon.

But we're interested in the results in terms of the value we're getting for the money that's being spent there. Clearly, the member for Brandon East, in his resolution, is talking about the infrastructure in terms of the building, the new building they have there and some of the renovation work they've completed. Certainly, it doesn't always appear to be on time and on budget as we usually like to reflect upon. And, certainly, the—you know, the member for Brandon West (Mr. Helwer) clearly pointed that out; in some of the renovation work there that was initially supposed to cost \$1.5 million, we're now at over \$12 million and the job and the task at hand hasn't been completed yet, Mr. Speaker.

It's really about results, and I know the government of the day, they—you know, they made some promises. They made some promises back in 1999 that they were going to end hallway medicine in six months for \$15 million, Mr. Speaker. *[interjection]* Well, that is a joke, because here we are. In fact, I'm getting letters from constituents and phone calls from constituents even yesterday and today. And we're having 91- and 94-year-old ladies being shipped out of hospitals into other hospitals for short periods of time, and the families are very concerned about that and they have a right to be concerned about that. They're not sure that these elderly ladies are going to be up for the transfer.

So we must question the money that we're pouring into health care these days. And what about the results we're getting? Well, we know, Mr. Speaker, that the NDP government has closed 18 emergency rooms throughout Manitoba. Those emergency rooms still remain closed, and you're right; those particular issues were not addressed in the resolution. By closing 18 emergency rooms around the province, which are going to put a lot of additional pressure on health-care facilities around the province—the ones that remain open, and I

am certainly concerned about, you know, my constituents who call me and they're fearful for their family and their elderly members of their family that have to be moved from location to location. And we're not sure exactly what the answers are and we're not really sure what's causing this. You know, there's some concern that maybe patients from Brandon are being transferred out to some of these rural hospitals, health-care facilities, and as a result, some of the people in those existing hospitals are having to be transferred to other hospitals without emergency rooms. So we're not just sure, you know, what's causing all this shuffle that's had to happen in a very quick manner.

And the other issue here that the families are concerned about is the lack of communication. You know, there should be a proper process in place where families are going to be notified if members of their family are going to be moved. And not just phone them and say, you know, in 10 minutes or 20 minutes we're going to move your 94-year-old mother to another facility 40 miles down the road. That's not something that should be happening. And that's the point that the member for Brandon West was making. It's about having people in place to make sure that we're dealing with patients. And quite frankly, Mr. Speaker, it's not about glass and steel and metal; it's about patients; and it's about how we deal with patients; and it's about how those patients are handled in terms of their health-care needs.

And that's very critical, and that's something that—you know, the member for Brandon East (Mr. Caldwell), his resolution talks about the building component, but it doesn't talk about patient safety and patient care. And that's really where, when we think of investing in health care, the health-care dollars should be made sure that we are dealing with patient care and patient safety. And that's where the politics come into play, Mr. Speaker. We know the member for Brandon East is raising this, and he does from time to time, saying—talking about the money they're investing in Brandon, but we're interested in the results, what they're getting in terms of health care, and we know the challenges that other communities are facing.

I look at the community of Carberry—just down the road from Brandon, in fact—and, because they have a lack of physicians, sometimes a lack of nurses, there, they're forced to load up their patients out of the hospital on weekends, transfer those patients to another hospital, then, when Monday rolls

around again, they go and they pick up those patients in the ambulance, take them back to the hospital—the facility in Carberry. I ask you, Mr. Speaker, is that improving health care in western Manitoba?

I'm not sure that the member for Brandon East—I'm hoping he will take time to listen to what we're saying on this important issue, because quite often the government looks at things with rose-coloured glasses. And they're afraid—quite frankly, Mr. Speaker, they're afraid to look at the reality and what is actually happening out there to people of Manitoba. And this is a classic example where they appear to be patting themselves on the back with this resolution for spending money; meanwhile, we have elderly people in rural Manitoba, close to Brandon who are spending times being shuffled up and down the highways in the backs of ambulances.

\* (11:50)

So, Mr. Speaker, we are a long way from their promise of 1999 to end hallway medicine in six months with \$15 million. We're not even close. In fact, I think we're going backwards because now we have our seniors travelling up and down the highways in the back of ambulances. And I believe families of those people have a right to be concerned about health care in Manitoba and the families feel very—they haven't been treated well and it's a system, quite frankly, I think, in chaos.

And I think it's incumbent upon the government to listen to the people that are working within health care. There's a lot of people there that obviously are hands-on in health care. They have a lot of good ideas, a lot of initiatives, how we can better use the money that we're investing in health care, how we can better deal with patient safety, patient health care, but this government refuses to listen to those people. This government is intent on building bureaucracies around health care so we have fewer people working front lines than we ever have, but we have a larger bureaucracy than we've ever had. And, quite frankly, Mr. Speaker, the bureaucracy doesn't lead to better health care in Manitoba.

So I think if the member for Brandon East was truly honest with himself, when he would have sat down and looked at how he was going to word his resolution, he would have talked more about the people and that the people that are in the health-care system, the people that we are dealing with on a daily basis, the patients, instead of talking strictly

about dollars and cents that they've invested in buildings.

Now, we do have a lack of communication, in terms of the health-care system. We have a huge health-care system but we have a lack of communication. We have a lack of communication between the bureaucracy and the government, and we have a lack of communication between staff, bureaucracy, and government. And we have a lack of communication between the staff and the patients in health care, and the public is becoming more and more concerned about that.

And I hear from health-care workers within the system and there's a high degree of frustration in that health-care system. Those people are, quite frankly, fed up that they can't—they don't have anyone to talk to. They have lots of good ideas but they have no one to talk to, to provide the information to them.

So there's a lot of frustration, both from the patients' side and also with the staff side. And I wish the member for Brandon East would have noted some of these important issues in his resolution. There is certainly room for improvement, there's no doubt about that, Mr. Speaker. It's not about spending money, but it's about spending money wisely. Thank you very much.

**Mr. Speaker:** The honourable member for La Verendrye.

**An Honourable Member:** No. Arthur-Virden.

**Mr. Speaker:** Pardon me. Arthur-Virden.

**Mr. Larry Maguire (Arthur-Virden):** Mr. Speaker, you know, there's one line here that I do agree with and that is, in this resolution, and that is that the health care is a top priority for all Manitobans. But if I had corollary on that, I'd say except for the New Democrats.

Mr. Speaker, it's very obvious that the government has allowed this situation, this system that we're in, to be very clogged at times, if you will. I know in regards to the shortage of staffing in my own region, in the Assiniboine and Arthur-Virden, we have now, you know, we had to have public meetings to get attention to the government, to bring them back to the fact that we had seven doctors in Virden. Now we've got some staff that's been improved in Melita and the doctor situation seems to be holding its own, but we're over 150 nurses short in



the RHA in the—what was the Assiniboine Regional Health Authority alone this spring. I think the number was 176 that was recorded in one the papers this spring and this is a very disconcerting system—the situation to put persons in that are seeking health care in Manitoba.

Mr. Speaker, if I could say that the—we've had to deal with a number of ambulance systems. There's circumstances where—near the Saskatchewan border, where we're going back and forth, Mr. Speaker, that doesn't make it—that would allow me to say that the progress made in improving access to health care in Brandon wouldn't be what these people would see.

I have a circumstance, Mr. Speaker, where, even this week, one of my neighbours passed away, and he was, actually, a situation where, having been off work even all last week with congestion, the situation is that he didn't make it to the Wednesday appointment this week. He passed away on Sunday afternoon.

And I think that we need to be very cognizant of the type of service that we're providing, Mr. Speaker. There's a lot of money being spent in regards to health care. The federal government is sending exceptional amounts of funds to Manitoba in regards to health and education transfers, and the point I'm trying to make is that with all of this money, it's a—it's the matter of priorities on how it's spent that is the most important situation.

Now, I know that money has been spent on edifices in Brandon and improvements have been made to the safety in some of the health—in the building itself, and I know we've got some very extremely talented doctors in that region, that the nursing staff—of which I've had family involved in—is exceptional in regards to their care for the patients that—once they get there. But, Mr. Speaker, talking about nice buildings and more ambulances and newer ambulances are pertinent, I guess, to the discussion, but they don't really take care of patients when they walk in the door.

And so when we're looking at priorities, the top priority should be to make sure that we have trained doctors, doctors—enough doctors that they can actually work regular shifts without a tremendous amount of overtime. There will always be

circumstances where an operation will take longer, complications will arise, staffing will be required on an emergency basis in that regard, but we need to provide better systems so that we don't have as many people coming through our emergency rooms as what we've had. And I think that until we get to that point and that the government of the day here in Manitoba realizes that it's the priority on how these dollars are spent that is the most important issue, then we will continue to have lineups in health care, we will continue to have situations like I just described, and we will continue to have those in remote and rural areas that aren't getting the same kinds of services.

And I only go back to the fact that, you know, the member from Brandon East may feel that there's been a, you know, an improvement in Brandon, but it comes at the expense of closing 12 or—well, I guess it's 18 now—emergency rooms in rural Manitoba. And I think, Mr. Speaker, that that's a—that's something that the member forgot when he was trying to—or whoever he had draft this resolution for him—because I think it's a—you know, we could urge the provincial government to continue to build on its accomplishments to further improve health care. Well, you know, we certainly could, because they're not anywhere close to what's needed, and I'm glad that the member from Brandon East, you know, in some way, shape or form, recognize that.

And so that's why I wouldn't vote for this resolution, Mr. Speaker. There's so much that needs to be done still in the future of health care. In looking at it, the government could, I think, could take a lesson from the federal ministers that are looking at this from across Canada—the premiers, actually—and I'm quite pleased to see that Premier Wall and Premier Ghiz from PEI and—Saskatchewan and PEI are the ones that are leading the innovation clause amongst premiers, the innovation committee to deal with innovative ways of providing new health care in Manitoba.

**Mr. Speaker:** Order, please. When this matter is again before the House, the honourable member for Arthur-Virden will have four minutes remaining.

The hour being 12 noon, this House is recessed till 1:30 p.m. this afternoon.

**LEGISLATIVE ASSEMBLY OF MANITOBA**

**Tuesday, May 29, 2012**

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