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of the
Legislative Assembly of Manitoba
DEBATES
and
PROCEEDINGS
Official Report
(Hansard)

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Speaker*

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MANITOBA LEGISLATIVE ASSEMBLY
Forty-Second Legislature

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

LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, November 19, 2020

The House met at 1:30 p.m.

Madam Speaker: Good afternoon, everybody. Please be seated.

ROUTINE PROCEEDINGS

INTRODUCTION OF BILLS

Bill 216—The Public Health Amendment Act (2)

Mr. Wab Kinew (Leader of the Official Opposition): I move, seconded by the member for Union Station (MLA Asagwara), that Bill 216, The Public Health Amendment Act (2); Loi n° 2 modifiant la Loi sur la santé publique, be now read a first time.

Motion presented.

Mr. Kinew: Madam Speaker, this bill will streamline public health in Manitoba by removing political interference.

When passed into law, this bill will ensure that elected officials cannot interfere with the orders of public health officers and give Manitobans confidence that the rules are coming from the public health experts themselves.

I look forward to this bill receiving the unanimous consent of the House.

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

Committee reports?

TABLING OF REPORTS

Madam Speaker: And I have a report to table. I'm pleased to table the following report: The Annual Report of the Manitoba Advocate for Children and Youth for the fiscal year ending March 31st, 2020.

Ministerial statements?

MEMBERS' STATEMENTS

John Kent

Mr. Shannon Martin (McPhillips): Today, I am speaking in honour of flying colonel John Kent, who was born in Winnipeg on June 23rd, 1914. John Kent began flying when he was only 15 years old under the guidance of Konrad Johannesson, who had flown with

the Royal Flying Corps in the Royal Air Force in the First World War.

In November of 1931, at the age of 17, John Kent became the youngest licensed pilot in Canadian history. This feat was echoed in 1933, as John Kent became the youngest commercial pilot in Canada as well.

In 1933, he was selected as a candidate for the Royal Air Force for a six-year duration and was asked to make his way to London. It was a painful parting for John Kent and his mother, as he had been her sole family member during the four long years his father was away during World War I. Four years later, in October 1937, he was posted to the Experimental Section of the Royal Aircraft Establishment at Farnborough for test pilot duties and was among the best pilots in the entire Royal Air Force.

After his time at Farnborough and with the Second World War having just begun, John Kent was posted to the Royal Air Force Northolt as commander with the newly formed No. 303 Polish Squadron. He also learned the Polish phrases for all the procedures involved in take-off, flying and landing, in fact writing them down on his own knee pads in order to have them as a handy reference. This amused the Polish pilots considerably, and for his efforts, they named him "Kentowski".

No. 303 Polish Squadron became the highest scoring of all squadrons in the Battle of Britain, destroying 127 aircrafts in six weeks while only losing eight of their own pilots.

In February 1941, Commander John Kent learned he was to be awarded the *Virtuti Militari*. This decoration is Poland's highest military award, as well as the oldest military decoration in Europe.

Please join me in recognizing Winnipeg-born flying colonel John Kent and his Polish flying comrades for dedicating their lives to service in the military in their work and sacrifice to protect our freedom.

Thank you, Madam Speaker.

BITSA Legislation

Mr. Mark Wasyliv (Fort Garry): Madam Speaker, on November 5th, my colleagues and I remained in

the legislative session until early the next morning, voting against the passage of Bill 2, The Budget Implementation and Tax Statutes Amendment Act, or BITSA.

BITSA grants millions of dollars to wealthy private businesses for child care, which will lead to less affordable and inaccessible care for Manitoba families. This favouritism of the private sector disadvantages the non-profit centres that have policies and standards in place for accessible child care.

Through BITSA, the Pallister government raised Manitoba Hydro rates nearly 3 per cent without going through the Public Utilities Board, which is the common practice. This independent oversight from the PUB protects Manitobans from skyrocketing hydro rates.

BITSA also allows the Pallister government to dictate budgets for democratically elected school boards. This overrides the voters of Manitoba and thus imposes a budget that doesn't reflect the values of local communities.

BITSA also strips autonomy from regional health authorities and post-secondary institutions. Student unions work collaboratively with administrators to ensure the needs of all students are heard, including those who are marginalized and vulnerable, and BITSA threatens this bargaining process.

This omnibus bill negatively impacts several other acts here in Manitoba. This is shameful of the Pallister government. BITSA weakens the autonomy of institutions and allows for this Cabinet to take away the voices of Manitobans.

Madam Speaker, during one of the most challenging times we will ever face as a province, this government proves just how out of touch they are when it comes to representing Manitobans.

My colleagues and I will continue to advocate for referendum processes when it comes to changes with Manitoba Hydro and advocate against detrimental changes to health care, education and child care.

Thank you.

IREUSE2

Hon. Jeff Wharton (Minister of Crown Services): Madam Speaker, I rise in the House today to honour Nikki Buchannon from East St. Paul in recognition of her success and international recognition of her new Manitoba cutlery company, IREUSE2.

IREUSE2 is a luxury, eco-sustainable cutlery brand specializing in on-the-go luxury cutlery sets. This rookie Manitoba company was honoured to be part of one of North America's biggest sporting championships, as their cutlery sets were part of a \$20,000 swag bag at Super Bowl LIV. This opportunity was a dream come true for Nikki and her fledging brand.

IREUSE2 began a few years ago as Nikki and her husband, Jamie, were winding down their 24–25-year career in fast food takeout business. The waste produced in the industry startled them as they became more conscious of the packaging, napkins and plastic cutlery.

In the final years of business, they switched to reusable containers, and in September 2019, they retired, only to forge another path. With their growing concern for the environment and the fact that they weren't ready to stop and settle down, the couple jumped into reusable cutlery, but with an upscale flair, giving a functional option that eliminates waste.

Madam Speaker, focusing their attention online to resource customers, they created a website and then reached out to social media influencers. A chef in California did a giveaway with an IREUSE2 set: publicity. This led to one of the chef's followers buying a set and taking it to a party. Through these chains of events, the product got into the hands of the organizers of the Super Bowl LIV, and the rest was history.

Nikki says that she enjoys—what she enjoys most about the business is the fact that IREUSE2 is making an impact on the way people think about using plastic utensils.

I would like to ask my colleagues to join me in acknowledging Nikki Buchannon on this great accomplishment.

Thank you, Madam Speaker.

Pandemic's Impact on the Homeless

Ms. Danielle Adams (Thompson): Madam Speaker, this pandemic has hit all Manitobans hard, but it has affected some Manitobans more than others.

The homeless population in particular has been negatively impacted by this pandemic, with many shelters having to lower their capacity in order to adhere to social distancing guidelines, meaning there are more people on the streets. Many communities have noticed various homeless camps springing up around the province, notably in Winnipeg.

COVID has pushed many people on the brink of homelessness onto the streets for several factors: first, that the pandemic has led to many people losing their sources of income; second, it is well documented that mental health is a major determining factor when it comes to homelessness, and many people's mental health have worsened due to the isolation brought on by the pandemic. These factors, combined with the fact that the Province's ban on rent increases and evictions has ended meant more people will end up on the streets.

Despite the disproportionate impact this pandemic has had on the Manitoba homeless population, the government has failed to take meaningful action to support them in—providing no substantial supports for those who need it. In fact, instead of looking for help, this government is actively worsening the homeless people's access to affordable housing.

The Province left 1,700 provincially owned units vacant as 9,000 people sat on the wait-list. They recently announced they're looking to appraise some 16,000 units, meaning they're looking to sell them off. Additionally, 310 above-guideline rent increases proposed this year were approved.

* (13:40)

The Province—of the 5,000–20,400 units affected, seeing more than 10 per cent increases. To make it worse, many of these increases occurred in—are occurring in the midst of the pandemic and have left people unsubstantially—funds situation.

Every human has a right to safe housing, and right now the PC government is failing vulnerable people. That's why, today, I'm calling on the provincial government to increase supports and—for people experiencing homelessness—

Madam Speaker: The member's time has expired.

An Honourable Member: Leave.

Madam Speaker: Is there leave to allow the member to complete her statement?

An Honourable Member: No.

Madam Speaker: Leave has been denied.

Asymptomatic Testing for COVID-19

Hon. Jon Gerrard (River Heights): Madam Speaker, 11 months ago, as detailed in Bob Woodward's book *Rage*, the United States had intelligence the COVID-19 virus was extremely dangerous. A major reason was the best estimate from

China that 50 per cent of individuals who were infected had no symptoms.

In the Canadian Medical Association Journal, Dr. Marukas [*phonetic*], a leading infectious disease specialist, writes, an effective strategy for stopping the spread of this coronavirus must focus on detecting both individuals with and without symptoms.

She continues: For an aggressive test-and-trace strategy to be effective, resources must be available to proactively identify and test all close contacts of individuals newly diagnosed with SARS-CoV-2 infections. This will make a difference in part because anyone identified with a positive test can have their contacts traced. This is important to slowing virus spread.

Further, as Dr. Sandhu [*phonetic*] says in the National Institute of Ageing's Iron Ring report, up to 50 to 70 per cent of residents who test positive for COVID-19 in personal-care homes are asymptomatic.

To prevent further devastation to their seniors, on June 9th Ontario called for the testing of all residents and all staff at personal-care homes as soon as an outbreak was detected. I have repeatedly called for this, yet our provincial government has failed to do this more than five months later. Residents in personal-care homes are at the very highest risk of death from COVID-19. Manitoba must implement best practices from Ontario.

Madam Speaker, 190 Manitobans have already died from COVID-19 infections. I urge the government to recognize that asymptomatic spread is important and to act today on these recommendations.

Merci. Miigwech. Thank you.

ORAL QUESTIONS

COVID-19 and Personal-Care Homes Routine Testing for Staff and Residents

Mr. Wab Kinew (Leader of the Official Opposition): Madam Speaker, Manitoba is one of the few jurisdictions in Canada that does not mandate regular testing of staff in long-term-care homes.

Now, I take for granted that we all care very much about the lives of seniors in the province and we do want to do everything we can to help those folks living in long-term care, whether they're seniors or people living with disabilities or people living with dementia.

We have seen the toll so far on our personal-care homes: 220 cases at the Maples, more than 40 deaths, which, unfortunately, ranks Maples as one of the

highest homes with deaths anywhere in the country; even more at Parkview and other care homes across the province.

Will the Premier learn from the best practices of other jurisdictions and do regular routine testing of staff and patients in long-term-care homes?

Hon. Brian Pallister (Premier): I'll continue to take the advice of Dr. Brent Roussin and our health leadership team on these types of issues.

I appreciate the member raising the concern, and I'm sure it's an area of interest and concern as well to our leading health experts. And so I'll continue to act, and our government will continue to act, on the best advice from the most knowledgeable people.

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

Mr. Kinew: Madam Speaker, Ontario long-term-care homes were hit very badly in the first wave of the pandemic and, as a result of military intervention, reports from those Armed Forces, as well as the public health advice in that province, they have implemented mandatory routine testing of both staff and residents of long-term care.

This is something that the Ford government in Ontario has done. This is something many other jurisdictions across Canada has done as well. These are best practices. These are lessons learned from the damage that we have seen in long-term care.

Now that we see cases continue to increase at personal-care homes in Manitoba, we need action, and we need action that is informed by the lessons learned in other crises that have unfolded similarly.

Will the Province of Manitoba, under this Premier's direction, adopt this best practice and implement routine testing of staff in personal-care homes today?

Mr. Pallister: I appreciate the member raising the issue.

As I said earlier, we'll continue to follow the leading health experts' advice in our province. I think it's not unfair to mention, though, Madam Speaker, that the previous NDP government postponed necessary improvements and capital investments in seniors' care homes and—in fact, right to the point of not putting in sprinkler systems.

So, Madam Speaker, we have committed a \$280-million capital program to invigorate the safety within our personal-care homes. And this is also

very important, I think the member opposite would agree, for protecting seniors.

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

Mr. Kinew: Madam Speaker, this is a Premier who would rather have his staff do opposition research than invest in personal-care homes, because we know what the record is: they actually cut \$1.6 million from personal-care-home funding in the Southern Health region alone. There's probably millions more cut from all the other health regions.

Now, rather than investing, they send their Minister of Health onto Twitter with a misleading graph. They send him out onto Twitter to tell Manitobans that the COVID situation has plateaued.

Unfortunately, we know that that is not true. We know that investments are needed. We knew that learning from the best practices are needed as well.

We know that best practices tell us that there should be mandated, routine testing of staff and residents of personal-care homes.

Will the Premier take steps to protect our seniors today?

Mr. Pallister: Well, as far as the partisan preamble is concerned, Madam Speaker, it just serves to illustrate that the members opposite can't seem to get their focus on fighting COVID. They just want to fight political battles.

Madam Speaker, I think it's only fair for—*[interjection]*

Madam Speaker: Order.

Mr. Pallister: —the member for St. Johns (Ms. Fontaine) to know and to recognize, quite frankly, that the previous—*[interjection]*

Madam Speaker: Order.

Mr. Pallister: —government's investments in things that didn't matter to people were enormous. Their ability to run massive deficits and to run—and create massive debt was incredible. Their—*[interjection]*

Madam Speaker: Order.

Mr. Pallister: —appetite for raising taxes on seniors was never satisfied.

And, Madam Speaker, so when the member rises to say he's ready to defend seniors, he should do it

rather than fight partisan battles that have nothing to do with protecting seniors.

And the—[interjection]

Madam Speaker: Order.

Mr. Pallister:—member for St. Johns (Ms. Fontaine) chirping from her seat, Madam Speaker, does nothing to actually advance the safety of our seniors but, frankly, demonstrates her own panic and frustration on a daily basis here in the House.

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

Northern Manitoba Communities Resources for Combating COVID-19

Mr. Wab Kinew (Leader of the Official Opposition): Well, Madam Speaker, if the Premier wants to stand up for seniors, he'll have his chance at the end of the day today. He can vote in favour of the opposition day motion that our esteemed colleague from Union Station is bringing that will necessitate the government to take over the Revera care homes, where that company has failed, and to do whatever it takes to protect seniors. So I look forward to him voting in the affirmative.

Now, there's a very concerning situation unfolding in the Opaskwayak area in the Kelsey RM. We know that the military has been activated in this region. Military resources will be deployed here in Manitoba on the reserve. However, there are many communities that fall within provincial jurisdiction that also urgently need health-care resources as well.

Can the Premier stand in his place today and commit that every nursing request, every health-care-aide request and every resource necessitated by this region will be delivered by the Province?

Hon. Brian Pallister (Premier): Well, the member opposite had the opportunity, of course, to have all this information made available to him because of our generous offer of a briefing the other day. And I'm sure that if he had not been so occupied in taping the proceedings without the knowledge of our senior health officials, he might then have been able to have this question answered a couple of days ago.

I'm happy to tell him that we are working closely with the federal government in support of OCN, that we're working closely with the federal government in a number of ways—in fact, not just to work on OCN, but also in the region, because, of course, as we know, The Pas and OCN are close cousins.

And so the fact of the matter is the situation, Madam Speaker, is being addressed through assessment by the federal government. Parts of the responsibilities are federal, but nonetheless we are working with the federal government to address these situations and we'll continue to co-operate with not just the federal government, but with their agencies in looking after the best methods—pursuing the best methods, to protect the folks of that area and all areas of the province.

*(13:50)

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

Mr. Kinew: On December 12th, 2008, Madam Speaker, the Premier voted in favour of a motion to support Jordan's Principle in the House of Commons in Ottawa.

What Jordan's Principle says is that you should deliver health care to the people who need it immediately and worry about who pays for it later. That's why it's disappointing to hear the Premier say today that he's willing to take a back seat to the federal government when there are Manitobans who need assistance right now. Boots from the provincial government should've been the first on the ground.

Now, the questions remain about how long will the military need to be activated in OCN and there are outstanding questions about the need for nurses, health-care aides and other resources in the surrounding provincial-jurisdiction communities, we need a strong commitment today, not taking the back seat.

What will the Premier tell us in terms of when those provincial resources will be on the ground to make a difference for all those people in Manitoba?

Mr. Pallister: Already happening, Madam Speaker: working with officials there, with the Canadian Red Cross, with the federal government; deploying rapid testing, deploying additional nurses to OCN.

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

Public Health Amendment Act Request for Government Support

Mr. Wab Kinew (Leader of the Official Opposition): Just a few minutes ago, the Premier acknowledged that the calls made by doctors several weeks ago in Manitoba were, in fact, the right moves. And through the people of Manitoba raising their

concerns, through the good work of doctors and nurses raising their concerns, finally someone listened to them. The doctor—Dr. Roussin, in fact, listened to them.

But why did it take so long, Madam Speaker? Was it the fact that they had a Minister of Health questioning the motivation of those physicians? Was that what delayed the Premier's action so lately?

Manitobans want to know why did we lose precious weeks in the fight against COVID-19. It certainly seems as though political interference in the public health orders played an important role. We're bringing forward a solution today: Bill 216.

Will the Premier simply vote in favour of Bill 216 to ensure that there is no more political interference when it comes to public health in Manitoba?

Hon. Brian Pallister (Premier): Well, the only political interference that's been put in evidence here is the evidence the member produces every time he gets up on his feet, Madam Speaker.

The fact is that Dr. Roussin and our senior health officials are working in partnership with our government, that we are a team, that there is no light between us. And no matter how the members opposite try to partisan this issue, we are united in fighting against COVID and will continue to be.

Madam Speaker: The honourable member for The Pas-Kameesak.

Ms. Amanda Lathlin (The Pas-Kameesak): Can you hear me?

Madam Speaker: We can.

Northern Manitoba Communities Resources for Combating COVID-19

Ms. Amanda Lathlin (The Pas-Kameesak): We continue to learn more about the devastating situation taking place in our northern community. As we learned earlier this week, all residents at the OCN personal-care home and a number of staff have tested positive for COVID-19.

But the spread isn't stopping there. The situation in surrounding communities is deteriorating, with many more positive cases occurring in Moose Lake, Grand Rapids, and other neighbouring communities are dealing with outbreaks.

The feds are doing their part by sending in the military to OCN, but will the Premier do his?

Why is the Premier failing to take care of Manitobans' northern residents?

Hon. Cameron Friesen (Minister of Health, Seniors and Active Living): Madam Speaker, simply not true. We are doing our part, as everyone is, coming together as good Manitobans and Canadians in addressing the situation.

I can update all members of the House and indicate that even the Chief Provincial Public Health Officer continues to have contact with the grand chief. There are boots on the ground.

I look forward in my next questions to be able to indicate to that member and all members precisely what kinds of resources are being marshalled in order to do our part and help keep those people as safe as possible.

Madam Speaker: The honourable member for The Pas-Kameesak, on a supplementary question.

The honourable member for The Pas-Kameesak, on a supplementary question?

We have, due to technology, lost the member momentarily, and I think, if everybody's okay with it, we will move on to the next one and then, when she's back on, we will come back to finish her supplementary and final supplementary questions.

An Honourable Member: I'm back.

Madam Speaker: The honourable member for Union Station (MLA Asagwara)—oh, hang on one sec—I think she's back.

The honourable member for The Pas-Kameesak? The honourable member for The Pas-Kameesak, on a supplementary question?

Ms. Lathlin: Second question?

Madam Speaker: Yes, go ahead.

Ms. Lathlin: Isolation centres in The Pas are beginning to fill up fast with people from outside communities trying to isolate. These communities are provincial responsibility. We need all-hands-on-deck approach to get the situation under control.

Sadly, on Tuesday the Minister of Health tried to defer all responsibility of the OCN outbreak onto federal government. But I'll remind the minister with this document I'll table that his government and their Premier brought forward a resolution that urged the government to fully support Jordan's Principle and its implementation in order to provide necessary care for all children in Manitoba.

Will the Premier (Mr. Pallister) and minister support their own resolution today and open more isolation beds and send in support?

Mr. Friesen: Isolation beds are both in place and more are on the way.

I hope the member has a pen ready, because here it goes: IP&C from the region went into OCN PCH, did an assessment already. The director of ED clinical services went in and did an assessment. We have a dietitian from the northern regional health authority who is involved in providing meal plans, grocery planning. We have our executive director of LTC involved supporting the manager of these homes up there and providing daily updates. We have the executive of NRHA involved in daily calls with the Chief of OCN every day, to everyone's full satisfaction. Two public health nurses have been involved, deployed to OCN on November the 14th, continue to do contact tracing.

There is so much more to say about the ways that we are working to keep OCN safe.

Madam Speaker: The honourable member for The Pas—*[interjection]* Order.

The honourable member for The Pas-Kameesak, on a final supplementary.

Ms. Lathlin: It is not the federal government's responsibility to take care of Manitoba communities, it's the Premier's, so why can't you deploy the necessary resources to help these communities? Well, it's because there aren't any staff there. He fired them all and refused to fill the vacancies.

As I said on Tuesday, the northern regional health authority went into this pandemic with critically high levels of vacancies of 60 per cent and are having to heavily rely on agency staff to continue care. This failure on the Premier's part has led to the dire situation our northern communities finding themselves in today.

Why did the Premier continue to ignore filling these vacancies and will you act today and deploy the necessary health-care officials to the region immediately?

Ekosi.

Mr. Friesen: Well, Madam Speaker, we reject the member's assertions because they're incorrect and, obviously, she couldn't find a pen. I ask her to find one now. We'll continue our list. *[interjection]*

It's become apparent to me that even the Department of Families has redeployed staff into the OCN area, so while the member for Point Douglas (Mrs. Smith) continues to chirp from her seat, I'll continue to list the ways in which our government is working and responding. *[interjection]*

Madam Speaker: Order.

Mr. Friesen: More public health nurses deployed to the Moose Lake area to do contact tracing there since November 16th, and they continue. The Families staff that has been redeployed. The director of public health engaged in supporting the OHA staff and leaders on every aspect of this outbreak. Yesterday, the Canadian Forces undertaking to do an assessment of the situation.

So, while the NDP continues to chirp and do nothing, we'll continue to be there with boots on the ground helping OCN. *[interjection]*

* (14:00)

Madam Speaker: Order. Order.

Pandemic Management Health Minister's Record

MLA Uzoma Asagwara (Union Station): Madam Speaker, intensive-care doctors have been warning this government for months that our hospitals and critical care do not have what they need to withstand this pandemic.

The minister discounted their advice, questioning their motivations. The minister says that those docs are just trying to cause—*[interjection]*

Madam Speaker: Order.

MLA Asagwara: —chaos in the health-care system. The minister, of course, is wrong, and the minister continues to be wrong.

Just yesterday, he put out a statement on social media that the numbers appear to have plateaued, despite low testing and rising test positivity.

Why is the minister continuing to mislead the public in the midst of a public health emergency?

Hon. Cameron Friesen (Minister of Health, Seniors and Active Living): Madam Speaker, there they go again, reflecting on those who are bravely leading our health-care pandemic planning.

It was not my term. There's no freelancing—*[interjection]*

Madam Speaker: Order. I cannot hear.

Mr. Friesen: There's no freelancing here, Madam Speaker. That term that the member's referring to was the term used by the Chief Provincial Public Health Officer when he reflected on the fact that the daily rolling average of cases in this province is about 400, which is too high. One week ago, it was 400, which is too high.

Clearly, that is why we are bringing the orders. But the word plateau belongs to Dr. Roussin. *[interjection]*

Madam Speaker: Order.

The Speaker is standing, please.

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

MLA Asagwara: I'm actually not reflecting on Dr. Roussin. I'm reflecting on the Minister of Health, the same minister who said that deaths of dozens of our seniors was unavoidable, and the same minister who questions the motivations of the doctors who warn of collapse.

In the minister's words, he and KPMG, and I quote, have got this. But the minister doesn't got this, and yesterday the minister claimed that cases appear to have plateaued, despite inadequate testing, rising test positivity—today 14 per cent—and a record number of people in intensive care.

Someone over there clearly caught on that the minister is again wrong, because the minister deleted the post, and I'll table that, Madam Speaker.

I ask the minister: Why, again, is he misleading Manitobans about the state of this pandemic?

Mr. Friesen: Madam Speaker, everyone grows tired of that member's distortions and half-truths and attempts to mislead.

Madam Speaker, the Chief Provincial Public Health Officer reflected recently on the fact that our numbers were 400, they continue to be 400. That concerns everyone. That is why the new orders brought today. That is why the increased message to Manitobans to stay home.

Clearly, the number is not 812—number—a hundred. These numbers at 400 are not sustainable. They must go down. Lanette Siragusa reflected on this two days ago when she said there is no capacity that we can have at 400 a day. We must get more capacity in our health-care centres.

And that is exactly why we're working so hard right now to get the compliance of Manitobans to get those numbers down.

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

MLA Asagwara: Madam Speaker, it is so obvious that the minister is failing in his duties—his basic duties—during this pandemic. He needs to accept that more could and should have been done to protect seniors and that their deaths were not inevitable.

He needs to support good public health information, not saying that anti-maskers make good points. He needs to lift up our health-care professionals and not question their motivations, Madam Speaker. And he needs to come to terms with an out-of-control pandemic whose test positivity has climbed at alarming rates. He needs to stop misleading the public, Madam Speaker.

So again I ask: Why does the Minister of Health continue to mislead Manitobans about this pandemic? *[interjection]*

Madam Speaker: Order.

Hon. Brian Pallister (Premier): Going for two days in a row, I guess, Madam Speaker.

All I can say is the members are making it pretty obvious that they're not cheering for Manitobans with this line of questioning; *[interjection]* they're cheering for COVID.

The member for St. Johns (Ms. Fontaine) chirps from her seat again and sneers across the way, but she knows I'm right—*[interjection]*

Madam Speaker: Order.

Mr. Pallister: —she knows I'm right, Madam Speaker, and she proves it with her mouth every day here. *[interjection]*

Madam Speaker: Order.

Mr. Pallister: Now, the people in the peanut gallery who advocated for non-symptomatic testing this summer, contradicting our public health leaders, are not helping. They're not—

Some Honourable Members: Oh, oh.

Madam Speaker: Order.

Mr. Pallister: —doctors; they shouldn't pretend to be doctors, Madam Speaker.

Some Honourable Members: Oh, oh.

Madam Speaker: Order. Order.

I'm going to ask the table to stop the clock.

I'm going to ask for everybody's co-operation. I have not been able to hear this last half a minute of the answer being given because of all the heckling and yelling in the House, and so I'm going to ask for everybody's co-operation, please.

I need to be able to hear what is being said, and I'm hoping everybody's going to show respect, because when members are asking or answering questions, I'm sure they want to be heard as well. That's only respect for each other. That's civility, that we tend to lose from time to time.

I'm going to ask everybody, on behalf of all Manitobans who are fighting a big fight out there, let's do this in the right way to show them that we respect what's happening out there and that we are on their side.

Mr. Pallister: Madam Speaker, we're focused on fighting COVID over here. I'd like the opposition to join team Manitoba. Our overall testing capacity is up to 5,000, thanks to this minister. Longest average wait time to make an appointment was 21 seconds yesterday, thanks to this minister. The median overall turnaround time from receiving a test and getting it out has improved by 20 per cent.

We are focused on fighting COVID. I'd like the opposition to get focused on fighting COVID, and stop playing word games and gotcha games and political games, and just get with the program that ninety-nine per cent of Manitobans are focused on.

Everybody but the member for—

Madam Speaker: The member's time has expired.

U of M Faculty Association Collective Bargaining Process

Mr. Jamie Moses (St. Vital): This past weekend, the University of Manitoba Faculty Association reached a tentative agreement with the administration, narrowly avoiding a strike in the middle of the school year.

This happened not because of the government's support, but in spite of the government's interference. Instead of investing in post-secondary education during this critical time, the government continues to undermine public education and public sector unions by interfering in collective bargaining processes, even after their bill has been deemed unconstitutional.

Will this minister retract his interference and allow the university to renegotiate with UMFA in good faith?

Hon. Scott Fielding (Minister of Finance): First of all, we're happy that there seems to be a tentative agreement. That agreement is being voted upon, upon those members over the next week. I'm going to leave those comments to it. It seems like there has been agreement that hopefully can be reached out.

We, of course, are not the employer in the situation. We've taken the approach that other governments—in fact, the NDP have as well: that's setting broad public-sector mandates. That's something that's been done in this province for many, many years.

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

Mr. Moses: Provincially, enrolments in post-secondary education are increasing, as Manitobans are looking to retrain through COVID-19 and into new industries.

More than ever, post-secondary education system in Manitoba needs—needs—support from this provincial government, but rather than investing in post-secondary, the Premier (Mr. Pallister) and this minister withheld emergency funding and continues to use the pandemic as an excuse to push forward their austerity plans with interference.

Will the minister commit to immediately ending their unconstitutional interference with the collective bargaining process and provide an arbitrator and work with the U of M Faculty Association?

* (14:10)

Mr. Fielding: Our government is very proud of the fact that we're first in the country, when you look at priority spending for health, education and social services—first in the country, Madam Speaker. In fact, our priorities have invested more than \$424 million in the education system.

There is—seems to be an agreement in place the members will vote on. I'm not going to get in the way of that. That's something that will be happening over the next week with the members.

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

Mr. Moses: We've seen continued attacks on wages and work conditions to our public sector unions and public sector employees. It's not uncommon from this

government at all, as we see them bully these public sector unions for years in the form of under-resourcing, blatant interference in their collective bargaining processes.

Now they're trying to use legislation that has been ruled unconstitutional to justify these attacks.

Our public sector employees have been working tirelessly during the pandemic and even before, and they deserve better.

Instead of pushing for wage freezes and pushing for budget cuts, will this government invest in post-secondary education to help faculty and students?

Will the minister immediately stop his unconstitutional interference and instead invest in our universities?

Mr. Fielding: Our government is first in the country when it comes to spending on priority areas like health, like education, like social services. We're very proud of the fact, Madam Speaker, in these particular areas, we've invested more than \$4.3 billion more than the NDP ever did.

Now, the member hasn't been paying attention in the news. Apparently there is a tentative agreement that's going to be voted upon, upon those members. We're going to let the members make the final decision. We're happy that administration and the faculty association have come up with a tentative agreement that hopefully members will agree upon.

Low Carbon Economy Fund Provincial Investments Inquiry

Ms. Lisa Naylor (Wolseley): Climate change is just not a priority for the Pallister government. The federal government's Low Carbon Economy Fund was announced three years ago. In Manitoba, the fund provides \$64 million of federal money to be put to work in addressing climate change. All the Province has to do is assign the dollars and get on with the work.

Through freedom of information, which I will table, we found that, unfortunately, exactly zero projects have been completed and less than 10 per cent of these funds have been allocated three years after the fund was announced. What a waste.

Why is the minister mismanaging these desperately needed climate investments?

Hon. Sarah Guillemard (Minister of Conservation and Climate): Any chance that I get to stand up and

commend our government's efforts and investments in green projects is always a good day.

Madam Speaker, what the member is speaking of are long-term plans, because it's taken us many years to get to the place we are where we are facing a climate crisis. And we will address those and we have been addressing those by record amounts of investments.

We have a plan moving forward. It was not written on the back of a napkin, Madam Speaker. *[interjection]*

Madam Speaker: I need to be able to hear, and when it comes to hearing people remotely, it's a little extra difficult, so I'm going to ask for everybody's co-operation, please.

The honourable member for Wolseley, on a supplementary question.

Ms. Naylor: Manitobans already know that the Pallister government cannot be trusted when it comes to addressing climate change, but today that fact is even more clear. Climate change and climate change investments just are not a priority for them.

Madam Speaker, \$64 million, funded 100 per cent by the federal government: all the Pallister government has to do is tell us the projects and get on with the work. Instead, here we are, three years later, and less than 10 per cent has been allocated and nothing has been completed. It's a complete failure of leadership.

When will the climate change investments be announced and the work actually done?

Mrs. Guillemard: I think that these comments are very rich coming from the member whose party had let lake—or, Lake Winnipeg fall into such a state of danger for the wildlife there as well as for any future use.

Madam Speaker, I will take no lessons from the NDP on green projects nor the climate situation.

Thank you.

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

Ms. Naylor: Madam Speaker, I'm extremely disappointed to hear the minister speaking about long-term plans for something in which we don't have a lot of time. Climate change is essential. It needs to be acted on now.

In November of 2018, this legislator assented to The Climate and Green Plan Act. It's an woefully inadequate plan, but it did commit the minister to produce a report showing just what her government was or wasn't doing to address climate change.

Two years have gone by. There's no report, and in fact, when we FIPPA'd for the report—and I will table the response—no such records exist. No such records exist?

The minister won't allocate or spend millions of federal dollars available to address climate change, and she won't produce a report showing evidence of any climate change actions, as required by this government's own legislation.

Madam Speaker: The member's time has expired.

Mrs. Guillemard: I would like to point out that the member's party spent 17 years with a target of removing every single vehicle from the road, which was unrealistic, and they made zero progress on their goals. And they were, actually, chastised by the OAG report that revealed that none of their goals that they set could be achieved.

However, Madam Speaker, we are taking innovative new steps that we have achievable goals, and we have set up our carbon savings account, which has been approved and, in fact, Canada is looking at replicating.

So, again, I will take no lessons from 17 years of NDP mismanagement.

Child Daycare Centres Expired Face Masks

Mr. Dougald Lamont (St. Boniface): I recently received a letter from the director of an early childhood education centre, who wants clarity on expired masks.

While schools have a limit of 13 students, ECE centres allow 30 children with no social distancing.

They received three cases of Technologist Choice masks. Last week, Dr. Roussin said to throw them out. I table a November 10th letter from the manufacturer saying not to use them. I also table a letter from the Deputy Minister of Families telling centres to use them anyway and has three links to Shared Health on how to deal with skin injuries from masks.

Why does the Department of Families, just last week, telling ECE centres to use masks that public health and the manufacturer say should not be?

Hon. Brian Pallister (Premier): There are errors that occur in a desire to help, that are—that happen. In an unprecedented pandemic, I would hope every member would understand that that is what is going to happen in an effort to make—to address the—*[interjection]*—address responsibilities that happen in good faith.

Errors in good faith are different from things like secretly recording conversations. That is not an error in good faith. There is a law. Section—*[interjection]*

Madam Speaker: Order.

Mr. Pallister: Section 183 of the Criminal Code of Canada. It says it is illegal to intercept wilfully a private communication.

So I would like the member to understand and be sympathetic to the work our civil servants are doing to try to acquire equipment and PPE and understand that there are errors that may happen in good faith. But there are also errors that happen in bad faith that he should account for today. *[interjection]*

Madam Speaker: People want to burn off question period time, that's up to you, but I would ask for everybody's co-operation, please.

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

* (14:20)

COVID-19 and Personal-Care Homes Asymptomatic Testing and Tracing

Mr. Dougald Lamont (St. Boniface): I defer to the First Minister's expertise when it comes to breaking the law.

As the member of River Heights mentioned, we've been calling for asymptomatic testing for some months. Today, I received this letter, which I table, from a woman whose grandmother is in Golden Links Lodge and has tested positive for COVID. She wrote that, quote, our seniors' lives deserve to be respected and honoured. Mass deaths in nursing homes are not unavoidable. The nursing homes need the staff tested on a regular basis. She goes on: This is the war for my generation, and we Manitobans are sadly on the losing end right now.

Will the Premier abide by best practices, honour this family's plea and do whatever it takes to make sure that our most vulnerable population is safe, starting with asymptomatic testing and tracing now?

Hon. Brian Pallister (Premier): And I'd say to the member that his contradictions to our leading health

authorities in this are not helpful. And I would say to him that what he needs to understand is that what we do need here is support from the federal government in response to the rapid-testing materials that they have promised us they would provide but have yet to do so in any significant number.

And I would ask him to join on team Manitoba, but I would like him to do it in good faith and not unwittingly—or in fact knowingly—record conversations when we make briefings available to him and his party. Now, I understand that there were 14 NDP members in this briefing, and I understand there was one Liberal MLA, but the member needs to investigate to find out if there were others in his employ who were involved in recording that conversation because if he expects future such good-faith briefings, then he has to act in good faith himself.

Judicial Gender-Based Violence Education Request for Government Support of Legislation

Ms. Cindy Lamoureux (Tyndall Park): Madam Speaker, yesterday I introduced legislation that over a month ago I first gave to the minister to consider.

The legislation would (1) require judicial candidates complete education in sexual assault law; (2) candidates for appointment as judicial justices of the peace complete education in domestic violence law; and (3) the implementation of a public and continuing education program for judges and judicial justices of the peace, all who are designated under the Domestic Violence and Stalking Act.

So, Madam Speaker, my question is: I'm just wondering if the government is planning to support this legislation.

Hon. Cliff Cullen (Minister of Justice and Attorney General): I do appreciate the member's question on this front.

Certainly, we're having a look at the legislation that she tabled yesterday. Certainly, the judiciary here in Manitoba, on the provincial judges' side, they do have their own training mechanisms; they are allowed money for the education program. They administer their own education program and that's the way it's been certainly to date. I've had, certainly, a lot of discussions with the chief judge on this front. We will have further discussions and we will look at the member's legislation as well.

PPE for Front-Line Workers Government's Procurement Plan

Mr. Andrew Micklefield (Rossmere): Madam Speaker, our front-line workers have done a tremendous job in working through this pandemic. Our government continues to collaborate with our partners to ensure our front-line health-care workers have the necessary PPE required to continue to fight this pandemic.

Can the Minister of Central Services provide an update to the House on our government's procurement plan?

Madam Speaker: Can I ask who's responding to that? The honourable Minister for Central Services.

Hon. Reg Helwer (Minister of Central Services): Great question, and I'm pleased to talk about our investment in pandemic response.

We continue to invest in planning, prevention and mitigation efforts, and we have and will continue to purchase the supplies and resources needed to help keep Manitobans safe as we continue our fight against COVID-19.

We've set aside over \$400 million for acquiring such equipment, and this is used to purchase medical equipment, including PPE, and other resources in capacity. I'm very pleased that we have been able to collaborate with local businesses in the pandemic response, and this has ensured that as much money as possible has stayed within our province, supporting local employers.

Our government will continue to work with our partners to ensure our health-care workers have the supplies and supports that they need to help keep them safe.

Madam Speaker: I believe that we had about 10 seconds left, so there would be one more question allowed from the NDP, and I think I have the honourable member for Burrows? *[interjection]*

Oh, apparently not. Apparently she's not—*[interjection]*—oh, okay.

Child Daycare Centres Expired Face Masks

Mr. Wab Kinew (Leader of the Official Opposition): Thank you kindly for your wise accommodation, Madam Speaker.

There has been a repeated concern brought to us from multiple public sector employees working in

testing sites, in emergency rooms, in early childhood education centres and in schools. The issue has to do with the expired masks, masks which are causing rashes in some cases, which simply smell funny in others, but were around the—across the board, ruled out by the manufacturer as no longer being effective.

We have a concern brought to us by early childhood educators that some of the daycare centres that have received these expired masks are not getting the replacements to which they are entitled. In fact, the Department of Families is asking for them to prove that they have the expired masks.

Can the Premier simply stand in his place and commit to getting these front-line workers the masks that they need?

Hon. Brian Pallister (Premier): Both I and the member for Fort Rouge know that he had to make up that question on the spot and it's false in every aspect, so I won't address that.

I'll simply use the opportunity, Madam Speaker, quite selfishly, to offer my congratulations to Morgan Tidsbury, who is the baby girl of my baby sister, who just had a baby girl, and her baby girl's name is Rayne. And to offer my congratulations to mom Morgan and also to Auntie Mallory and put that on the record of this place and I thank the members for allowing me to do that. Much appreciated.

Madam Speaker: The time for oral questions has expired.

Speaker's Rulings

Madam Speaker: And I have two rulings for the House.

On March 12th, 2020, the honourable Leader of the Official Opposition (Mr. Kinew) raised a matter of privilege regarding the honourable Government House Leader's (Mr. Goertzen) failure to provide certain information during oral questions on March 10th, 2020, regarding the halted construction of the new Maryland Park School in Brandon due to issues that have arisen with the general contractor, Fresh Projects. He stated, and I quote: When the minister answered questions about Fresh Projects and about the 5797501 Manitoba Limited company, he did not answer directly and in a concrete manner. End quote.

The honourable Leader of the Official Opposition concluded his remarks by moving, and I quote, "that this matter be moved to an all-party committee for consideration." End quote.

The honourable Government House Leader and the honourable member for River Heights (Mr. Gerrard) both spoke to the matter of privilege before I took it under advisement, and I thank all honourable members for their advice to the Chair on this matter.

In order to be ruled in order as a prima facie case of privilege, members must demonstrate that the issue has been raised at the earliest opportunity, and also provide sufficient evidence that the privileges of the House or the privileges of individual members have been breached.

Regarding timeliness, the honourable Leader of the Official Opposition stated that he required two days' time to conduct research so that he, and I quote, may come back to this Chamber with the proper information, end quote, prior to raising this matter of privilege.

Construction of the Brandon school was halted on March 2nd, 2020, and this information was widely available the following day. Therefore, I am not convinced that the issue of timeliness has been met. Accordingly, I am ruling that the condition of timeliness was not met in this case.

Regarding the second condition of whether a prima facie case has been demonstrated, the honourable Leader of the Official Opposition argued that the minister was knowingly declining to provide the facts of this matter and was therefore, and I quote, "infringing on all of our rights here as members." End quote.

I would remind the House that the individual protections for members under parliamentary privilege include: the freedom of speech; the freedom from arrest and civil actions; exemptions from jury duty; freedom from obstruction, interference, intimidation and molestation; and the exemption from attendance as a witness.

* (14:30)

In order for a prima facie breach of privilege to be found, one or more of these individual protections would need to be demonstrated to have been violated.

Based on his comments in the House on March 12th, 2020, the honourable Leader of the Official Opposition appears to have a grievance against the government regarding the content of the honourable Government House Leader's answers during oral questions.

As 'spicker'—Speaker Hickes ruled in 2009, the Speaker is not responsible for the quality or content of replies to questions. Furthermore, Speaker Hickes ruled that a member may put a question but has no right to insist upon an answer.

Speaker Reid also explained in a 2014 ruling, and I quote: It is not up to the Speaker to determine the quality or the contents of a particular answer to a question that may have been posed in this House, and there is no provision in our rules or in the practices that would require or in any way permit the Speaker to insist on certain answers. End quote.

Accordingly, I am ruling that this matter does not constitute a prima facie case of privilege.

* * *

Madam Speaker: And I have a second ruling.

On March 16th, 2020, the honourable Official Opposition House Leader (Ms. Fontaine) raised a matter of privilege regarding the use of a motion to adjourn, moved by the honourable Minister of Infrastructure (Mr. Schuler) during debate on the Poverty Reduction Strategy annual report at the Standing Committee on Social and Economic Development on December 5th, 2019. She stated that it is the responsibility of the opposition to hold the government to account and that in moving the motion to adjourn, the honourable minister thwarted her ability as a member of this House to do her job properly and comprehensively.

The member concluded her remarks and moved, and I quote, that this matter be referred to an all-party committee for further consideration, end quote.

The honourable Government House Leader (Mr. Goertzen) and the honourable member for River Heights (Mr. Gerrard) also spoke to the matter of privilege, which was then taken under advisement by the Deputy Speaker in order to consult the procedural authorities.

I thank all honourable members for their contributions to the matter of privilege.

As the House is well aware, when raising a matter of privilege members must satisfy two conditions for the matter to be ruled in order as a prima facie case. It needs to be demonstrated that the issue was raised at the earliest opportunity and that sufficient evidence has been provided to demonstrate that the privileges of the House have been breached, in order for the matter to be put to the House.

In regards to raising the matter at the earliest opportunity, the honourable Official Opposition House Leader stated that this was the earliest opportunity to raise this issue as she has taken the time to consult with the relevant authorities, conduct research and evaluate relevant information.

Bosc and Gagnon advise on page 145 of the third edition of House of Commons Procedure and Practice that, and I quote, "the matter of privilege to be raised in the House must have recently occurred and must call for the immediate action of the House." As the member points out during her comments, the standing committee in question sat in December of last year. Accordingly, I am ruling that the test of timeliness was not met.

Regarding the second condition of whether a prima facie case has been demonstrated, it has been ruled on numerous times in this House that the opinion of the Speaker cannot be sought about matters arising in committees and that it is not proper for the Speaker to exercise procedural control over committees.

Speaker Rocan made such a ruling in 1989, in 1993 and in 1994. Speaker Hickes also made five rulings—twice in 2004, once in 2005 and twice in 2006—and as your current Speaker I have delivered similar rulings, including earlier this session.

Also, Bosc and Gagnon state on page 153 that Speakers have consistently ruled that, except in the most extreme situations, they will only hear questions of privilege arising from committee proceedings on presentation of a report from a committee which deals directly with the matter and not as a question of privilege raised by an individual member.

I would therefore rule that the honourable member does not have a prima facie case of privilege.

Finally, I would also encourage members to exercise caution in the raising of matters of privilege. While I would never deny a member the right to raise privilege in the House, I fear that there is a worrying trend toward the trivialization and devaluation of what parliamentary privilege represents.

As stated on page 220 of Parliamentary Privilege in Canada, in the Canadian House of Commons, and I quote, questions of privilege are frequently raised but few are found to be prima facie cases. Furthermore, members have a tendency to use a rubric privilege to raise what is really a matter of order or, in the words of the Speaker of the House of Commons, a grievance against the government. End quote.

* * *

Madam Speaker: Petitions? Grievances?

An Honourable Member: Oh, wait a minute. I've got a petition.

Madam Speaker: I wondered where the member for River Heights (Mr. Gerrard) was.

I would indicate that it helps to send the moderator some information to say when—and this is for everybody—that when you want to speak and you are remote, it helps to send a message to the moderator who will then tell me so then I can properly recognize members.

So, the honourable member for River Heights, and on a petition.

PETITIONS

Personal-Care Homes—Pandemic Response

Hon. Jon Gerrard (River Heights): Madam Speaker, I wish to present the following petition to the Legislative Assembly.

The background to this petition is as follows:

There has been a dramatic increase in COVID-19 infections in Manitoba during the second wave of the pandemic, to the extent that Manitoba quickly rose from one of the lowest to having the highest number of active cases per capita of all provinces.

The resurgence in cases is worse because the provincial government was not prepared for the pandemic, resulting in very long wait times for COVID-19 tests and people waiting for up to seven days to get results.

A seven-day delay for test results led to a further delay in contact tracing which, in turn, led to a greater uncontrolled and undetected community spread of COVID-19.

Cases are spreading in personal-care homes because the provincial government did not adequately prepare to prevent and address personal-care homes' COVID-19 infections.

The provincial government did not institute full testing of all staff and residents in a personal-care home when the first COVID-19 case was detected in a home.

When, in May and June, the Manitoba Liberals repeated calls for a rapid response team for seniors homes to prepare for a second wave, the provincial government ignored the idea and brushed it aside.

In August, the provincial government ignored the calls for investment in infection control and better staffing to prepare seniors homes for a second wave, putting the health and safety of residents and staff alike at risk.

The provincial government failed to act to address reports of poor care at the Parkview Place personal-care home, including a March 2020 report detailing concerns with the state of repair of the facility. Its cleanliness and sanitation practices included issues with cockroaches, dirty toilets and grease-laden dirt in the kitchen.

The Minister of Health, Seniors and Active Living has been undermining public health fundamentals by downplaying the need for masks, which are known to prevent the spread of contagion.

The provincial government's wishful thinking and failure to get ready for the second wave of the pandemic has imposed tremendous costs and hardship across Manitobans, including schools and businesses.

The provincial government's failure to take basic steps to control outbreaks has led to further shut-downs, and businesses have had to close or reduce their capacity without receiving any financial government assistance.

The provincial government's own accounts show that support for business is among the worst in Canada. Businesses continue to face bankruptcy and operating risks because the provincial government refuse to step up with financial support or PPE so that they could continue to safely operate. Businesses and workers alike have been forced to choose between getting sick or going broke.

The provincial government has been saying one thing and doing another, calling for fundamentals while urging people to go back to work, shop and encouraging behaviour that increases the spread of COVID-19.

When the Minister of Health, Seniors and Active Living was asked about preventing deaths at personal-care homes, he responded these deaths were unavoidable.

Dr. Nathan Stall, who specializes in geriatrics and internal medicine at a Toronto hospital, called the notion that deaths are unavoidable ageist and urged the minister to reconsider. Outbreaks like the one in Winnipeg's Parkview Place are avoidable tragedies

have—we have seen in other jurisdictions like Singapore.

We petition the Legislative Assembly of Manitoba as follows:

To urge the provincial government to call a public inquiry into the mishandling of the second wave of the pandemic and into the outbreak at Parkview Place personal-care home.

* (14:40)

(2) To urge the provincial government to replace the current Minister of Health, Seniors and Active Living as a result of his failure to support personal-care homes and his failure to adequately prepare the province for the second wave of the pandemic.

Signed by Jonathan Klassen, Giordana Nocita, Savannah King and many other Manitobans.

Thank you. Merci. Miigwech.

Madam Speaker: In accordance with our rule 133(6), when petitions are read, they are deemed to be received by the House.

Cochlear Implant Program

Ms. Cindy Lamoureux (Tyndall Park): I wish to present the following petition to the Legislative Assembly of Manitoba.

The background to this petition is as follows:

People who suffer hearing loss due to aging, illness, employment or accident not only lose the ability to communicate effectively with friends, relatives or colleagues; they also can experience unemployment, social isolation and struggles with mental health.

A cochlear implant is a life-changing electronic device that allows deaf people to receive process sounds and speech, and also can partially restore hearing in people who have severe hearing loss and who do not benefit from conventional hearing aids. A processor behind the ear captures and processes sound signals which are transmitted to a receiver implanted into the skull that relays the information to the inner ear.

The technology has been available since 1989 through the Central Speech and Hearing Clinic, founded in Winnipeg, Manitoba. The Surgical Hearing Implant Program began implanting patients in the fall of 2011 and marked the completion of 250 cochlear implant surgeries in Manitoba in the summer of 2018. The program has implanted about

60 devices since the summer of 2018, as it is only able to implant about 40 to 45 devices per year.

There are no upfront costs to Manitoba residents who proceed with cochlear implant surgery, as Manitoba Health covers the surgical procedure, internal implant and the first external sound processor. Newfoundland and Manitoba have the highest estimated implantation costs of all provinces.

Alberta has one of the best programs with Alberta aids for daily living, and their cost share means the patient pays only approximately \$500 out of pocket. Assistive Devices Program in Ontario covers 75 per cent of the cost, up to a maximum amount of \$5,444, for a cochlear implant replacement speech processor. The BC Adult Cochlear Implant Program offers subsidies replacements to aging sound processors through the Sound Processor Replacement Program. This provincially funded program is available to those cochlear implant recipients whose sound processors have reached six to seven years old.

The cochlear implant is a lifelong commitment. However, as the technology changes over time, parts and software become no longer functional or available. The cost of upgrading a cochlear implant in Manitoba of approximately \$11,000 is much more expensive than in other provinces, as adult patients are responsible for the upgraded costs of their sound processor.

In Manitoba, pediatric patients, under 18 years of age, are eligible for funding assistance through the Cochlear Implant Speech Processor Replacement Program, which provides up to 80 per cent of the replacement costs associated with a device upgrade.

It is unreasonable that this technology is inaccessible to many citizens of Manitoba who must choose between hearing and deafness due to financial constraints because of the costs of maintaining the equipment are prohibitive for low-income earners or those on a fixed income, such as old age pension or Employment and Income Assistance.

We petition the Legislative Assembly of Manitoba as follows:

To urge the provincial government to provide financing for upgrades to the cochlear implant covered under medicare, or provide funding assistance through the Cochlear Implant Speech Processor Replacement Program to assist with the replacement costs associated with a device upgrade.

This petition has been signed by many Manitobans.

Madam Speaker: Grievances?

ORDERS OF THE DAY GOVERNMENT BUSINESS

House Business

Hon. Kelvin Goertzen (Government House Leader): First, on House business, Madam Speaker.

Pursuant to section 33(a) of the Sessional Order passed by this House on October 7th, 2020, I'm seeking leave to amend this sessional order by replacing the section 35 with the following:

Presentations to Standing Committees

Section 35 (a) All public presentations to bills at standing committees will take place remotely, with presenters appearing either virtually or by telephone; and

- (b) When appearing before a standing committee, representatives of a Crown corporation or an office of the Assembly may participate in the meeting either in person or virtually.

Madam Speaker: Is there leave to amend the sessional order passed by this House on October 7th, 2020, by replacing section 35 with the following:

Presentations to Standing Committees

35 (a) All public presentations to bills at standing committees will take place remotely, with presenters appearing either virtually or by telephone.

- (b) When appearing before a standing committee, representatives of a Crown corporation or an office of the Assembly may participate in the meeting either in person or virtually.

Is there leave? *[Agreed]*

Mr. Goertzen: On House business, I'd like to announce that the Standing Committee on Legislative Affairs will meet on Monday, December 7th, 2020, at 3 p.m. to consider the following report: the Annual Report of Elections Manitoba for the year ending December 31st, 2019.

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Mr. Goertzen: And, finally, I'd like to announce that the Standing Committee on Social and Economic Development will meet on Monday, November 23rd, 2020 at 6 p.m. to consider the following: Bill 42, The Remote Witnessing and Commissioning Act (Various Acts Amended); Bill 211, The Employment Standards Code Amendment Act (Unpaid Leave for Reservists); and Bill 300, The United Church of Canada Amendment Act.

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OPPOSITION DAY MOTION

Madam Speaker: Moving on, then, the House will now consider the opposition day motion of the honourable member for Union Station.

I will now recognize the honourable member for Union Station.

MLA Uzoma Asagwara (Union Station): Madam Speaker, I move, seconded by the member for Concordia (Mr. Wiebe), that the Legislative Assembly of Manitoba urge the provincial government to immediately take over operations of all Revera personal-care homes in Manitoba, including the Maples and the Parkview personal-care homes, for the duration of the pandemic to ensure the safety and well-being of our seniors in care and also be urged to immediately publish all inspection reports of Revera care homes as well as all other personal-care homes in Manitoba.

Motion presented.

MLA Asagwara: I appreciate having the opportunity to not only put this motion forward, but to put a few words on the record in regards to why this is so important.

* (14:50)

This is something that we've been calling on this government to do now for several weeks. It's something that families within Manitoba have been asking for this government to do for the past many weeks. It's something that I've heard from home care—sorry, long-term-care-home workers, rather, that

they've been wanting this government to step in and take these measures as well.

As so I'm just going to share a little bit about why this is so important and why I really hope that we can all come together today to pass this motion, and for the government to take the steps necessary to keep our loved ones in long-term-care homes, safe, protected and alive in Manitoba.

So I reflect on the fact that on the evening of October the 12th—it was either the 11th or the 12th—I got an urgent email from a family member of a loved one at Parkview Place. And Parkview Place, as we all know, is owned by Revera. And I called this person back. It was late in the evening, and we spoke at length about what was going on for his father and what his concerns were for his father at that care home.

At that point there were, I believe, about seven deaths at Parkview Place. Less than 24 hours later, I stood up in this House during question period and I asked the Minister of Health what he intended to do to protect our loved ones in Parkview Place, to protect our loved ones in long-term care and to intervene to stop any further tragedies from taking place at Parkview.

The minister told us in this House that the government would be redoubling, direct quote, redoubling their efforts. And, since then, it's been about five and a half weeks or so, almost six weeks. Since then we have seen an additional at least 18 deaths, unfortunately, at Parkview Place.

Within that period of time, we have seen, as of today, I believe it's 42 residents of another Revera-owned personal-care home have died. It's at Maples Personal Care Home. It's—as much as the minister seems to get frustrated when we talk about his language around long-term-care homes, and he's made the statement that the deaths at long-term-care homes in Manitoba are unavoidable, it is really important that we continue to remind the minister of the statement that he made, particularly, if nothing else, so that he reflects on the impact of that language and he makes different choices.

But, unfortunately, in spite of the fact that experts across every jurisdiction in this country have condemned the use of that language, have outright condemned the minister for saying the deaths in long-term care in Manitoba is unavoidable, the minister has failed to rectify his use of that word, an act.

The minister never apologized to the families who have lost their loved ones in long-term care for

making such a callous and false statement. And the minister has failed unequivocally at doing what is necessary to save lives in long-term-care homes here in Manitoba, despite having evidence and research and recommendations from other jurisdictions that saw deaths in long-term care in their first wave.

This minister has failed to do what's necessary to protect the lives of our loved ones and our elders in long-term care in Manitoba. That is not just a failure of leadership. It is entirely inexcusable, as he is the person who was charged with the care of all Manitobans in our health-care system.

Me, you, Madam Speaker, our loved ones in long-term care, the Minister of Health is responsible for taking the lead and acting when it's required to ensure that we are all protected in our health-care system, and he has failed at that very basic duty and tremendous responsibility and privilege that he holds in his position.

The minister has posted misleading graphs and statements on social media. I mean, I don't even really want to entertain that. I've seen so many people, thankfully, do basic math and debunk what the minister has posted. I've seen so many people outright call out what he's posted as irresponsible.

I'm grateful that Manitobans are paying close attention. I'm grateful that Manitobans are using their voices and their own platforms to identify the shortcomings of this Minister of Health, and I'm grateful that Manitobans are coming together collectively to demand better of this government, to demand better of this Premier (Mr. Pallister), to demand that this government, that this Premier, that this Minister of Health, that this Cabinet, that all PC caucus members who have so far failed to speak up and show up for Manitobans during this pandemic in the ways that we need.

Manitobans themselves are stepping up and making their voices heard, and that, to me, it just reflects the way Manitobans have continued to step up during this pandemic. It reflects the actual team Manitoba that we are all a part of. It's Manitobans—unfortunately not the Minister of Health and not the Premier—who are showing us what it means to be on team Manitoba and doing what they can to hold this government to account.

So, you know, I do want to take a moment to talk about the impacts of this government's failure to act accordingly in regards to these Revera long-term-care homes. I want to talk about the fact that we know the

families of those who have unfortunately died of COVID-19, how they're impacted. But I think what's not being talked about enough, Madam Speaker, is the impact of what's happening on those working in long-term care.

The workers in long-term-care homes in Manitoba at these Revera homes are doing their absolute best to provide the best care that they can within their capacity. They are run ragged. They are without the resources that they deserve to do their job safely, to provide the care that they desperately want to provide to the people that they care about in long-term-care homes.

I say this as somebody who has worked in long-term care. You develop incredibly strong bonds and relationships with not only the residents in long-term care but their families and their communities. I cannot imagine the emotional, the physical and the mental toll this government's inaction is taking on those working in long-term-care homes.

They deserve the resources, the staffing, the oversight that they require in order to be able to do their jobs in a way that puts the people they care about first and protects the folks that they're doing their best to provide care for. And we are in absolute solidarity with them.

I know that it's difficult for those workers to, on a daily basis, read in the newspaper what these families that they're providing care for their loved ones are going through. I know it's tough for them to see the places where they work being taken to task in the media, and I want those workers to know that we stand with them and that we're calling for these resources to be implemented.

We're calling for the government to take over these homes, to do right by not only the families in residence but by these workers. And we thank them for continuing to show up throughout this pandemic and provide the care—the best care that they can—for the people we know they care for in those homes.

It is so obvious, Madam Speaker—I think it's irrefutable at this point—that Revera simply is not equipped to provide the care that is necessary for our loved ones in these homes. It is blatantly obvious, it has been obvious for weeks that the government needs to step in, take over control of these homes.

It's also blatantly obvious that the Minister of Health doesn't actually understand what's happening in terms of front-line services during this pandemic. There's a big gap for the minister that is glaringly

apparent, and that is why we've continued to offer recommendations, offer suggestions.

We've pointed to other jurisdictions. We've hand-held and offered information to the Minister of Health and this Premier (Mr. Pallister) and this government, saying, please, look at all of this information. Doctors have done the same thing: please, look at what we're showing you; listen to what we're saying; take these actions; save lives today. The minister has failed to do that.

Today is an opportunity, Madam Speaker, where collectively we can make a decision and act quickly to save lives in personal-care homes in Manitoba, to make the inspections of what's going on in long-term care public so that we can use that information to implement the changes needed to take care of our loved ones and protect them, keep them safe, get them the care they deserve.

These are measures that are happening in other jurisdictions. Manitoba was ahead of the game when we saw our first case. Now we've fallen so far behind.

Now is the time to act. Now is the time to come together for our loved ones and our elders in long-term care in Manitoba.

* (15:00)

Mr. Dennis Smook (La Vérendrye): Madam Speaker, I rise—once again, I rise in this House today to put some words on record for the opposition day motion. Some parts of my speech may sound repetitive from earlier speeches, but I feel that the workers at our personal-care homes are doing the best that they can and deserve our support.

Madam Speaker, personal-care homes play an important role in helping our seniors as they get to the age where they need care and are not able to care for themselves. We try to keep our seniors in their own homes as long as possible, to keep them in a surrounding that they feel comfortable and secure. Home-care workers have done a great job at this and deserve praise as well.

Madam Speaker, it comes to a time when physical issues, dementia and other issues make it impossible for people to live alone, so they need to be in a home where they can be looked after and cared for with dignity so that their final years with us are ones that are comfortable and secure.

Madam Speaker, our seniors have given us a lot. We live in a great—in the great country of Canada and they are the ones that have contributed to the lifestyle

and freedom that we all enjoy today. These seniors are one's mother, father, grandmother, grandfather or just a friend and they deserve proper care, no matter who they are. After all, many of us are closer than we would like to think to making use of these facilities, so it is our duty to maintain a level of care that is acceptable to today's standards.

Madam Speaker, until four years ago I had been in personal-care homes many times visiting people, making visits as the MLA for the area, but never really got to see the inner workings of a personal-care home. But when my mother-in-law became a resident of one, that changed my perspective on personal-care homes.

Madam Speaker, I got to see first hand the fantastic treatment she received from the staff, how the staff treated her like family and gave her the best care that anyone could ask for. We had a birthday party at the home to celebrate her 100th birthday. The staff sang Happy Birthday to her along with the family and had cake with her as well. We could not ask for better care than she was receiving. The staff was fantastic. Unfortunately, my mother-in-law passed away just as the first wave of COVID was hitting our province.

Madam Speaker, it takes a special person to work at a personal-care home. Some of the tasks they are called upon to do, there are many that would refuse to work there. The staff have patience and they care about the people they look after. The staff at all personal-care homes needs to be thanked and congratulated for everything they do to care for our loved ones.

Madam Speaker, our government is committed to ensuring the health and well-being of our seniors in personal-care homes and long-term-care facilities.

Madam Speaker, the conduct of the management of Parkview and Maples personal-care homes is troubling. Our seniors do deserve better. My heart goes out to all families that have lost family members to COVID-19. That is why our government is calling for an independent review and Dr. Stevenson will be thoroughly examining records and interviewing residents, health-care workers and families. As I said earlier, our seniors deserve better and we owe it to them to find out what happened and why and put safeguards in place so it cannot happen and will not happen again.

In response to the Maples situation where Revera was providing the WH-WRHA with inaccurate information, our government increased oversight of

care homes without breaks by sending staff to directly oversee care homes. There was a rapid response paramedic team that became a community IV team dedicated to caring for residents. There has been an increased medical support for doctors and nurse practitioners.

Madam Speaker, the opposition members in this motion are asking that government to take over operation of all Revera personal-care homes in Manitoba. I really wonder if—like, who came up with this opposition day motion, because I'm just wondering if they thought of how to make this plan work, to accomplish this. Have they consulted the medical experts like the chief provincial health officer? I don't think they have or they would not be doing this.

Madam Speaker, do the members opposite know who owns these homes currently? Revera is a hundred per cent owned by a federal Crown corporation called the Public Sector Pension Investment Board. This is the Crown corporation that makes investments on behalf of pension plans of federal government employees.

Madam Speaker, there are members opposite suggesting the government take over and run—are the members opposite suggesting the government take over and run any personal-care home that has a high number of COVID nine case—COVID-19 cases, even the ones that are privately owned or the ones that are also run by health regions?

Madam Speaker, this morning we debated a resolution from the member of Fort Garry for—in regards to small business. Well, he was praising how important business is to Manitoba, and just this afternoon in his private member's statement, he had mentioned that it was not right for small private daycares to be receiving funding from the government. Well, so much for his love for small business in Manitoba, from bringing a motion to support Manitoba businesses to condemning them.

Madam Speaker, I'm not happy with Revera and the way they have been managing this pandemic, but just to kick them out and have the government run it, I don't believe is the answer. There are a lot of good staff in these homes, in these personal-care homes, and the infrastructure's there. They just need some help to get back on track with either extra staffing and somebody to run it properly. I don't know if kicking Revera out is necessarily the right answer.

I mean, COVID-19 has been difficult on a lot of people throughout the province and throughout the world as well. I mean, I have talked to many legislators from—especially on the International Legislators' Forum, as I mentioned this morning—that, from, you know, North Dakota, South Dakota, Minnesota, Manitoba, and everybody is having the same problems that we are: staffing issues. You know, there's a lot of people that are getting sick who can't come in to work.

It's—we need to work together to try to make sure that we can get rid of COVID-19. We need to come together and not look at things that we can do politically to destroy each other. We need to make sure that we can—the—everything we do needs to be for the benefit of patients in these personal-care homes or anybody who's suffering with COVID-19.

Thank you very much, Madam Speaker. I know there's a number of other people who are interested in continuing this line of speech. Thank you very much.

Madam Speaker: The honourable member for Wolseley? She's indicating just one second.

Ms. Lisa Naylor (Wolseley): Sorry, I'm having trouble with the mute button there.

Madam Speaker: We're good?

The honourable member for Wolseley.

Ms. Naylor: I've mentioned previously in the House that I've spent some time in personal-care homes. Several elders in my life, grandparents and great-uncles and aunts, have spent time living in care homes.

My mother had a period of time of almost 15 years of her life where she was visiting care homes at least several times a week because of the relatives that were there, and I was often with her. We spent a lot of time in my younger adult years talking about care, what was needed for seniors, what worked and what wasn't working over many years and under different governments.

* (15:10)

Then, in the fall of 2018, my own mother entered a care home where she lived out the last six months of her life. Towards the end of her life, in February of 2019, I went to visit her in Ontario where she was then and actually lived in her care home. I stayed there as a guest for eight days. I ate there, slept there and interacted with residents and staff and my mother 24 hours a day. I observed first-hand when the care

was sufficient and when staff were struggling to meet residents' needs.

While there was no doubt that the staff were caring and working very hard at all times, there was simply not enough of them to go around to provide enough care all of the time. It was sometimes a struggle to meet the required direct-care hours.

Although it's too late for my mother, I'm very relieved to hear that Premier Doug Ford's Conservative government has just committed to increasing direct care to four hours per day. It's very disturbing to me that Pallister's government will not do the same. We are years behind in just barely meeting the bar that research tells—*[interjection]*

Madam Speaker: Order, please. *[interjection]* Okay, I just had some misinformation.

Please, the honourable member for Wolseley, continue.

Ms. Naylor: We are years behind in just barely meeting the bar that research tells us is the baseline necessary care, but now, even in a pandemic, which COVID-19—with COVID-19 outbreaks in dozens of care homes, this government will not be swayed to prioritize our seniors and others who reside in care homes.

Instead, they continue to talk out our Bill 202, which would provide greater care at the bedside. Clearly, the Premier (Mr. Pallister) and this government don't agree that our seniors deserve this.

I've been following what happened in personal-care homes in Ontario, Quebec, and other jurisdictions from day one of the pandemic. The death rates early on in the pandemic were very distressing. I think that all of Canada was watching in horror and many were grieving.

Perhaps it was only Manitoba's Minister of Health and the Premier who were not paying attention. If they had been paying attention, they would've known that by early summer there were 230 deaths in Revera care homes in Ontario. They would've known that by mid-May, families had launched a \$50-million lawsuit against—you guessed it—Revera, for their neglect and for putting their loved ones in harm's way.

Perhaps I'm being generous. I'm assuming this government was not paying attention; the alternative is so much worse. If they were paying attention and did not act—did not act to prepare personal-care homes, then their negligence is much more nefarious than I imagined.

This government tries to push off responsibility to the private sector, and if we raise questions on our side of the House, they attempt to deflect and draw attention to their own hard-working public health official.

Mr. Doyle Piwniuk, Deputy Speaker, in the Chair

As a mental health counsellor, I often worked with clients who struggled with self-esteem. One thing we talked about is where they directed the stage light of their own lives. Did they magnify their own failings instead of their successes? Many of them did that.

So I guess that's why it's so obvious to me how skilled this government is at where they point the stage light. They like to point away from their own failures and points it directly at health-care workers. But when they think they've done something right, they're sure to put themselves up front and centre with the light shining on them.

It is time for this government to step up and take responsibility and immediately take over operations of all Revera personal-care homes in Manitoba, including the Maples and Parkview personal-care homes, for the duration of the pandemic to ensure the safety and well-being of seniors in care and also to immediately publish all inspection reports of Revera care homes as well as all other personal-care homes in Manitoba.

We know that the Maples has had 220 total cases. They have 165 active cases and 43 deaths. Parkview has had 159 total cases. They have 116 active cases and 25 deaths. How did this happen? Why was this government not working closely with all privately owned personal-care homes starting last March and continuing to do so on a very regular basis throughout the past many months?

It is too late. It's too late for 68 beloved fathers, mothers, brothers, sisters, aunts and uncles, beloved family members who have already died.

And Revera has shown us they cannot be trusted. They showed us that in Ontario and Quebec, but after hundreds of deaths in other provinces, they did not plan ahead. They did not reach out and ask for help. They did not ensure that they could care for the people who are their responsibility, and only weeks ago the VP of west Revera operations came out and lied to Manitobans and supposedly to the WRHA about staffing at PCHs during the terrible night of November 6th, where multiple people died and para-

medics were required to come in and provide the very basics of care.

The WRHA admitted last week that they also knew about the issues at the Maples PCH prior to the outbreak—breaches in infection control, insufficient record-keeping and a lack of resident oversight—but the minister still refuses to release this inspection report.

Someone I'm close to was working inside the Maples last week and told me details about the horrendous lack of oversight. I have been told that some workers at the Maples are suffering from exhaustion, and some from acute trauma from what they have witnessed. Revera is not able to handle this crisis and families are begging for the government to step in and take responsibility.

Thank you.

Mr. Len Isleifson (Brandon East): It's—it sure is interesting—I'm sure for all of us—when we sit and listen to the comments from the opposition when we compare just this morning some of the comments they were making in defence. And I am going to accuse the member from La Vérendrye from looking over my shoulder and stealing my notes, because I do have some scribbled notes on a piece of paper here that I find very interesting.

And it is the fact that this morning, the opposition in the House stood up in supposed support of small private business. And then here we are this after—and they talk about teams, and how they're a great team on that side of the House—and yet here we are this afternoon, not even six hours later, debating a bill that is saying: kick out a private company, take over, let's not work with them, oh, no, we're not a team on this one, let's not work with them, let's just kick them out and take over.

I think their—the opposition's solution to take over a private company really needs to look at the legitimacy of what even comes out of their mouths. When we look at operations like this, we are in dire need right now—right across Canada, and I can probably say right across North America.

I speak with my counterparts in North Dakota and they're in a grave situation, and we need to work with them, not against them. I mean, I don't think you would see anybody—especially in the federal government—saying, hey, let's kick out the US and take over. I mean, it's—let's work with them, let's share our experiences and they can learn from us, we can learn from them.

I too have read the reports of the situation in Ontario when the military was in, and it's very unfortunate. and, you know, we do want to offer our condolences to everyone who has lost their lives, whether they're in a personal-care home or a long-term-care facility or from home.

I just think it's—it is sad but, you know, we're all faced with those challenges and I really do not believe that standing on the other side of the House yelling and screaming and being critical of the way a not-for-profit organization is run, or how a private industry is run or even, you know, in the government ministry.

Sure, they've having some challenges at Revera. We've already heard that some of the measures that have been taken but, I think, Mr. Deputy Speaker, it needs to be understood of what type of facilities we have out there right across Canada. And I know we have—again, in my studies—there are a number of different types of organizations that look after our aging population, our loved ones, our seniors.

And while they do go by different names across the country, whether it's personal-care homes or long-term-care facilities or aging-in-place communities, you know, we have a number of varieties of these types of facilities.

We have proprietary facilities which are owned by individuals or corporations and they operate for profit. We have religious homes where they're owned and operated by religious organizations or not-for-profit agencies. We have the lay or charitable which are owned and operated by a voluntary, non-religious, non-governmental body with a—pardon me—with a non-profit basis.

* (15:20)

There are municipal homes that are operated, obviously, by municipalities, towns or cities on a not-for-profit basis. I know we have some regional ones out there, as well, that are operated by regional health boards or authorities. And yes, there are the provincial ones, territorial ones, that are operated by a branch or division of an agency or the provincial government or even of a territorial government.

But we also have to understand that there are federal facilities, as well, which are owned and operated by a department or agency of the Government of Canada. So, example, we're talking like Veterans Affairs or health and welfare Canada, and when I look at Revera in particular, it's important to know that they are owned, as we heard, by a federal jurisdiction. They're owned by the federal Crown

corporation that is called Public Sector Pension Investment Board.

So what I'm hearing from the opposition when they stand in the House, and just very recently this week there was a debate on pensions, on what to do with pensions, whether we should allow people to take out 50 per cent or more, that sort of thing, and now here they're saying, let's just go in and get rid of that pension opportunity altogether because the provincial government's going to take over. That makes absolutely no sense.

This is a Crown corporation that makes investments on behalf of its pension plans of federal government employees. It is definitely not something for provincial employees or provincial—pardon me—politicians to step in and say, you know, you're doing it wrong and we're taking over. That is probably one of the most irresponsible things that I have ever heard of.

We need to look at the continuum of care. We need to look at an aging-in-place opportunity. We need to work with our partners in the communities. You do not achieve things by accusing people of things and then walking away or pushing them out of the way.

Let's look what happened, look back on our own lives. Let's say you're in grade 3. You're having some issues with math. You're having issues with reading. The teacher didn't say, hey, I'm going to kick you out of the class and let's just put in kids that are really smart that don't need our help. They said, no, let's work with the student, right, let's help them achieve the potential that they can achieve.

These folks—and I mentioned this morning I'm passionate for the long-term-care sector, not just because the work I've done for 21 years but the reason I got into politics in the first place, whether that be municipal or now here provincially, is we are here to help people. And, sure, we get challenging situations; we all deal with them all the time, but we don't throw them out. We deal with them, we work with them.

Not everybody is a PC supporter, not everybody is an NDP supporter, not everybody is a Liberal supporter but anybody, I can guarantee you, that goes to any MLA's office with a concern is going to get looked after. At least, that is my hope. I know that is a fact with the—my colleagues on our side of the House, and I can only hope that that is the fact with members around the House.

If you have this attitude that let's just kick out Revera, let's take over, then, hey, maybe the next time, you know, when you have an issue in your office with someone who is not with your own party, maybe kick them out. Tell them to come our way because I know we'd be happy to help everybody.

And when I look again—and getting back to this one here—when we look at aging in place, taking pressure off of the system itself, we need to be able to look and say, what is the desired outcome of working with people?

And when we look at this one here, let's look at our personal-care-home funding. Just yesterday in question period, there was a falsely insinuated comment that there were cuts made to personal-care-home funding, and this simply is not true.

Funding for personal-care homes has actually increased and increased to \$50 million over and above what the NDP spent when they were in power. Even earlier this year, we announced an investment of over \$280 million in infrastructure improvements to care homes to increase safety and security for residents.

There are so many opportunities to work with agencies, with groups, even if—with our own five regional health authorities, to work with them to provide a better outcome for our aging population. We need to look at restrictions on visitors, for example. How do we enhance screening? How do we ensure that we've enhanced cleaning and disinfecting protocols in all facilities?

When we look at Revera, going in there and disrupting the flow, let's go in there. Let's work with them, which we are doing. The Winnipeg Regional Health Authority has been in there, inspectors have been in there. And I would hope that we all have the ability to work for the benefit of the seniors in our province.

I know, and we all know, that the risk of COVID-19 is still present and will likely remain in Manitoba for some time. Sure we all hope that we have some vaccines in the very near future, but that will take a while to get them out, to get them distributed properly and have the system in place so that everybody becomes immune to this.

But we need to look beyond that as well, and be ready so that when we have an opportunity to really concentrate on other things, and I say that instead of all of our time spent on COVID, which unfortunately is necessary at this time, we have a population out there, our baby boomer population, going to be

entering into our personal-care homes in the very, very near future.

Closing homes, kicking people out of homes, taking over and making sure things are only run by the government is the wrong thing to do. Again, I am—I want to see these place succeed, and I'm thoroughly disappointed that the opposition feels the best way to improve a situation is to get rid of the situation.

Mr. Deputy Speaker: The honourable member's time is up.

Mr. Jamie Moses (St. Vital): I'd like to take some time this afternoon to talk a little bit about personal-care homes and the situation that we've seen over the last several months.

I want to say that it really didn't have to be this way. The tragedies that we've all witnessed, they didn't have to occur. You've seen them played out in the media and in the newspaper, on the news over the last few weeks. There was time to prevent this. It didn't have to happen quite as bad as it did.

Unfortunately, it was this Health Minister and this government who chose not to act, who failed our residents and our seniors in personal-care homes, and frankly, they had the time, they had the opportunity, to take the steps and take the actions needed to make our personal-care homes much safer than they were during the second wave of this pandemic.

In the spring, Mr. Deputy Speaker, we all watched here in Manitoba and saw the terrible heartbreaking events that were taking place in personal-care homes in Ontario and Quebec. And you saw as COVID-19 ravaged through those homes so very quickly with very tragic results and heartbreaking results.

We watched as the military came in to provide some life-saving support for those residents, and they helped. They slowed the spread of the virus. They were able to provide some temporary stability to those homes and some comfort for those families.

We watched again during the spring and we all watched with hope, knowing that our situation wasn't as bad in Manitoba, knowing that our government should have had the time to learn lessons from our eastern neighbours. We had hoped that our government would prepare. We knew it had the time.

We knew it would have the time to prepare by hiring enough staff to be in our personal-care homes, to train the staff on the proper use of personal protective equipment, to educate the staff in personal-care homes on how to limit and prevent the spread of

the virus. The government should have learned about proper cohorting procedures in personal-care homes and taken the time to perform proper audits and inspections of our personal-care homes in our province.

Sadly, this was time wasted and time lost because our minister and government failed to step up and act strong enough to prevent the second wave from hitting our personal-care homes.

* (15:30)

Now, let me go back to this spring and make some comments that were made in the spring by our National Defence Minister where after the—when the military was brought in to assist in the personal-care homes in Ontario and Quebec.

He said that the events that were taking place there were terrible, and COVID hit—we didn't know it was coming, and, in this case, it couldn't avoid what had happened here. We had all the information of the system breakdown and now we know that it needs to be fixed. That's a loose paraphrasing of the Defence Minister's comments back in May of this year—that he didn't know it was coming, it was terrible, and they couldn't avoid it.

But that was May, Mr. Deputy Speaker—May. We had all the summer months to plan and prepare, to get ready to avoid the second wave, but this minister refused to act, chose not to act. This government failed and the impacts of those are played out in the news media recently. And even though this minister may think those events might have been unavoidable, they clearly were not, if it wouldn't have been, if proper steps were taken earlier and proper plans were made at the right time.

I will also mention that I, along with my colleagues, MLA Asagwara and MLA Wiebe, wrote a letter to the minister back on July, July 16th—

Mr. Deputy Speaker: Order. Order. I just want to remind the member that if you're going to use the MLAs, actually use their constituency or their position.

Mr. Moses: My colleagues from—the member from Union Station and the member from Concordia and I wrote a letter to the Minister of Health back in July—back on July 16th, and in that letter, we urged him to add more supports, more staffing supports specifically for personal-care homes. This was—this is another sign, another warning, for the minister to take strong action, and again, he chose to not simply consider the

fact that action was needed and there were dire consequences at hand.

Now, specifically, I'll talk about Maples Personal Care Home. Their first case in Maples Personal Care Home was confirmed on October 21st. Then, on October 27th, only six days later, 69 residents and seven staff tested positive. I repeat that: six days later, from one case to 69 cases and seven staff. That is incredibly fast on how—shows incredibly how fast that virus can transmit and spread in a personal-care home.

Now, we all know that the virus is very prevalent in our community and we hope that it never gets into any personal-care home, but the fact that it's spreading that quickly and that fast shows that there was a lack of planning and preparation and that these personal-care homes, these Revera personal-care homes, Maples Personal Care Home, needed to have more staff, more equipment, more education, more training, so that this virus wouldn't have spread this quickly.

I don't need to go into and explain the tragic loss of life that we've seen and that Maples Personal Care Home, in fact, is sadly suffering the worst casualties from COVID-19 in any personal-care home in our country. That is not something that we should be proud of. It's something that we should—all of us should be working so that that never happens again. But we should also be working to make sure that the people who are in Maples Personal Care Home get the care that they deserve.

And I will say that the day after that 69 residents tested positive in Maples Personal Care Home on October 27th, my aunt, who is a resident of Maples Personal Care Home, tested positive with COVID-19. And now I will say that she has recently tested negative, and not a day goes by that my family and I don't care about her condition and her safety and pray for her.

But it wasn't because of our calls out in question period. It wasn't because of the letters we—the number of public members who called and emailed this minister. It wasn't even learning the lessons of what happened in the spring in our—in Ontario and Quebec. It was only when a crisis occurred and emergency paramedics were called to respond to Maples Personal Care Home that the minister seemed to actually take an interest in what was going on there.

Why would this minister have had to wait 'til a crisis occurred before taking concrete steps to make the lives of those people—those residents—better? This Health Minister simply chose not to act, waited 'til it

was too late, and this government has failed to protect its people.

The residents of Maples Personal Care Home deserve better. Their families and their loved ones deserve better. All Manitobans deserve better from this government.

Thank you.

Hon. Jon Gerrard (River Heights): Can you hear me okay?

Mr. Deputy Speaker: I can hear you.

Mr. Gerrard: Having a little problem with my headphones; I don't know why but—thank you.

Yes, I want to say a few words about this resolution, which has been brought forward. I have had concerns about the care at Revera going back to 2011, and people have brought me a number of issues. I understand that about a decade ago there were also problems with cockroaches in Parkview Place, and that what we've seen this year—we now have 190 Manitobans who have died, and disproportionately these are Manitobans in personal-care homes, and disproportionately the two care homes which have the worst record are Parkview Place and the Maples.

It is a sad story. I think it's important to say that it's not all the fault, necessarily, of Revera. In fact, I think that the government has really not done its part. We know that the personal-care homes in Manitoba are underfunded by about 30 per cent compared to the OECD average.

We know that the underfunding has led to difficulties with staffing, and that the staffing requirements that have been used under the NDP and under the Conservatives have been too low. We know, from the work that has been done by Jan Legeros and others at the Long Term & Continuing Care Association of Manitoba, that there's been 15 years of funding freezes, operational funding freezes, and that, of those years, 10 were under the NDP, and so five were under the Conservatives.

So, clearly, both the NDP and the Conservatives have not paid the attention that they should have done to personal-care homes. Two-thirds of that period was under the NDP and, clearly, if it—things had been addressed then, then we would be in significantly better shape than we are now.

It is also an issue of oversight. There have been problems with the oversight of this government, and

it's not just the number of visits. It's making sure that things are looked after.

How could you have a checkup on Parkview Place, which occurred in March, when the pandemic, global pandemic, was well under way, and that checkup on Parkview Place did not even look at infection control? And that—there's just a huge gap in government oversight when you see something as poor as that.

* (15:40)

As I've said before, there has been a problem with the government in not doing full tests of staff and residents in personal-care homes when there's a first case. We have called for this going back to April, and this is something that the government should have done in Ontario.

They realized that they had a major problem, and they started June the 9th instituting full testing of staff and residents at personal-care homes, and that was June the 9th, on the first sign of an outbreak. And we—here we are five months later and the current government still hasn't instituted that which is good best practices.

In fact, we've been told that the government looked at the recommendations from Ontario and Quebec but—and they've implemented the recommendations but the—clearly this major one was missed. The recommendation in Ontario has been varied a little bit. They've realized that sometimes you can have two units at a personal-care home, unit A and unit B, which are completely separate in 'sterms' of staffing and residents, and they are not back and forth, and you may be able to just check one.

But the basic principle remains the same, that you need to check staff and residents as soon as there's an outbreak in a personal-care home, and this is vital because, as we've seen, and as the iron ring report of the national institute of ageing in Toronto has said, you want to put an iron ring around personal-care homes and protect people, and one of the measures that they're very strong on is making sure that this testing occurs.

We know that there needs to be a rapid-response team. The government was far too late. Manitoba Liberals called for this rapid-response team in May and then repeatedly in June, and yet the government wasn't listening.

And it became very apparent when we had major outbreaks at Parkview and the Maples that this was an

essential component, that you need to have a rapid-response team so that you've got a group of highly trained individuals in things like infection control, and they can go into a personal-care home as soon as there is a first case and assess the situation, see what needs to be done and so that they can also be ready with additional staff in circumstances where many of the staff in a personal-care home need to quarantine or isolate because of COVID-19 infections or exposure.

All of a sudden, a care home can be missing half its staff. We saw this in the Maples care home. Government should not have waited and waited and waited before acting. They should have been on top of the situation. They should have had the rapid response team ready, just as we called for in May, recognizing that this was essential because you tend to lose a lot of staff very quickly, and no personal-care home can make it up—the staff up that quickly, and when they do, they tend to be people who are not as experienced, people who don't have all the full training in infection controls whether looking—as well as looking after people in personal-care homes with dementia and other problems.

And the government only recently put together an advisory group to look at personal-care homes. This should have been done very early on in the pandemic. March the 2nd we called for special attention to personal-care homes, but that special attention certainly wasn't given up until it turned out to be a complete disaster.

So we are supportive of the government looking at taking over Parkview Place and taking over the Maples and perhaps other personal-care homes owned by Revera. We consider that the NDP resolution may not be going far enough, that we probably should be taking over not just for an interim period but that this should be a long-term plan, given the track record of Revera and of their personal-care homes.

I think that there's a variety of things that need to be looked at in more depth. We need some bold new approaches to personal-care homes. We need to make sure that all our personal-care homes are providing the care that is needed.

There are many—and it's important to say this—personal-care homes which do very well. There are many where—and including Revera—where there are staff who are incredible people and who are doing everything they can, but if they don't have the financial and staffing and other support from government, then, you know, it doesn't work as well.

And, clearly, it's been known for a long time that the place where people are often sent to when they are waiting is not to the place they want to go; it is to Parkview Place. It shouldn't be the last place that people want to go to; it should be much better than that and that's what we're voting for.

Thank you, merci, miigwech.

Mr. Nello Altomare (Transcona): Thank you, Mr. Deputy Speaker, for allowing me to put a few words on the record regarding this resolution from the member from Union Station. We, of course, stand in strong support of this and hope that members throughout the House also stand in support of this resolution.

We in Transcona have been in a bit of the crosshairs of this government when it comes to health care and how those dollars are spent. We had to fight to keep Concordia, even just at the bare minimum with an urgent care. As a matter of fact, I began considering running for the seat in Transcona after the decision was made to completely close that emergency room, and it began to resonate with me that we needed to get some action on that.

And, you know, now that we do have that urgent care piece, it's still, you know, not enough because what's the government do again? Now they're targeting CancerCare at Concordia and now the residents—again, we have to rise and support the fact that we need to maintain the CancerCare piece at Concordia.

Patients, residents from this part of town—not just Transcona, from Radisson, from northeastern parts of Winnipeg, East St. Paul, Springfield, Oakbank, Dugald—all benefit from having that centre there. Yet again, in this part of the world, we're targeted, right, we're targeted by this government for cuts and then we—you know, what kind of message does that send to us?

Well, back in 2016, we had this Premier (Mr. Pallister) stand in front of Park Manor Personal Care Home and state that they were going to expand Park Manor. As a matter of fact, there was a big sign there. All that's left now with that personal-care home sign is just three stumps. All they did is just took down the plywood, but they left up the stumps.

What kind of message does that send to our community, to the northeastern part of Winnipeg? Well, to me, it sends a message that we don't matter, and it's clear that through the actions of this government, that we have to fight for everything that

we get, not just in Transcona but throughout the province. And now we're glad to stand with seniors, to fight to get them the care that they deserve.

You know, we were asked, you know, who brought forward this motion. I'll tell you who brought forward this motion: it was the member from Union Station because we demand action on this. We demand action because we have a government and a Health Minister, a Premier (Mr. Pallister) that stands and watches these disasters occur. Don't even take the time to come out in the news conference and meet with Manitobans at the time of crisis.

* (15:50)

So we demand that this motion, this resolution, pass this House today. Why, we've been calling for several weeks for action from this government. We've heard from long-term-care workers. We've heard many media reports of what's going on in Parkview Place. How many more reports do we need until we go in as government, as MLAs, and say that we need to rectify this, right? We have to go in and have the proper supports for our seniors that are in long-term care.

We can't have grease, we can't have cockroaches, we can't have unsanitary conditions. What's that say about us when this occurs, right? We have to go in and show that when we say we care about our seniors, we really do, and we come up with strategies that will rectify these pieces. And it is important that we do come together so that we can get these things done for the most vulnerable in our society—our seniors that require long-term care.

On October 12th, we began to raise concerns. At that time, at Parkview Place, there were seven deaths. The minister said that his government was redoubling its efforts. And what have we seen? More deaths occur at Parkview Place, 18 of them; 42 at the Maples Personal Care Home. Those are staggering numbers for a province of our size.

And what do we have in response to this? We don't even have the Premier and the minister come out during those times of crisis when we had paramedics from the City of Winnipeg go in. This is why we need this motion to pass.

We have a minister that said that deaths in personal-care homes were unavoidable. We can't take that attitude. No one can. We as public servants, even myself in my previous occupation, we would never say to caregivers that things were unavoidable. We would never do that.

And so, our approach is that language that we use when we're talking about supporting personal-care homes is important, and that the first thing we need to be doing is saying that we're going to support not only the people that are resident in the personal-care homes, but also the people that work, who want to do the job, who want to be provided their resources.

Now, clearly, Revera has shown that they are unable to provide those resources. They are unable. After pressure from the media, from members of this side of the House, admitting that they didn't have the proper staff, how can they be trusted, then, with the continued care of seniors at Parkview and Maples? That weighs on my conscience, and I'm sure it weighs on everyone's conscience in this House.

So we are using today to debate the very merits of what we're asking for here, what we are demanding here. We are demanding action from this government. It's never a matter of being too late, but I think we're getting to that point. Manitobans, seniors, everybody that calls this province home, deserve better.

We have many lessons from eastern Canada—many of them—not the least of which when things became unmanageable they looked in the mirror and said, you know what, we have to call in for extra supports. Instead, what did our government do? It's the hubris piece here, excessive pride in that we were able to beat this thing in the first wave with very little numbers.

And then, what happened? We knew the second wave was coming. How do we plan for that in our personal-care homes? Evidently, we didn't do a very good job of planning for that in our personal-care homes, and I'm afraid now that this type of arrogance, of over-pride in something that occurred—we were kind of lucky to have happen—is now going to apply when we get to what's happening in our schools. But we won't go there right now, because right now this bill needs to be supported by everyone in this House so that we can get care properly to the people that need it.

We talk about seniors—this government here talks about seniors being the foundation of everything that we've done in this province. How do they show their gratitude? I think we've seen how that gratitude is displayed: with inaction and excuse-making, and not even the ability to say that, you know what, yes, we did make a mistake, let's work together to make this better, and we start by supporting this resolution.

Thank you, Mr. Deputy Speaker.

Mr. Tom Lindsey (Flin Flon): You know, I've sat here this afternoon and listened to members, government MLAs talk about things that really leave me sick.

The member from La Vérendrye talked about how important home care was to keep our seniors safe in their homes, and yet he's part of a government that has progressively underfunded home care. There's—during the start of this pandemic, there was people that were getting zero home care, seniors that were maybe getting a bath once a month or not at all, and yet that member thinks, well, gee, that's really important but I'm sure glad that my government didn't fund it properly to keep people safe in their homes.

And then I listened to the member from Brandon East—and we're talking about seniors, some of our most vulnerable people in seniors care homes, in a place like the Maples care home, where there's been so many deaths and so many people are sick, so many staff are sick—and he has the unmitigated gall to suggest that, well, you know, we shouldn't interrupt the flow there. What kind of foolish talk is that? It just astounds me that the member from Brandon East thinks we shouldn't interrupt the flow at a seniors care home where people are dying left, right and centre, where the people in charge of that care home are misleading the minister, are misleading the regional health authority.

We shouldn't interrupt the flow? You're darn right we should interrupt the flow, Mr. Deputy Speaker, and we should do it now. I mean, it's a shame that we've waited this long, that the government has refused to act.

We've had the Minister of Health say, well, it's unavoidable, nothing we can do about it, it's unavoidable. And again, that is completely sickening to think that a Minister of Health thinks that seniors dying from a pandemic because the care home they're in isn't being run properly, doesn't have enough staff, and he thinks their deaths are unavoidable, he thinks that they're just disposable.

I'm left to wonder, Mr. Deputy Speaker, what some of these ministers and some of these government MLAs would think if it was their mother or their grandmother that was left to die alone with cockroaches, with no water. I think they might have a little different attitude. Maybe not, maybe they don't care about their parents either, because they sure as heck don't seem to care about anybody else's.

* (16:00)

You know, we've seen where this government has cut funding for seniors care homes that the government is running. We've shown documents that show that that's the case and they can stand up and say, well, that's false information. We presented the information to them and I'm really getting tired of this government, in the face of facts, saying that's false information. Facts do speak and when we present those facts, the best thing that this government could do would be to say, yes, there's something going on there; we did cut some funding and we should do something different.

Now, we look at particularly what's been suggested here is that at least for the pandemic, at least for that period of time, the government should step in because, clearly, the management of Revera has failed and failed miserably in their duty to run that facility. But then, of course, the Winnipeg Regional Health Authority has failed miserably in their duty as well, because they should be inspecting those homes on a regular basis.

I'm left to wonder what kind of audits that they've been doing all along. Is it pick up the phone and say, hey, how's things going? Yes, no problems here; nothing to see here. Okay, carry on. If that's the case, then that's wrong as well.

If you're going to have privately run care homes, there needs to be first standards which, in another piece of legislation, we've suggested that those standards are not sufficient already and they need to be stepped up. But there needs to be standards and there needs to be somebody checking to make sure those standards are actually complied with.

So there's several breakdowns in this particular or these particular instances that, contrary to what the Minister of Health has said, they most assuredly were avoidable and they most assuredly are avoidable by taking the right action and making sure that seniors care homes are properly funded, to make sure that seniors care homes are properly managed, and when it's found to be that they're not properly managed and not properly funded, then they should do something, not wait until there's multiple deaths and still do nothing.

Maybe did—the minister's talked about, well, this, that, something else, but he really hasn't taken effective action; he hasn't taken an effective leadership role other than to say we got this. Well, no he doesn't. He doesn't have it; he never did.

So I think it—really, every member, every member of that PC government should really stop and think, if this was their mother, their grandmother, their father, their grandfather, is that the kind of care that they think is acceptable for them? Do they think it's acceptable to have cockroaches, to have the smell of urine because nobody's cleaning because, well, because they don't have enough workers. And certainly in the for-profit side of things, that becomes a problem all the time because they always need more profits. So they either jack the price up that they charge seniors to live in those homes so that less people can afford them or they start cutting the number of workers that are there, they start cutting the number of powers of care that people get.

I couldn't believe it when I read that some of the security staff was left to try and do patient management because they were so short-staffed that there wasn't enough people there to do the job and then to have this private entity provide false information about the number of staff they had and, in fact, the number of staff they still have is still far short of where it needs to be.

My understanding is that they're short about 45 staff, and the Red Cross is bringing in 20—still not enough. Some of the front-line workers, they should be commended; they should also be paid properly. But for today's purposes, the government needs to step in and take over the management of this particular bunch of care homes run by Rivera, and they need to actually step up to the plate and run them properly and fund them properly and actually be accountable and transparent to the public, accountable and transparent to the families of those people that are in there to say, we can do better.

Those deaths are avoidable, and they'll do everything in their power to make sure that more deaths are in fact avoided. They won't just shrug their shoulders and walk away like they've done so far.

Mr. Deputy Speaker, I urge every one of those MLAs to really look in the mirror and say, is this what I'd do for my parents? And if the answer is yes, then they should be ashamed. Let's take over—

Mr. Deputy Speaker: The honourable member's time is up.

Mrs. Bernadette Smith (Point Douglas): I'm honoured to put some words on the record in support of the opposition day motion by colleague from Union Station has put forward.

We're in a crisis right now. We're having people die in our personal-care homes. This is spreading not only to our staff, but to residents. Families are having to come in and take care of their loved ones to help because these personal-care homes are understaffed.

We need the government to step in and take over Revera homes. Seniors are the backbone of our community and we've heard this government say it over and over and over again, that they value our seniors, they value the time and the work and the effort that they've put in to build this province.

But yet, their words don't speak through actions. We have personal-care homes in this province that are understaffed. We've had paramedics come forward and raise the alarm at what they're seeing when they're going into these personal-care homes.

Seniors deserve high-quality care and to live in dignity. They deserve to be safe, protected and kept alive in these personal-care homes. Families put their personal—put their loved ones in these personal-care homes to ensure that they're getting the best quality of care, that they're taken care of, that they're being fed, that they're being given water and that, you know, they're being taken to the washroom.

My mother-in-law recently has had to go into a personal-care home, unfortunately, and my husband and his family is fearful every day. It's in their personal—it's in her personal-care home. Thankfully, she hasn't contracted it, but, you know, our—these are our mothers.

And, you know, the member from Flin Flon just talked about, you know, would we be, you know, so slow to put in these parameters if it were our own parents? If these were our own loved ones, would we be—would we be hesitant? I think that we would not.

I think that we would be taking over these personal-care homes as we should be, because Revera is—had said they're understaffed; we've seen the result of it, which is, you know, people losing their lives, and we can't afford, you know, to lose our loved ones this way.

We're in a global pandemic. We can't afford to be putting money over people, and that's what this government had continually done in this province. They've continually shown Manitobans in a global pandemic, when more support is needed, more than ever, that they will not invest. They will not put money into the places that are needed the most, in our most vulnerable sectors, which are personal-care homes.

* (16:10)

Revera homes need to be taken over by this province until the pandemic is done, until we can get a handle on this pandemic in these care homes. Right now Maples has a total of 220 cases, or has had 220 cases; 165 of them are active and they've had 45 deaths. And, you know, I want to personally send out my condolences to all of those families—every family in this province who has lost someone to COVID or any other reason and has not been able to, you know, be with their loved ones in their time of passing.

Parkview—Parkview has had 159 total cases. They currently have 116 active cases and there's been 25 deaths. If this is not a reason to take over Revera homes, I don't know what is. We are talking about saving lives here. We're not talking about, you know, coming in and, you know, saying to staff you're not doing a good job, because we know that they're doing their best. We know that they're under-resourced. We know that there's not enough staff. We know that staff are contracting COVID, which is putting a strain on the system because staff are having to self-isolate. They're having to be off themselves because they're sick, and other staff are having to step up and do more than ever.

And I want to talk about, you know, the other personal-care homes that are run by Revera. There's five other long-term-care homes in Winnipeg: there's Beacon Hill, Heritage, Charleswood, Kildonan, Parkview, Poseidon; and all the families in these personal-care homes are worried about their loved ones. They're worried that—is there going to be enough staff? Is my loved one going to be left in a room to die? And is a paramedic going to come in and say that this person has been dead for some time now, that rigor mortis has set in—as we heard our paramedics speak out as they went into Maples Personal Care Home and spoke about what they witnessed.

They witnessed, you know, residents being malnourished. They witnessed, you know, people being dead for some time, and this should never happen. This should never happen in Manitoba, let alone anywhere in Canada, so we're imploring this government to stand with us. They have a chance today to save lives, to actually put money over people—to put people over money and reverse what they've been doing in terms of underfunding and cutting in a global pandemic.

We see our most vulnerable—and it's not only in our personal-care homes, but it's right across

Manitoba. It's in, you know, our non-profits, whether it's the homeless sector—and we're seeing people that, you know, are being kicked off EIA and having to sleep in shelters and people that can't afford to—that don't have access to masks that are dying as well.

And, you know, I want to talk about the story that this paramedic witnessed. And he put it on Reddit and he said: This is a true story that happened last night at Maples Personal Care Home. I'm a paramedic with the Winnipeg Fire Paramedic Service. I have had my fair share of personal-care-home stories, but last night was something out of a nightmare.

Yesterday, at around twenty-two-hundred hours, crews were called to Maples Personal Care Home for patient transport. Maples Personal Care Home asked for six ambulances at the same time. This raised some eyebrows. They sent two ambulances and a district chief of paramedic operations to assess and see what was going on.

Once there, staff asked the crews to assess twelve patients. Six at Maples were stating that they were understaffed: approximately two nurses for every 100 patients, and three health-care aides. The paramedics that were assigned assessed all patients that were required to assess and noted that many could be managed at the facility. They did not send—or they did send three patients to hospital; two of them were in critical condition.

While assessing patients, the paramedics were asked to check on other residents that was described as not breathing. When the medics went to check, they noted that this resident had been dead for hours. Rigidity and 'lividy'—lividity had already set in. The paramedics on scene expressed this and moved back to checking on the other residents that staff is requesting assessments on. Medics reported that some of these residents were just hungry but did not have the ability to feed themselves.

This is why we should be asking this government to stand with us in ensuring that all Revera homes are taken over by this government. This should not be happening. Right now, we have Maples that has 165 active cases. Forty-three people have died there. How many more people have to die before this government actually gets involved and starts to put more supports in place and make sure that no other family members have to die?

I want to talk about a family member who actually was a colleague of mine. His name is Manny, and his father, Manuel Calisto, was one of the persons who

passed away due to COVID. And you would've seen his sister speak out, Eddie, about what she experienced while she was allowed and given permission to go—

Mr. Deputy Speaker: The honourable member's time is up.

House Business

Hon. Kelvin Goertzen (Government House Leader): Thank you, Mr. Deputy Speaker and thank the members opposite for the appropriate cue for the House leader.

On House business, is there leave of the House to waive rule 92(4) so that the start time of the meeting of the Standing Committee on Social and Economic Development, on Monday, November 23rd, 2020, will be 5:30 p.m. instead of the previously announced 6 p.m.?

Mr. Deputy Speaker: Is there leave to have—be waived rule 92(4) so that the start time of the meeting of the standing committee of social and economic development, on Monday, November 23rd, 2020, will be at 5:30 p.m. instead of the previous announced 6 p.m.?

Is that—is there leave? *[Agreed]*

* * *

Mr. Dougald Lamont (St. Boniface): We're absolutely in agreement with this resolution. I would like to add some notes. What happened at Maples, for example, is truly shocking. I know that Eddie Calisto-Tavares was there caring for her father. We'd had a—we actually had a press conference before she went in there to talk about the crisis at Maples, two or three weeks ago, and 20 minutes after the press conference, she got a call confirming that her father was COVID-positive.

Madam Speaker in the Chair

I had friends reach out to me after that Maples crisis to say that they had, after day after day after day, every day, they would get robocalls and emails from Revera saying everything was fine. They suddenly got a message on a Saturday saying, sorry, your father is no longer responsive; he's not taking food or water. And he was dead later that day. And that was one of two emails that I had, telling exactly the same story.

It was clear that Revera misled Manitobans about this. We've called for an inquiry because this is an extremely serious situation that the levels of neglect here—I referred before, I said that these—I said in the

House that it verges on criminal negligence for which the First Minister—his major concern about that was not the negligence and lack of care in personal-care homes but the fact that I might be suggesting that something untoward had happened.

* (16:20)

This is something that's been going on for a very long time across Canada, that seniors have essentially been treated—or seniors homes have been treated as warehouses for senior citizens. They've been underfunded. They don't have adequate staffing. They don't—people aren't fed properly. They aren't given enough water. And this is not something that is new to the pandemic. This was known. My colleague, the MLA for River Heights, asked in May. We put out a press release. We put out—he had a member statement. We asked a question: Is this government going to put together a rapid response team for—that can handle three different crises at once?

After having read what happened in Ontario and Quebec in homes, and including Revera homes, because what happens is that once COVID gets in the staff have to leave and there's no one left to care for the people left behind. That is exactly what happened in Maples. That is what happened in Revera.

Everyone knew that this was coming. We gave ample warning, and I know that the Premier (Mr. Pallister) recently said, or yesterday said that I was—suggested I was being smug about being right about things. I'm very tired of being right. We've been setting off warning flares, red flags for months. We've been constructive; we've written letters; we've tried to provide ideas. And they've often just been dismissed out of hand. And they were based in evidence. They were based in what was happening in other jurisdictions. We were trying to learn the lessons from mistakes, and they were ignored, which is, again, why we've called—why we would like to see an inquiry into the second wave response.

The one thing I would add about this is that I think that this motion could go further, is that these homes should actually be taken over permanently. I don't see why that they should be left to the private sector, but I will also say that the living situations in personal-care homes predated the pandemic. Again, as my colleague from River Heights has mentioned, we—a couple or three years ago we wrote a report about the horrific conditions in a personal-care home in Portage la Prairie where people were not being cared for, people had broken bones and were being left untreated

for 24 hours. They were not fed. They were not given oral care.

But the tragedy of this is that this is not new. I had a friend who mentioned that her grandmother was very upset hearing about the cockroaches at Parkview Place, because they'd been fighting about this back in the 1980s. And one of the defences that the Minister of Health raised against criticisms that there were—there was a cockroach infestation that hadn't been treated for a year that was discovered in March 2020 was that it had been there since 2006. That is an incredible indictment of the failures, the systemic failures to deal with the living conditions of seniors in Manitoba.

And I will add, this government has also recently, in the last few days, been boasting about all the great things they've done because they said they were going to spend \$280 million for safety upgrades in personal-care homes. Now, what that actually means is they're putting sprinklers in. It is unbelievable that we have a situation where seniors homes don't have sprinklers. This is absolutely basic. It is not—to suggest that this is something special that's being done—this is like boasting about getting up in the morning and brushing your teeth. The fact that it is supposed to be something special or exceptional that we are going to be investing money into putting sprinkler systems to prevent fires in seniors homes is not something exceptional or special for which we were supposed to be grateful. It is the absolute bare minimum of safety that's required.

And part of the issue here is that the—is that these promises of the fiscal update that were made in June were presented as being something to do with the pandemic or COVID, basically a sticker saying pandemic was stuck on these promises, which had nothing to do with any COVID preparation, because no COVID preparation took place.

The fiscal update happened in June, and I will read—I've read many times from this—the Long Term & Continuing Care Association of Manitoba, *Shining a Light*—this is from August—where they said: Manitoba's regional health authorities and government have ignored their responsibility to fund their public health orders and directions in long-term care. They ordered—they created financial obligations for long-term-care facilities and said, well, you're going to have to spend all this money to try to make these places safer, but we're not going to give you any money for it. We're not going to give you any extra money for it.

It said, the COVID-19 costs—and this is also critical—are in addition to the PCH situation in terms of 15 years of funding freezes. The funding freezes at PCHs predated the Conservatives. They've been there since 2005.

In addition, no funding for increased supplies around infection prevention and control, and zero annual inflationary operational increases. Nothing for 15 years.

So we should not be surprised that there's an absolute crisis because we've been ignoring an ongoing crisis, as we often have in Manitoba, and pretend that everything was fine, and I've talked with personal-care aides who've struggled to do the right thing and blow the whistle, and about the horrific treatment of seniors, and there is—and they end up being punished for it.

I'll add it also says, and I will—and this completely supports what the NDP has said in terms of cuts, as well, for the past two years, direct funding reductions were implemented, along with other regional cost-saving measures which many times directly and negatively impacted our members.

It is absolutely unbelievable. The idea that this—any of this was unexpected, that any of this was not preventable, is absolutely appalling. The Manitoba government and regional health authorities have not committed to funding any COVID-19-related incremental costs incurred due to guidelines, directives, and public health orders that we have been mandated to follow as other jurisdictions have.

Manitoba is an outlier in ignoring—ignoring the recommendations and lessons learned across the country and from around the world. Unsustainable reductions are being made in significant areas of each personal-care home in support of housing operations to ensure sufficient cash flow is available for other items, such as payroll-related items, repairs and maintenance.

And I'll add this: this is not new. For more than 50 years, appeals for operational infrastructure funding to upgrade and improve the physical care environment, especially for dementia care, infection prevention, and control and safety have been submitted and largely ignored.

This is not new. The MARCHE report in 2015 made it absolutely clear that more than half of personal-care homes in Manitoba were not upgraded. you had people sharing bathrooms, people sharing rooms, insufficient infrastructure in place—all things

which would lead to the rapid spread of COVID-19 because people were unable to self-isolate and unable to keep themselves safe.

And I mean, I—the changes that have been made in the last two years have also—have been, without question, horrific. I have had to help health-care aides who have been told they have six minutes to help bathe a 100-year-old man.

We are treating—the expectation from KPMG and bean-counters who think they know better about how to run a health-care system means that we treat human beings like they are something on a production line—

Madam Speaker: The member's time has expired.

Mr. Diljeet Brar (Burrows): I appreciate the opportunity to put a few words on record regarding today's opposition day motion.

I would start with a great appreciation to my colleague, member from Union Station, to bring this motion forward, and I would appreciate my colleagues from my caucus who spoke in favour of this motion, and I would expect the members opposite to support this motion because this motion is in favour of Manitobans. This motion is in favour of the families who have their parents, grandparents, at personal-care homes. And this is in favour of all Manitobans who are worried about, who are scared about, who are upset about the conditions at various personal-care homes in Manitoba.

* (16:30)

My office is getting calls from my constituents who tell us that their parents are not taken care of well at the personal-care homes they are at. There is lack of staff; they are witnessing poor conditions; they are not getting enough information about how their parents, grandparents are taken care of. They're not attending the calls from family members and basically they are understaffed. There's a great lack of care about our seniors, not in one, not in two, but in many, many personal-care homes.

There is something wrong. There is something wrong. And I think there is something wrong with the leadership. There is something wrong with this Premier (Mr. Pallister). There is something wrong with the Health Minister, who thinks that these deaths in personal-care homes are unavoidable. It's about your perceptions. It's about your vision. It's about your political will.

Once you think that these deaths are unavoidable, that's when you take strong steps to save those loved

ones, those seniors. But what if you give up at the start of a project and you start saying no, these seniors have to die because these deaths are unavoidable?

There is something wrong with the PC caucus. Instead of availing this opportunity to support today's opposition day motion, they're telling stories, they're telling sweet stories about their relatives celebrating birthdays and they're telling that personal-care—*[interjection]*—they're telling stories about relatives at the personal-care homes and they're telling stories about how caring—*[interjection]*

Madam Speaker: Order, please. Order, please. Can the member of Burrows just hang on a sec?

Can the member for St. Boniface (Mr. Lamont) please mute his mic? It's carrying over into the debate here.

The honourable member for Burrows, to continue. Thank you.

Mr. Brar: I was—I am upset about the comments made by a few members opposite.

They were—I was saying they were telling some stories about their relatives, their seniors, their family members celebrating birthdays and personal-care-home staff saying happy birthday to you.

We never said that personal-care-home staff is not caring. We never said that they're not hard-working. We never said that they're not loving. They are. And I want to say, once again, a big thanks to all the health-care workers working in Manitoba and in other provinces who are fighting for our us against this pandemic.

I think these PC members, they are taking an opportunity to dodge the real question, which is we have to show leadership to save lives. If everything is okay, if everything is fine in all the personal-care homes like happy birthday song, then why, then why we have 220 cases at Maples Personal Care Home and 165 of them that—active? Why we lost over 40 residents at Maples Personal Care Home?

Everything is not right, Madam Speaker. We need to take necessary steps to save these seniors. We are losing. We are losing Manitobans every day—every day, in spite of the commitment and hard work of these personal-care-home staff. Why? Why we are witnessing those deaths? Because there is something wrong in the management.

We have been calling on the government to take over these personal-care homes for weeks, not

just through this opposition day motion, but the government did nothing. Rather, they're debating against this demand, and they're saying that we should work together with Revera to make things better.

And how funny it is when one of the members opposite uses an analogy about a grade 3 kid learning math. My dear friends, Revera cannot be compared with a grade 3 kid. Revera is taking care of so many personal-care homes in this country. There are so many lawsuits against Revera. We're not speaking up because Revera is a private company; we are speaking up because they misled Manitobans.

It's been published in the media that they are short of 45 staff. What did the government do about it? Sent just 20 from the Red Cross.

I am upset about this government. I am upset about this Health Minister and the Premier (Mr. Pallister) because they love money over Manitobans. They stand for their austerity agenda; they do not stand for people, they stand for balancing the budget. They just want to save money while they need to save people. I won't appreciate a balanced budget if I lost my grandparents in one of these care homes. And I was thinking, for a moment: if I'm a senior, and I lost my life while being at one of the personal-care homes, would my kids appreciate this Premier balancing the budget?

I am very upset with the comments from the members opposite who are trying to speak against this motion. I would rather expect them to support this motion because they have an opportunity to support this motion, to stand up for Manitobans, to save lives at our personal-care homes. This government should be ashamed of their inaction in spite of so many calls by the media, by Manitobans and by us to save our seniors.

Thank you, Madam Speaker.

Mr. Matt Wiebe (Concordia): It truly is a powerful afternoon here, this afternoon in the Legislature.

I've often said that I feel that when we are talking about our own personal experiences, or the personal experiences we've heard from our constituents, are the days that I think we have the best debates here in this House. And that's certainly what we've heard here today.

To all the members of the official opposition who have stood up, who have put those important words on the record, I want to thank you. I think it gives us all pause and it helps us remember what we're doing

here as legislators. To hear their passion, sometimes their anger and to hear their frustration I think represents what we're hearing from our constituents so well.

And the fact that it is us as the official opposition that's bringing this issue forward here this afternoon, rather than the government, speaks volumes, Madam Speaker. We're here to do the work of Manitobans, we're here to put this—these important issues on the table, but there is nothing more important in this province right now that we should be debating, nothing more important than this issue that we should be debating. Not just COVID, not just the pandemic, not just how it's impacting Manitobans—and there are numerous ways we could be talking about how it's impacting Manitobans. We could spend days just talking about that.

* (16:40)

But this issue in particular—our elders, our seniors who are helpless and frustrated and families who are feeling frustrated, there's nothing more important that we should be debating here this afternoon. And it is this opposition who has brought it forward, and I'm proud to stand to second this important motion here this afternoon.

You know, there's been much made about partisanship during this time. And, you know, you can tune into question period any day of the week to hear accusations of you're being partisan or you're not on team Manitoba. And I find that debate and that conversation so detrimental to what we should be doing here as legislators.

And, you know, take—even take away the theatrics of the question period, and just the interactions that we have as legislators. I mean, people have been getting frustrated, tensions have been high. And despite all of that, I think we have brought forward very reasonable requests and suggestions. It's been this opposition's goal right from the beginning to not just oppose for the sake of opposing, not just score political points when they can be scored, but in fact to bring forward what we can to help deal with these issues and this crisis.

And this is a perfect example where we've brought forward our—a motion because this is one of the few ways that we can get this kind of debate before the Legislature. We've brought forward this motion in a reasoned way, in a way that's very straightforward. All we're asking for from this government is to step in, to take control so that they can get the right

resources to the places that need them and not in some kind of far-off review that we need to be—that needs to be done or look back and how can we do this better. This is happening now, Madam Speaker, this is happening in our personal-care homes right now.

So how is it that this government cannot stand and support this? How is it that they cannot stand with us when we look at other jurisdictions? As the leader of the opposition said, what is the best practices, how have they dealt with this before, how can we do this and how can we fully integrate our emergency measures, our public health officials with what's going on?

And in this case, when you have a company who has blatantly lied to the Minister of Health and to health officials—and, you know, we had member after member on the government's side stand up and say we stand with the workers—everybody agrees with stand with the workers, we stand with those families who are going through this, but none of them will come out and say that we need to take control, that we need to take this extra step. It's so very important, Madam Speaker.

So I just ask today, you know, we often get accused of in—as legislators, we often get accused of being, you know, all words. It's just a lot of talk; what are you guys doing down on Broadway? Here's something we can do today: we can come together, we can make this happen here today. We can join together and, you know, we can make a difference today because, you know, Madam Speaker, I talked to constituents who have been in Parkview as well, and the stories that they've told me have been sickening, absolutely sickening. And the way that they feel trapped, the way that they feel they have no choice because, of course, you know, their elders need that care.

We can give them a bit a hope here today, and it doesn't really require much at all, it just requires a government that will take action now, that will step in, that will do the right thing when we have the opportunity. I reach across the aisle today again to just ask that we all stand united, we vote unanimously for this resolution and we show Manitobans that we will do whatever it takes to ensure that Manitobans are safe, especially our elders and especially our seniors.

Thank you very much, Madam Speaker.

Ms. Danielle Adams (Thompson): I rise today in support of this motion.

If the PC government had provided the leadership and the funding for personal-care homes, we would not need a motion like this. However, that is not the case.

This government has not made public health a priority during this health crisis. There's a lack of planning and failure to listen to the medical professionals, which is the reasons we have the highest rates of COVID-19 per capita in Canada and many of the states in the US.

My colleagues and I on this side of the House know how hard the staff is working to provide care for the residents. We know they are doing the best they can with the resources they have.

It is unacceptable that this government didn't take steps early on. Instead, they rested on their laurels. We had seen what happened in other provinces, what conditions Revera homes were like. Instead of having Revera homes have a review to ensure they could provide the needed care and a clear plan if there was an outbreak for both the residents and the families to stay informed.

Seniors deserve the highest quality of care so they know they are safe in their homes. The personal-care homes where they live are their homes, and everyone has a right to be safe where they are living. That has not been the case for the people living in these homes. What we are seeing is increases of cases and deaths. This government could have done a lot more.

Ongoing testing for staff: Ontario tests the staff twice a month, ensuring cohorting is done properly, ensuring staff have access to proper PPE. They could have been offered paid sick leave so it's easier for staff to stay home when they are sick. They could have ensured Revera had staffing in place to deal with outbreaks at their facilities.

The VP of western Revera operations came out and misled Manitobans, and I'm guessing the government officials, about the staffing levels at these homes.

This government has not taken this seriously. Government inspected during the—halted inspections during the pandemic, when oversight was needed the most.

Not one of the cases at the Revera had been handled like this. To protect our seniors, government homes and the Revera homes, let's look at the stats: Maples had 120 cases, 165 active cases and 43 deaths.

Parkview had 159 total cases and 116 cases are active and 25 deaths.

Revera runs personal-care homes—seven personal-care homes in Winnipeg: Beacon Hill, Heritage, Maples, Charleswood, 'kondonan', Parkview, Poseidon. And what are the state of those homes operated by Revera? What has the government done to ensure other homes provide the care needed?

After it became public that leadership at Revera said that—was short 45 staff, the Red Cross is only bringing in 20. Where is the other 25 staff coming from?

The WHRA admitted last week that they knew about the issues at the Maples Personal Care Home prior to the outbreak—breaches of infectious control, insufficient record-keeping and a lack of resident oversight—but the minister still refuses to release the inspection report after the two town halls following the shocking events. Families still don't feel the Revera situation is under control, and I don't blame them.

Manitoban seniors and their families pay hundreds of thousands of dollars each month to be taken care of at these facilities, and that's not what's happening. We have seen the horror stories about the long-term-care facilities. Cockroaches at the Parkview Place; residents are being left in their own urine and feces for hours calling for help and nobody is coming.

I ask members opposite: Is that something they are okay with? The redeployment of health-care aides does not address the ongoing staff shortages in the long 'term' care homes. It owes only a band-aid solution, and it puts more strain on health regions. What happens if there is an outbreak in other facilities in other regions? We've seen how quickly an outbreak can occur.

This government needs to step up and provide the leadership needed. It starts by making the difficult decisions, starting with Revera. Revera has shown, not only in Manitoba, but in other provinces, they are not equipped to handle this. But instead of standing up for Manitoba, this government is picking fights with doctors, teachers, child-care professionals; sending faulty and expired masks.

It took number—a number of days for the government to take responsibility and recall those masks. Now they're telling the same professionals it's on them to prove they received those recalled masks.

The government needs to stop playing games and start putting Manitobans first, and it start—I sit here and I wonder why this government hasn't taken care of the personal-care homes or called in the military. The answer is simple: they care more about money than they do people's lives.

* (16:50)

We know they have made ongoing cuts to health care during this health crisis. They cut \$1.6 million to the care homes in the southern region. They privatized Lifeflight. I can tell you, at \$30,000 a flight, that choice is going to cost more money than they thought it would save.

They've made it harder for northerners to receive health care. Instead of hiring somebody in Leaf Rapids, they chose to close the health centre for 14 days with very little notice. If it wasn't for MKO, that community would've been without health care. I ask you: How is that care closer to home?

In the case of my home community of Thompson, this testing site is a shared space with a walk-in clinic. If someone goes to the doctor to see—have it be—due to an ear infection, they are now sitting there with somebody who may or may not have COVID.

We know that they are behind in contact tracing. It is taking weeks for people to be notified they were a COVID contact. We know they are behind on testing, for a week or more. The Premier (Mr. Pallister) is saying that they've increased testing by 20 per cent but that's not good enough. We need more testing to be done. Let's be clear: it is not—the staff did not let down the people in the personal-care home; the government let you down.

I'm asking members opposite to do the right today and vote to take—have the government take over Revera homes. How would you like to be remembered: as somebody who put people first or put profits ahead of people?

Thank you, Madam Speaker.

Ms. Malaya Marcelino (Notre Dame): Before I speak on this motion of personal-care homes, I want to raise what other hard-hit provinces have done over the summer to increase staffing levels in personal-care homes. The Ontario PCs have put up \$50 million to step up recruitment efforts; the Quebec government hired 10,000 workers over the summer, paying them \$21 per training hour and \$26 per hour for working hours.

Over our Manitoba summer, instead of a determined staff recruitment drive for our personal-care homes, the Pallister government engaged in an open-for-business ad campaign. Instead of ensuring PPE stockpiles for our health-care workers, we have health-care aides and nurses filing formal grievances in over 55 health facilities across the province because they don't have access to N95 masks while working in COVID-19-positive wards.

Madam Speaker, this motion is not about partisanship or ideology. This motion is about the government taking its rightful leadership place in the midst of a crisis to protect our most vulnerable in a pandemic.

Madam Speaker, seniors in long-term care make up over 80 per cent of all COVID-19 deaths. In the spring, the Canadian military was called in to take over the crises in personal-care homes in Quebec and Ontario and now the military is in Manitoba. Just this morning, the military was sent to our province's north to support Opaskwayak Cree Nation, whose personal-care home there has every single resident and many staff testing COVID positive.

Now, Canadian researchers have been diligently looking at this issue carefully since this horror unfolded in the spring. These researchers apply scientific principles and not ideology for their study design and methods. Researchers have identified that devastating outbreaks and seniors' death due to COVID have occurred in private, for-profit personal-care homes, as opposed to publicly owned and operated homes.

In August, the Canadian Medical Association published their study entitled: For-profit long-term-care homes and the risk of COVID-19 outbreaks and resident deaths. This study shows that for-profit and not-for-profit homes suffered from the same likelihood of outbreak; however, in for-profit personal-care homes, those outbreaks led to bigger, severe outbreaks and more seniors' death due to COVID.

In addition, there are observational studies that suggest that for-profit long-term-care homes tend to deliver inferior care across a variety of outcome and process measures. Now, these include lower levels of quality in staffing, more complaints from residents and family, higher rates of emergency department visits, more acute hospital admissions and higher mortality rates. Evidence from the United States suggests that for-profit long-term-care homes are also

more likely to receive deficiency citations for infection control and hand hygiene practices.

The authors from the CMAJ study have identified factors that private care homes share in common, that have contributed to more severe COVID-19 outbreaks and more COVID-19 deaths. Researchers identified that for-profit homes usually have chain ownership, usually have residents housed in buildings with older, outdated design standards. For-profit homes usually have poor ventilation systems and usually have care homes where more seniors are housed together. Now, these factors all contribute to more severe COVID outbreaks.

This higher death rate in the profit-making homes began in the first wave of the pandemic and it continues now in the second wave, and this is according to an investigation series published by a team of Toronto Star reporters. All these studies and investigations bear our attention as legislators. This situation should alert this PC government to question their continued defence and continued rush to privatize services that would be better left to the public sector. Not just nursing homes, but health care, education and other areas where the public interest is at stake.

Privatization for this PC government is part of their ideology. It's so ingrained that it's not even questioned. PC members on the other side routinely assert that the private sector is more efficient and always does things better. Always? Where is your evidence for that as it pertains to personal-care homes?

The crucial difference between the private and public sectors is that the private sector is focused on profit-making, maximizing profits as its board of directors demands. Now, how do you make profit in personal-care homes? Let Revera count the ways: hire racialized and immigrant women who don't complain about rock-bottom wages and no benefits, hire as few workers as possible and give them only part-time hours, buy an old building with outdated ventilation systems and stuff as many residents as you can in there, multiply your profits by employing a franchise chain model.

There is serious money to be made in this for-profit franchise personal-care home model. The top three franchises over the past decade paid out \$1.5 billion in dividends to shareholders and \$138 million in executive pay, according to the Star investigation.

So why is the opposition zeroing in on Revera today? Because over 80 per cent of care-home residents who have died from COVID-19 lived in facilities run by Revera. Because as a chain with seven personal-care homes in Winnipeg, their MO is the same as other for-profit chain-care homes.

We on this side of the House are not against small or big business; they are integral to jobs and to the economy. We are not against the role of the private sector or franchises; they are really good at selling coffee, Timbits, french fries, fried chicken.

We are against the private sector running personal-care homes that are supposed to serve the health, social, mental, emotional well-being of vulnerable seniors with complex health needs. Revera-run homes are now in crisis mode; the Red Cross has been deployed; families of Revera residents do not feel that their loved ones are safe.

The private sector does not always do things better; they always do things to make a profit and, in the case of our personal-care homes, that has left our most 'vulneralbuh' in this pandemic paying the ultimate price.

Thank you, Madam Speaker.

Madam Speaker: Just for clarity of the House, according to rule 30(15), the House shall not adjourn until all members wishing to speak on the motion have done so.

Are there members still wishing to speak?

Mr. Ian Bushie (Keewatinook): Thank you, Madam Speaker, for the opportunity to put a few words on the record.

There's a number of buzzwords that come to my mind: respect, honour, integrity, dignity. Those are just a few of the words that are owed to my parents, your parents, your grandparents, my grandparents; they're the life-givers of everybody in this Chamber, of everybody in this province, of everybody listening to what we're debating here today. So we owe them that respect. We owe them that respect that they've earned throughout their lives. And in this time of COVID-19 and in this time of this pandemic, you have to question whether or not we're giving them the due respect that they've earned, that they deserve.

* (17:00)

For my communities—my Indigenous communities, which—we don't have a large number of personal-care homes in our communities, so it's a real

fear. It's a real fear when our elders get sick, when our elders are not well enough to maintain and stay at home, that have to leave their community. So when they leave their community, the fear is that they'll never come and they'll never be able to return back to the life that they've always known in their community.

So we're not helping that fear by putting them in a place that's being run by Revera and the conditions that we're putting our elders in and we're having them forced to live in. So that fear that they have about never being able to come home, that fear they have about being isolated, being forgotten about, that fear is becoming a reality and that fear is a reality today and it is a reality [*inaudible*].

Is it because of COVID-19? To a certain degree it is, but it's also because of the conditions that are placed in these homes with no oversight. And that's all we're asking here, we're just asking to have that respect, that honour, that integrity, that dignity given to our elders that they so rightfully deserve.

Instead, they're put in there and forgotten about and that's the fear that they've had their whole lives about being able to leave their communities, leave their homes and be placed somewhere else, be shunned away and put into a home that they're never going to be able to get out of.

So, the other day when we spoke about just Sergeant Tommy Prince and his story, about being able to go and be—fight for a country and fight for what he believed in and he brought that—he fought that fight and we know his story today. But these elders and our elders that are in these care homes, we don't know all of their stories.

So I don't want to get to the point where we sit back in one year, 10 years, 50 years and then we hear of a story of an elder who was in this home and how they were very heroic and they fought for what we believe in and they fought for and brought integrity and honour to their family, to our communities, and then we don't know their story and we find out later and we find out what happened. How did they pass away? They passed away in a bed all by themselves in filth, living in a home that's supposed to look after them, supposed to look after their well-being, supposed to be able to support what they do and encourage what they are and have them—if that's the last years of their lives, live it with dignity, live it with honour, live it with respect. And that's just simply not happening in there.

So when we sit there and I hear different phrases come out of this government: we got this. Today, I heard the phrase: to everyone's satisfaction. If what is happening in the Revera homes is to everyone's satisfaction, that's just—I'm embarrassed. I'm embarrassed that that's the terminology that's used in what we're doing there, that it's to everyone's satisfaction that our elders are having to live that way, having to live in homes that way. We don't even know what's going on there.

So, what are we asking here? We're just asking for that integrity and that respect that's owed to our elders to be honoured, to be honoured by this government, this government that claims to speak for all of Manitobans. Well, our elders are Manitobans also, so who is speaking for them? And this government needs to speak for them.

So I just wanted to put a few words on that record here. And on its very face, we're asking for this government to have oversight and then be able to control and have that dignity.

So, from a PC government that loves to have control and dictate, support this motion. We're actually wanting you to do that; we're wanting you to get out there and dictate and control what's going on. You're given our okay, you have our blessing, so why aren't you supporting this? What's the fear? What are you scared of? Why not get in there and take the actions that our elders are crying for?

But, you know what, they're not even able to cry out, they're not even able to call out for that because that has been taken away from that also. Whether it's due to COVID or whether it's due to just the false information that's coming out of these homes, that's something that needs to be addressed and that's all we're asking for here. We're just asking for that oversight and that willingness to work together.

We talk about partisan, non-partisan, team Manitoba, let's get on board, let's all work together. Well, here we are, we're trying to work together. Let's get together and work together to support our elders, to encourage and make sure that they live the lives that they've earned and they live that—and they've earned that dignity and respect, so let's give them that.

Miigwech.

Madam Speaker: Are there any other speakers on this debate?

Mr. Wab Kinew (Leader of the Official Opposition): Madam Speaker, I just want to thank

our colleague from Union Station for bringing this important motion forward here. And I just want to thank you for giving us the opportunity so that we can all be recorded in how we stand in this historic moment, when seniors were dying, when long-term-care homes were in crises, when our province was facing the greatest challenge that we have seen in our lifetimes.

How did the MLAs in this Chamber vote? Did they stand on the side of seniors? Did they stand on the side of health care? Did they stand on the side of our communities and making sure that we would all be able to see the year 2021? Or did they put party ahead of province?

So, thank you so much for the time, and I look forward to a recorded vote.

Madam Speaker: Is the House ready for the question?

Some Honourable Members: Question.

Madam Speaker: The question before the House is the opposition day motion in the name of the honourable member for Union Station (MLA Asagwara). Do members wish to have the motion read?

Some Honourable Members: No.

Madam Speaker: Is it the pleasure—I heard a yes.

The opposition day motion states that the Legislative Assembly of Manitoba urge the provincial government to immediately take over operations of all Revera personal-care homes in Manitoba, including the Maples and Parkview personal-care homes for the duration of the pandemic to ensure the safety and well-being of seniors in care, and also be urged to immediately publish all inspection reports of Revera care homes as well as all other personal-care homes in Manitoba.

Is it the pleasure of the House to adopt the motion?

Some Honourable Members: Yes.

Some Honourable Members: No.

Voice Vote

Madam Speaker: All those in favour of the motion, please say yea.

Some Honourable Members: Yea.

Madam Speaker: All those opposed, please say nay.

Some Honourable Members: Nay.

Madam Speaker: In my opinion, the Nays have it.

Recorded Vote

Ms. Nahanni Fontaine (Official Opposition House Leader): Madam Speaker, a recorded vote, please.

Madam Speaker: A recorded having been called, call in the members.

* (17:10)

The question before the House is the opposition day—oh. We're just going to verify the list we have of all our members that are on remote.

The question before the House is the opposition day motion.

Division

A RECORDED VOTE was taken, the result being as follows:

Yeas

Adams, Altomare, Asagwara, Brar, Bushie, Fontaine, Gerrard, Kinew, Lamont, Lamoureux, Lindsey, Maloway, Marcelino, Moses, Naylor, Sala, Sandhu, Smith (Point Douglas), Wasyliw, Wiebe.

Nays

Cullen, Eichler, Ewasko, Fielding, Friesen, Goertzen, Gordon, Guenter, Guillemard, Helwer, Isleifson, Johnson, Johnston, Lagassé, Lagimodiere, Martin, Michaleski, Micklefield, Morley-Lecomte, Nesbitt, Pedersen, Piwniuk, Reyes, Schuler, Smith (Lagimodière), Smook, Squires, Stefanson, Teitsma, Wharton, Wishart, Wowchuk.

An Honourable Member: I vote no.

Madam Speaker?

Madam Speaker: Yes.

An Honourable Member: They bypassed my name in the vote.

Madam Speaker: Hang on one sec.

I would indicate to the member that when the bell goes off is when we do the screen shot and the member's camera was not turned on. So her vote can't count.

Deputy Clerk (Mr. Rick Yarish): Madam Speaker, Yeas 20, Nays 32.

Madam Speaker: I declare the motion defeated.

* * *

Madam Speaker: And the hour being past 5 p.m., this House is adjourned and stands adjourned until 1:30 p.m. on Monday.

LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, November 19, 2020

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