

THE LEGISLATIVE ASSEMBLY OF MANITOBA

8:00 o'clock Tuesday, January 31, 1967

MR. LYON: Mr. Speaker, if you would be good enough now to call the motion on Supply.

MR. SPEAKER: that the House resolve itself into a Committee to consider the Supply to be granted to Her Majesty.

MR. EVANS: Mr. Speaker, I beg to move, seconded by the Honourable the Minister of Health, that Mr. Speaker do now leave the Chair and the House resolve itself into a Committee to consider of the Supply to be granted to Her Majesty.

MR. SPEAKER presented the motion and after a voice vote declared the motion carried and the House resolved itself into a Committee of Supply with the Honourable Member for Arthur in the Chair.

COMMITTEE OF SUPPLY

MR. CHAIRMAN: Department of Health 1 (a). The Member for St. Boniface.

MR. DESJARDINS: Mr. Chairman, I believe that yesterday we were talking about some of the problems that the department had to face, the Minister had to face. I brought in the fact that we seemed to have shortages; there was the shortage of nurses, hospital personnel and doctors that we covered already, and then of course the shortage of beds and the shortage of money, and this is what I would like to speak on tonight, but before starting these remarks I would like to suggest and ask the Minister, from now on - and I think that he said that the year will be changed now; it might make this a little easier - that the Manitoba Hospital Commission would work on a different year, on a calendar year now. I wonder if we could have the annual report of the Manitoba Hospital Commission before we could study these estimates, because this is something that we really need to go in this department and without them there is a lot of things that will be very difficult to discuss, so I wonder -- I asked him last week if we could have that and I know that this is difficult. I am sure that as soon as these are available that he will see that we get them. I don't know if we will be finished the estimates by then but I wonder if the Minister would be kind enough to look into this to see if, starting this year, anyway, it is possible to have this annual report before we go into these estimates.

Now I have a few suggestions here that I would like to pass on to my honourable friend. I think that they are worthwhile. I would like him to study them and I certainly would appreciate hearing his comments on this. Again I am dealing mostly with the shortage of beds and the shortage of money, because these are the important things that we are faced with in this department. The Minister told us yesterday that there will not be an increase in premium. He also told us that the premium, I think, was lower than it was five or six years ago. Well, I think he should have added and I think he should tell us the rest of the story, because this doesn't mean anything when you figure that since then we have had an income tax, a hospital tax and this is the real reason if the premiums haven't increased, because no doubt this department and the hospitals are costing us an awful lot more money than they did in 1948.

The first suggestion, I would think that we should - and this should be done, I mentioned this briefly last year. I think that we should have all the administration of all hospitals under the same roof, as you might say. I would like to see the Manitoba Hospital Commission administrator, be in charge of all the beds. I think that it is awkward, to say the least, and I think that it's ridiculous to see that the Hospital Commission is in charge of certain beds, administrators certain beds, and that other beds do not even come under the same department - they are administered by the Department of Welfare. Now one of the reasons, I might be told, is because certain beds we get certain grants from the Federal Government, but I am talking about the administration now. I think that we would be able to know what is going on a lot more than we are doing now. In other words, I would like to see the beds, the acute beds, rehabilitation, geriatric, chronic, all these beds and even - well of course the Home Care program comes under the Manitoba Hospital Commission, but I think that if this was the case we could stop for awhile; we could see how many beds we need. It seems now that we are talking about building hospitals and I know from this side we are also urging you to build more hospitals, but some day we will have to realize that we can't build, we can't have a bed for every single person in Manitoba, and I don't think - we seem to start by the top now; we are talking about acute beds. I think that if this administration could be transferred to the Manitoba Hospital Commission, which rightly should be, and this Commission could start a survey immediately,

(MR. DESJARDINS cont'd.) a survey that would tell them exactly how many beds they have in each category. In other words, how many beds for acute care, rehabilitation, geriatric and so on, and then they could also in this survey determine how many of these beds in each category could be occupied by people who could go down a category.

I don't know if the Minister knows exactly what I mean. In other words, in the what we call the acute beds, how many of these patients quite easily could go down to Rehab. Hospital or geriatric hospital and so on, and I would include the nursing home in here. When we are paying up to \$70,000 for a bed it is time that we start thinking, it's time that we start thinking about these different hospitals, and when we have a shortage of manpower in the personnel I think that this would help an awful lot, and this would go on with what I mentioned previously of trying to use this on weekends and so on, but I want to tell the Minister here and tell the members that I am not criticising the Commission. By the way, I think it is doing, especially the Chairman, I think he is doing excellent work and this is quite a difficult job that he has got there. I don't envy him at all, and this is imposing, giving him more work, but I think this is the only decent thing to do, the realistic thing to do, that we have the administration of all hospitals, all patient beds under the same roof.

I think that another thing they could do - they could revise their list of priority on construction. Mind you, I think it needs revision because a few years ago I was asking the Minister if we should have a hospital in the north end. The Minister at the time answered me that this was not needed. He told me that they didn't contemplate, they didn't have any plans for building in the north end, but he did say that as far as he was concerned, he lived way at the other end, he would have to come to the north end and it was practically just as easy to come to the General and to other hospitals. Now, I don't say that I agreed with the Minister, but I kind of appreciated and thought he had a lot of courage to say that, he certainly wasn't playing politics. But during the last campaign it was a different matter. Quite a few of these, especially those, the Conservative candidates in the north end, they were all wanting that hospital being built in the north end. Quite a few used that during the campaign but the Minister I think was very honest and I certainly don't accuse him of wanting to play politics on this.

Now I would like him to give us his policy, his ideas on this question of priorities, because I see now where the Chairman of the Commission tells us that this is in the planning stage and that we should have a hospital in the north end. Many people think that it is needed. Of course since then there has been quite a bit of pressure from the City Council, especially from the aldermen out there. I want to know if the Minister is just afraid of the pressure, or the Hospital Commission. I don't think the Hospital Commission is too worried about this, but is the Department, or the Provincial Government worried? I think that we have to revise this list of priority but again I can't say that -- I feel this suggestion that the administration should come all under the same roof is a very important one.

Then the other suggestion that I have and I think this is even more important, and this will not be a popular one, but I think that it will help the department, it will help the commission, it will help get rid of a lot of abuse and I think that it is the right thing to do. I would like to see us bring in a deterrent. I think that it is the only thing; we've got to keep that cost down; we've got to get rid of some people who are going there just for a holiday and we cannot say it is up to the doctor and the administration. It is quite difficult, quite difficult for a doctor to tell his patient that he must go and I think a deterrent would bring in more revenue. It would also, I think, shorten the stay in the hospital and get rid of some of the people who actually don't belong in these hospitals, especially when we have such a waiting list.

Now I want to say this to the Minister, though, before I am accused of anything, that we should have a plan, a catastrophe plan. I wouldn't want anybody to be able to lose his shirt or be in real trouble because of some kind of an emergency. A deterrent -- I don't care how he does it; it might be by days; it might be certain days for certain sicknesses or so much a day, I don't know; but I think he should look into this very seriously. It's not popular politically but it is something that just has to come. It's going to do so much good, it's going to help so much and it's going to cut the price down and we are facing now -- we have to be realistic about this. The Commission stated, and the Minister stated yesterday, that the hospital will have a 10 percent reduction on what they want, but if we're ready to face this, and I admire the Commission; I admire the Minister to be able to say that he'll do this. I don't envy his job, because I think these hospitals, these people that prepare these budgets are certainly sincere and they know what they want, but I understand and I'm not going to take the easy way out and blame

(MR. DESJARDINS cont'd.) the Minister and say, all right, we should give them all the money they want. I know that you've got to hold on once in a while, and I think that this deterrent would do an awful lot of good. So those two suggestions -- it would be something completely new, this business of administration all under the same roof, and this deterrent, but I think those two suggestions are certainly worthwhile. I think the Minister should study them, maybe with the Commission, and I certainly would like to hear his comments on this.

There's another thing that we might - maybe I'm not telling the right Minister here - but there's something that we should review again: the idea of a sweepstake, hospital sweepstake. We're at this stage, as I say, that it's very important to have the money, if we're not going to have the sales tax and if we're not going to have the increased premium, and if we're not going to cut down too much on the services, and I for one would certainly be ready to go along with that. This is another thing that will not be too popular but I think we have to pitch in; we have to work together on things like that now. Maybe we should not play too much politics until we can straighten this thing out at least, and it's going to cost us an awful lot of money and this is the department that could bankrupt the province if we're not too careful.

I also mentioned the other day, and I want to repeat this: I expect a little more leadership from the Minister. I think that he must tell the people of Manitoba and the doctors of Manitoba and those that are contemplating coming to Manitoba, I think we've got to have a policy in the government - it's got to be spelled out - the policy of university hospitals. Again I don't envy him; it's a difficult decision, because we can't do away with research and training and education. It is a vital part, it is a very important part of hospitals. But again, we cannot just favour a few doctors and forget about what they call the courtesy doctors. And another thing, we have a contract with each and every single citizen of Manitoba and if they don't pay their hospital premiums we will go as far as to send them to jail, but are we keeping up our part of the contract? What is a contract? It is not just a one-way deal. How many people are waiting to go to the hospitals. They pay their premiums, they held on their part of the contract, and especially as this is practically a contract that is imposed on the people, this isn't a compulsory plan, and we cannot give them a bed. So I think that this is a -- we are talking about shortage of beds, building more hospitals. Before you go on with determining how many hospitals you are going to build, you have to know I think how many beds are available. So I think that the government -- I suggested, if I remember right, I suggested a few days ago that we'd be wise to have government representing the university who is primarily concerned with the education, the research part of it and the training, and the hospitals who are very interested in giving service to the patients of this province. I think that the Manitoba Medical Society certainly should be invited. We know that they're vitally interested in this also, and of course the leadership must be taken by the Minister in this Department, and if I didn't mention the Manitoba Hospital Commission, I certainly think that they should be part of this committee. But I think that this is an important thing. We fooled around with the shortage of nurses and we felt that we were compelled to bring a resolution to chastise the government for waiting around so long.

Yesterday I congratulated the Minister for the good report that we have on the shortage of nurses, and if we bring in legislation I think that this is a good start, but we could have done this in 1963 - in 1963 when we received that part of the Willard Commission and we didn't do it. Well let's do something now about bringing in a policy on university hospitals. We can't wait any longer. Mark my words, Mr. Chairman, we are scaring a lot of the doctors, a lot of people. We want more doctors, we're asking the Minister, "what are you doing?" We need so many doctors and we certainly know that when this medicare comes in we'll need an awful lot more doctors, and if they feel that they can't have any of their patients admitted to the hospital, what's the use of coming to St. Boniface or to General or any of these hospitals or to Manitoba. So I am not suggesting that this is an easy decision to make, but I am saying that it is a decision that must be arrived at soon and that we must be given leadership from the Minister on this.

I want to repeat also that - and we're talking about this clear-cut decision in education - I certainly would like to repeat - and I'm going to insist on an answer from the Minister on this - I want to know why the group was allowed to discriminate against the people of St. Boniface Hospital. As I said, if anybody can tell me that there's inferior doctors, well then I want to know. I don't think that this is the case and I can't see why we cannot have, when we have three teaching hospitals here in Manitoba for a number of years now, many years, the General, Children's and St. Boniface, and there is not one single professor, full rank or title of professor,

(MR. DESJARDINS cont'd.) from St. Boniface Hospital. I won't be satisfied with the Minister answering me that it's the faculty council that determines this. This is true, but when there is an abuse, when there's discrimination, the Minister not only has the right but the duty to look into this, because again, as I say - and I've heard this from more than one doctor, heard this from one just last week or three or four days ago - he's looking elsewhere. He's hoping that maybe something will be done but he's been there a long time, he's done a lot of work in research and in teaching, and if he feels that he can not be recognized then he might as well go somewhere else where he will be. He told me, he said, "You know it's not the money that's keeping me here." So I would think that the Minister should look into this as soon as possible.

Now another important thing is the budget of the different hospitals and this is quite difficult. I don't know if I misunderstood the Minister yesterday, but in some of his words I seem to have the impression that because they spent so much money last year and they were using more people, I thought he was trying to give the impression that maybe these hospitals were exorbitant, these people in charge of budgets, that they weren't right. I don't know if these budgets have been studied, but he told us straight yesterday that there would be a cut of 10 percent. If the hospitals were asking for 20 percent increase, they would get 10 percent. When you're dealing with human lives and with sickness and medical care, I think this is quite difficult. As I said, and I'm not going back on my word, this is something that has to be done. This is why you have this Commission to hold on. Some of these people get carried away and they want to do the best they can, that's true, and without -- nobody questions their sincerity, but they want the best and there's somebody there that has to be realistic. But how can you come in and say you're going to cut 10 percent if you haven't reviewed this. I understand that there's some cuts that are drastic and this is ridiculous. For instance there is a special X-Ray machine that was approved for the St. Boniface Hospital that's coming in to be installed. It's been approved; it's going to cost \$300,000, but the salary of the technician needed to operate this machine has been cut off. Well, if we can't have anybody to work these machines, I think we'd be better not to approve the installation of the machine. If you're going to spend \$300,000 on a machine, let's get somebody that knows what it's all about and this is not the place you should stop. You might say well, where would you stop? I don't know. They're bound to make mistakes and this is why I'm bringing this one up, but I think we could save in a lot of ways. I said there was a shortage of money and I think would help; I think maybe a sweepstake would do it; and I think if we had the administration of all these hospitals under the same roof, that certainly would help. I also talk about -- well, we all know that with more nurses we will save because we will be able to staff all the beds. We also talked about home care and I think we're progressing on this, so these are all things that are going to help.

But what are the hospitals going to do? What guides - what can they use to guide them in preparing their budget when the Commission tells them that this is figured on a secret formula - I've never heard of this before - a secret formula and nobody is allowed to know what the formula is. Well, secret means that usually, but this is the best kept secret in this House. Nobody knows it and I think that they will have to receive a little better guidance than this.

Now we were told that the Manitoba Hospital Commission would make a study on medicare and its effect on the entire health institution field. I think this is very important and I'd like to know from the Minister when we can expect this report. I'm sure it's finished, I'm sure it's ready, because the First Minister and the Minister of Health said we were all ready to bring in medicare and suggested to Ottawa that we should start right away. Well, if you start something you like to know where the heck you're going, so I hope that this study is made. I'd like to know how many more doctors the Minister feels that we will need when this plan is put into effect. Are we going to get doctors for the rural points of Manitoba? And talking about this, we were talking about the hospitals and at times it is felt that the hospitals are too close to one another in certain places. Of course if you come from that certain town you feel that you should have a hospital, and this is something that has to be looked into very seriously when you're spending so much money, because even those beds in rural points I think cost from 20 to \$30,000, and we've got to make sure we have the staff.

There's one thing I'd like to suggest. When there's no hospital, when you can't build a hospital immediately or you feel that it's not the policy to build a hospital there - and this was mentioned last year by my deskmate here - and I'd like to know if the Minister and the government has given this any more thought, of giving certain grants, helping out doctors' clinics - the next best thing, a proper clinic. This was brought up and I think that the Minister answered

(MR. DESJARDINS cont'd.) . . . that it had some merit and he would look into it. Well, Mr. Chairman, you might say, well you're talking about saving money and you're showing us ways of spending it, but I think we would save a lot of money. This might be satisfactory. Instead of building a hospital which costs about \$30,000 or \$20,000 a bed, if we get certain grants that might be good enough and we would encourage certain doctors to stay there; to come into these points. I think this is also very important.

There was another thing that was brought in and I think that we didn't get much response from the Minister on this. It was the possibility, especially now that we're going to have medicare, we'll have - it looks like, unfortunately as far as I'm concerned, it's going to be a compulsory plan and we have compulsory hospitalization. Also, I wonder if the Minister will give more thought of having the lab and X-Ray centralized in hospitals. In other words, the government take this over. It is a known fact that there is too much repetition of this and this is very costly. These things are very costly and I know that many of the doctors feel that this should be handled, now that we will have this compulsory medical care, that these should be handled through the hospitals or maybe through certain recognized clinics.

I wonder if the Minister could also give us the number of years that the present members of the Commission have been serving on this Commission and when the new board will be re-appointed. I think it's getting dangerous to leave some of the people on this too long, especially people that are maybe personally interested in the care of patients, hospitals and so on. In other words, doctors in Manitoba, because there's always the possibility of conflict of interest; there's always a possibility of maybe a doctor that's on this board will be tempted to talk about centralization and build an empire to the detriment of other parts of the province. I don't think I need to say much more on this, I think the Minister really is aware of what I'm saying, but I think this is something that is mentioned quite frequently about certain doctors and people of Manitoba. I think there's enough people that have good sense and that could help the Commission. Maybe the Minister could think of changing some of these members.

We had a list of priorities. I would like the Minister to tell us what's happening to Concordia Hospital. Of course I mentioned the north end hospital and I'd like to know if and when Grace Hospital will ever be opened. I think it was supposed to be opened last October or so and it's always delayed. Can the Minister - I know there was that unfortunate accident there when they first started construction - I wonder if the Minister can give us a report on that.

I just want to remind him also that last year I had asked the Minister if we would be ready for the athletes and the people visiting us during Pan Am Games. Will there be special facilities for emergencies? The Minister said he would look into it and make sure that this is looked after, but I would like to have him report to this House on this.

I have a specific question here and the only way I can check this is with the Minister. I am told that students 19 years old and over can have exemption from paying premiums to the Hospital Commission if they are students for five months of the year and this apparently is regardless of the family income. But I'm also told that if a widow has a boy of 19 years old and over going to school for at least five months - and she would need the help much more than these other people - there is no exemption because there is no family plan. If this is the case, I would suggest that this is wrong. I don't think that this was the idea behind it and I would ask the Minister first of all to check to see if this is true. I couldn't believe it when I heard it but apparently this is a fact, and I would ask him to bring in legislation to change this as soon as possible.

Another little point here that's bothered me for a number of years. Maybe this is perfectly all right. To be honest, I haven't heard of anybody contracting serious disease on this, but we have so many of these chain stores now, these big grocery stores, and you see pastry and bread covered at certain counters, you see a loaf of bread fall on the floor, handled by everybody. I wonder if this has been checked and if the Minister is satisfied with this that this is all right, there's nothing wrong with it. And I've seen not too long ago loaves of bread falling off the counter, being picked up, put back on the counter. People figure that they had too many, they decide to put some back. I've seen kids handle it. The mother would send them back and say "I already have some." And it seems to me that this is not quite right, that the food should not be handled so freely, and I would like to have the opinion of the Minister on this.

I would like to finish my remarks, complete my remarks, by congratulating the -- I'm sure and I hope that this will be done for all of the hospitals. I'm as you know a little closer to St. Boniface hospital. I was born just a few yards from St. Boniface, from the hospital, and

(MR. DESJARDINS cont'd.) I would like to congratulate the -- especially the work, the progress that they've been making, and I'd like to add a special word of praise for this heart team that they have. As I mentioned a while ago there was quite an article in the Winnipeg Free Press of Saturday, January 21st, talking about the first hospital, the grey nuns in 1871. There's a picture of it, just a little shack, and now this big imposing hospital. I say St. Boniface Hospital because I want to recognize the improvement that we've had in Manitoba. It's practically a hundred years now. I'm using St. Boniface only as an example not as an exception or something special, but I would -- this is something that we've been worried about, this heart team. We've been told maybe we should go to Mayo and so on, and I think that now I would like to say this publicly because I think that it 's a known fact that we have one of the best teams in North America and I would like the people of Manitoba to know that, that they don't have to leave this province, that they will get the best of care in this department.

I think that this is all the remarks that I have for now. I certainly will follow quite closely. I hope that I will get some of the answers, even some of these suggestions, some of these -- I don't know if the Minister will feel that they are radical, but I think that this would be a step in the right direction, especially the first suggestions I made, so I will be awaiting the reply of the Honourable the First Minister.

MR. PETURSSON: Mr. Chairman, I would wish to address myself to the same general theme as the Member from St. Boniface has been addressing himself. I would begin by congratulating the Minister of Health for what appears to be an excellent report. I haven't read it all through, nor did he for us, or for our benefit, but it seemed to be a very good report. It's a large department that he has to administer; it's a heavy portfolio. We all recognize that. His job is not an enviable one, although with the new salaries that have been granted to Cabinet Ministers I imagine that some others might be induced to take on that heavy job that he has if they were approached. But I know that the Minister of Health would be the first to admit that even with his good report he has not yet achieved perfection. His report has not, nor does he pretend in his report to have achieved a millenium. It would be a very unusual case if such a thing were expected or pretended. We do not live in the heaven that was described by Mark Twain when he said, "All there was perfection and all the inhabitants have settled into one eternal never-ending complete and final boredom." That is, there was nothing further to achieve. This is the kind of heaven that Mark Twain envisioned that many people were planning to go to. We do not live in such a heaven, fortunately. There are still things to do, things to accomplish, things to achieve, and so the Minister of Health is to be congratulated and thanked for leaving us with some things still to pick over, to remold, to rearrange, or at least the opportunity of suggesting doing such things in the hopes of moving nearer to perfection although never quite achieving it.

There's one little point -- so I leave the Minister of Health for the moment -- that I was a little disappointed in last night, that the Honourable Member for St. Boniface seemed to have neglected. He didn't, in his opening remarks, didn't raise any question or any objection to the statistics that were provided by the Minister of Health to the decreased death rate in Manitoba. Understandably, for him that would be bad for business, and I feel I understand better now why the funeral directors in Winnipeg and St. Boniface are all appearing on billboards at every possible opportunity. The government, through their health services, is cutting into the funeral business, so the funeral directors have to advertise hoping somehow, somewhere, to pick it up even though it isn't there. I find it hard to understand why they advertise and for whom the ads are meant, who is to read them, because definitely the living are not going to rush out to be buried, at least I hope not.

A MEMBER: Neither are the dead.

MR. PETURSSON: They're unable to.

In connection with other things, we have heard people say, "I'm just dying to see such and such a picture show, or movie or play," but who in this wide world would say, "I'm just dying to be buried by such and such a funeral director"? They die, but they don't want to. The honourable member missed his chance to protest against this statistic that was presented by the Minister of Health, so I am in a sense protesting for him. With increased difficulties of living and so on, the funeral directors are being deprived of a livelihood by the good administration of health services by the government. By good administration and by lowering the death rate, the government is acting in a real sense in restraint of trade or of business, and I imagine that the funeral directors of the province can be expected to form a protest group, probably somewhat similar to the one that we met with just a few moments ago which was

(MR. PETURSSON cont'd.) raising protest against high prices, but they would be protesting against the low death rate. Or even if one of their number were to picket the government buildings, he could still sleep out on the steps in comfort in a closed-in coffin for shelter and he would be far better housed than was our friend Joe Borowski when he was out on the front steps. All he had was a sleeping bag.

But now, all joking aside, it does happen that once in a while I try to be mistakenly humorous and the humour isn't there. But I'm glad to know that there are things that the government is happy about. The statistics are one of them, but I'm sorry to realize that much as has been done there hasn't been more of it. The Honourable Member for St. Boniface has spoken last night and on another occasion and again mentions today about the shortage -- he spoke about the shortage of nurses and staff to man our institutions, our hospitals, and I agree with him quite fully.

I have been in one way or another made a little bit aware of the lack of nurses and other trained personnel. I know that they are in short supply, and while the government may be doing something we can't gloss over the fact that it has not yet done quite enough. Both the Willard Report and the Holland Report have pointed this up. They both go into details about the lack; they speak of a lack of nurses and doctors and technicians, internes, aides and even trained office staff and other staff. For instance, I was told just a day or so ago that if the new Grace Hospital out in St. James were to open its doors to patients tomorrow, the only place that staff could come from would be from the old Grace Hospital on Arlington Street, and if that staff were to move into the new Grace Hospital, the old Grace Hospital would have to close its doors. That is, we wouldn't be increasing the number of hospitals. We might be increasing a few beds, but not too greatly hospital facilities.

And then I have been informed that there are certain new hospitals on the horizon - that is, they have been approved. They have probably passed the planning stage and will be very soon under construction, so that within the next two years, that is between now and probably the end of 1969, there will be new hospitals or additions to hospitals at such rural points as Gimli, Russell, Whitemouth, Morden, Flin Flon, and in urban areas there will be the new Grace Hospital which is to be an addition to the old Grace - I understand the old Grace Hospital is still to be operated as a hospital - there will be an addition to St. Boniface; there will be a new Victoria Hospital, a Concordia, an addition to the Children's Hospital and the municipal hospitals out on Morley Avenue. These between now and 1969, or the close of the year, are to be completed if the present plans develop - and, as I say, they are through the planning stage and practically into construction. Most of them will be in construction. And I am just curious to know whether the government has plans now in operation to staff and to man these hospitals and additions to hospitals. I know from connections that I've had with the municipal hospitals, that during the past couple of years, or even less, the municipal hospital has brought in 62 nurses to staff, or to add to the staff there; 62 nurses from the Phillipine Islands, nurses who have passed the standards that were set and have proven to be acceptable and are working in the municipal hospitals at the present time. If the municipal hospital has to do that, other hospitals are having to do the same thing in a different way, and we can only draw the conclusion from that that the hospital personnel, even though it is being increased, it is being increased at too slow a rate. But of course this situation isn't peculiar to Manitoba. We're not an isolated instance. The same condition prevails in other parts of the country, and we may be losing some of our personnel to other places for various reasons, some of them for increased remuneration for the services that they give.

There's an article that I have here that appeared in the January issue this year in the *Chatelaine* magazine, headlined "The Chronic Crisis in Nursing. Is the End in Sight?" -- and a secondary headline says, "While the public waits weeks for hospital beds whole wards are closed for lack of nurses. Will the changes everyone knows are coming be in time to save the profession and the patients?" This article goes on - I don't think I need read excerpts from it. The headline is enough to indicate what it is talking about, but it does mention a survey that was conducted by a Dr. G. M. Weir that was published in a 591 page book; (He was the former head of the Department of Education of the University of British Columbia at the time.) It said, "That report is jam packed with comment, complaint and constructive suggestions from a multitude of nurses, doctors and other interested and thoughtful observers. It is an excellent and forward-looking document, but it was published in 1932 - 34 years ago - and its recommendations are still disregarded, as it is pointed out in the article." And so it goes on. The problem that existed at that time is still with us and not too much has been done to implement the

(MR. PETURSSON cont'd.) recommendations that were given in that report, and now we have two other reports, the Willard Report and the Holland Report, and I was just wondering whether the recommendations that are made in these reports will be referred to some 35 years from now as still not having been implemented.

And so I ask: how extensive are the plans, not only developing but in operation, to fill the need? Although there are plans in operation endeavouring to fill the need that now is felt, how extensive are they and are they sufficient to meet the needs that will be created by the creation of these new hospitals and additional services in old hospitals as they come along? It isn't good enough to begin to plan now or just to have begun to plan, although if there is no training plan it is better to begin now than not to begin at all, but it should have been already in operation and the tempo of the program should by now have been stepped up so that the needs would be met as they arrived.

Is there, for instance, now such a thing as a School of Physiotherapy? What about training for professional geriatric care, physical medicine, nursing home care and so on? Are the things that we see in the future in these areas as well as in many others being met? Hospital needs in our day have become so departmentalized that a simple doctor, nurse and admittance officer relationship doesn't even begin to present a modern hospital picture. Now, in our day there is need of registered nurses, licensed practical nurses, lab technologists, social workers, radiological technicians, physiotherapists, occupational therapists, dieticians, pharmacists, medical record librarians, hospital administrators and so on down the line. If the Honourable Minister of Health will inform me that our present hospitals are well staffed with all of such people that are needed, and that there is a good supply in preparation for the new hospitals, then I for one will be very happy at the news and I will congratulate him. If he cannot give this assurance, then I must regard the Department of Health and the government to have been derelict in its duty in failing to face up to, not only present needs, but also needs that will be pressing on us even in the next several months. The Honourable Minister of Health said that 1,000 personnel, whether it was nurses or other personnel, would be available next year, but that poses the question: will even that large number still be enough, or will the hospitals still be understaffed and stand with empty wings or empty wards?

I would, along the same line, wish to ask about other hospital accommodation, the mental institutions of the province, to which the Minister referred in his report. Is the accommodation in the mental institutions of this province sufficient? Is it uncrowded? Are the mental institutions sufficiently well staffed to take care of the number of patients that occupy them? By reporting that the mental hospital population has been or will be reduced - I think the Honourable Minister said by 100 in this year, or has been reduced by that number during the past year - does that mean that the incidence of mental ailment is decreasing? Are there fewer people requiring the services of mental hospitals or does it simply point up the fact that other facilities are being provided than are found in the present mental hospitals?

And then another point along the same line; the Free Press published an editorial on November 29th this past fall, mentioning a brief that was presented to the government by the Canadian Mental Hospital Association, and I thought I might just read a passage or two from that editorial. After mentioning the fact that the brief had been submitted, the editorial states: "The first recommendation that the Canadian Mental Hospital Association makes is for freedom from the fear of loss of liberty for voluntary patients." That is, for people who voluntarily go to a mental hospital and ask to be taken in and given treatment. The editorial says, "The situation now is that a person may seek treatment in a mental hospital of his own free will but once having done so he is in the hospital's hands. There is no guarantee that he will be allowed to leave again of his own free will, even though he has come in of his own free will. And inevitably," it says, "a troubled person faced with the possibility of being locked up will seek almost any alternative to applying to a hospital for help."

It goes on along that line and then says again farther down the column: "Another absurdity in the Act is the insistence on a warrant before any apparently mentally ill person can be taken to a hospital for observation or treatment. According to the Canadian Mental Hospital Association brief, a doctor called to attend a disturbed person who becomes violent or potentially dangerous in the middle of the night cannot take his patient to the hospital without first rousing the director of psychiatric services, a justice of the peace or a magistrate. The police can be called and the patient taken to jail without further formality, but he cannot be taken to a hospital." This is an interesting situation, if it exists, and I would much appreciate receiving some enlightenment on it.

(MR. PETURSSON cont'd.)

I move on to other matters very briefly, to the question of medicare, and would ask the Honourable Minister where we now stand on that question of medicare. One prominent leader has said that the action of the Federal Government by delaying Medicare until July 1, 1968 has not only been a breach of faith but a national scandal. I don't know whether I speak for the government in these particular terms. This was a quotation given to me from another source. But by comparison the government in the United States, according to a report in the Winnipeg Tribune no longer ago than January, informs us that the government there proposes to move forward full scale into Medicare. Even the members of the American Medical Association are being urged by the president of that association to work, to co-operate with, as they call it, the law - they mean the government.

Now without going any further into this area, I would like to ask where does our government stand at the present moment in the matter of Medicare? I mean provincially now. I'm sure that the members of this Legislature would wish to be informed on that; they would like to know. We know where the Federal Government stands. They delayed it after having given their word, their pledge, to introduce Medicare by July 1, 1967. They broke that pledge; now it comes in a year later and I wonder what our position is.

To revert to this same clipping from the paper for just a moment, it states that a landmark was reached on January 1st when Nursing Home Care was added to the medical and hospital benefits which became available on July 1, 1966 for nearly 20 million Americans 65 years of age and over. This is in the United States. The Americans - and I'm not particularly an admirer of the Americans in many fields; there are many areas in which I do not admire them at all, but nevertheless I think this is an example that we might well follow in getting our Medicare program going and doing something in connection with nursing homes. The Americans propose to extend their hospital care to nursing homes, add them to the medical and hospital benefits, but that isn't the present situation here with our hospitalization. At the present time, patients are regularly being turned out of hospitals and sent out to nursing homes, and the anomaly in that situation is that in hospitals they are under hospitalization, in nursing homes they are on their own, and they are having to pay the shot, as it were. They pay for the services that they get in a nursing home but if they become just a little bit more ill than what a nursing home can take care of, they're sent back into the hospital and then again they're on hospitalization and their bills are paid for. And the thing that bothers me is that it seems that an injustice is being visited on many people who are unable to stand up and defend themselves. These are aged people. They often cannot afford to pay fees that are being asked in nursing homes. Their relatives, whether sons or daughters, are literally pressured into taking them out of the hospitals and placing them in nursing homes, creating a great deal of unhappiness, difficulty and worse.

So I wonder why cannot nursing home care be tied in with our present hospital services to give relief to people who have been or are on hospitalization, even though they may be sent from the hospital to a nursing home. To be deprived of the hospital services is not only a hardship but in some instances it is a cruelty to old people. They are helpless; they are shuffled around, unable to defend themselves, and I feel strongly that the nursing home services should be under the Hospitalization Act, should come under the Health Department, either be administered or under the close inspection of and under the financial support that hospitalization services offer.

There's another area that concerns me. It was mentioned in the Throne Speech but it wasn't given any mention in the Honourable Minister's report. It may be that it doesn't come within the area of the Department of Health, but this particular subject is air pollution. Air pollution is already a problem here with us. My constituency is ringed by diesel buses traveling up Sherbrook Street, Maryland Street, Arlington Street, west on Valour Road and on farther west, and then the other way Notre Dame, Wellington, Sargent and Ellice. Diesel buses. On a cold day, standing out on a street corner waiting for a bus, people can't but breathe in the fumes that are expelled by these buses; it's like a gas attack. This is one of the things that if the government is going to do anything about air pollution they should give very close attention to. In Chicago they faced the same problem. Chicago being as large as it is, and with what they call "pavement canyons", the gases would have been trapped in among the buildings and created much greater a problem than the gases do here in Winnipeg. It became intolerable until finally the Chicago authorities decided to discontinue the use of diesel fuel, which the Winnipeg Metro Transit could just as easily do, and install instead propane gas as a fuel for

(MR. PETURSSON cont'd.) motive power. Propane gas could be used just as inexpensively as diesel fuel - I think conversion units are not very expensive and it would be not only a benefit to the people but an attraction to the city. If Metro buys 50 new buses they will only add to this problem of pollution and, as we know, it's high all around us even now.

It has been said that the garbage-burning plant out on whatever street it is, that it sends out through its smoke stacks $2\frac{1}{2}$ tons of fly ash every day out over the city, and then there are the refineries in St. Boniface, or East Kildonan, which also help to pollute the air and the water of the rivers. It was the Liberal Government, I understand - and I have it I think on good authority - that even against the urgent advice of experts in the field, issued permits in spite of that advice and objection, issued permits to these two refineries which now create a continuing pollution problem, both in the air and in the water, and this is one instance of many where dollars seem to have counted for more than the well-being and the comfort of the people who lived in those areas. It seems that when there's a choice, that the cash or the profits or the cash benefit is always chosen at the expense of the health, the comfort, the well-being of the ordinary man and woman. In the final analysis they are the ones who pay the shot, either with their health or in their taxes.

Water pollution is an equally urgent problem and we are coming to realize that more and more each year as time goes on. Winnipeg, Lake Manitoba and Manitoba is a great drainage trench, or whatever you call it. The drainage from south, from east, west, all comes on into Manitoba from along the Red River, the Winnipeg River and the Saskatchewan River, and each one of these rivers is laden with if not raw sewage, then at least the discharge from cities down in North Dakota - Grand Forks, Fargo and the towns between, even Fort Garry - they all dump more or less raw sewage into the Red River and it comes on down to us, and I can't understand why the City of Winnipeg should have spent many millions of dollars in setting up a sewage purification plant so that it wouldn't contaminate the river when all that additional sewage comes pouring down the river regularly from the south.

The paper mills on the Winnipeg River represent another source of pollution. It's proven by the fact that fish no longer can live in the Winnipeg River. At one time, I've been told, it was a prime site for the fishing of sturgeon. Now if a sturgeon is seen anywhere in the Winnipeg River anywhere within easy distance of the lake, it's a very great exception. The Saskatchewan River drains the Province of Alberta and Saskatchewan and comes pouring down towards Lake Winnipeg and enters the lake, with the result that eventually Lake Winnipeg will become a big sewage lagoon something similar to Lake Erie. It'll be a dead lake without life in it other than algae which makes the water impossible to use, either for drinking purposes or for swimming in.

I have walked along the shores of Lake Winnipeg both on the east side and on the west side and I have found in, say, a 100-yards area literally hundreds of small fish, a little larger than minnows, they would have been small jackfish or pickerel or white fish, lying dead along the beach, and the fishermen that I've spoken to say it is a result of the pollution of the lake. The lake is becoming more and more polluted. The bacterial count in the lake is high and I know that at some beach developments where lake water is pumped in for drinking water for distribution around the cottages, the water is tested regularly for bacterial count and it is necessary to pour in chlorine to keep the bacterial count within a manageable area. People are not allowed to drink the water as it comes out of the lake, but people swim in the water and the province is building up that tremendous - and I can't find proper words to describe it, I think it is a marvellous thing, at Grand Beach, that the beach resort, picnic grounds and camping area and at the same time the lake which serves these areas is being polluted by sewage coming from all these different directions, and I don't know -- it seems to me that the water pollution problem is growing continually worse. If the government doesn't do any more than it appears to have been doing in recent years, I understand that there is some sort of a pollution control, or water control organization set up, but if it won't be any more active or can't become any more active than it has been in the past some time, then our resort areas are going to permanently be damaged by pollution.

In the same connection, I would like to mention a visit I took to the atomic research plant at Pinawa, where precautions are taken and everything possible seems to be done to avoid contamination. Never having been through an atomic plant before, I was amazed at the precautionary measures that were being taken to protect employees and others who might come in. When my wife and I were shown through the place, when we came into the main office we were given a card to attach to our clothing; it had a photo sensitive cell that would

(MR. PETURSSON cont'd.) show up any kind of radiation that we might pass through. It was sensitive to radiation and it would show up on this plate, this sensitive plate. We were to leave it at the office when we left.

In different places in the halls and building there were geiger counters set up so that if any kind of radioactive contamination happened to leak into the hall it would be immediately detected. There were walkways, similar to what we go through when we go through an electric door, an automatic door. If somehow the people going through these openings, through doors from one hallway to another had become contaminated or picked up radioactive contamination, this would be detected and an alarm system would have been set off. I was amazed at the tremendous precautions that they seemed to have gone to and pleased to know that with this plant in Manitoba, potentially dangerous as many people felt that it was originally and could still be if there should be any kind of a leakage, I was pleased and amazed to see how much care was being taken.

There is a disposal dump somewhere off in the wilds, in the bush, not probably too far from the plant. I don't think it's a place visitors are taken to or where visitors would particularly care to go. There is in the operation of the plant a certain amount of wastage that develops, radioactive waste that could be dangerous if people came in contact with it. That is placed in what they called a disposal dump and I feel sure, judging by the precautions that had been taken inside the building, that the similar precautions would be taken in connection with this dump.

But I have wondered about it, and other things, whether we have, as members of the Legislature, and whether the government has, or knows of any provincially named inspectors who make it a point to check on all these safety measures, good as they are, precautions can never be too great or too carefully taken, and I wondered whether there are any Provincial Government inspectors whose job it is from time to time just to go out to the plant and make a check. I'm not saying that the precautions are not good, but men appointed by this government whose interests Manitoba is -- or interests are, should have someone who okays what is done, and if there is anything from his point of view amiss this can be pointed out to the people in charge and remedial measures taken.

I was going to touch, Mr. Chairman -- oh, I have a great deal on pollution - many clippings - but I'll refrain from reading them. I may have another opportunity to speak to some of the subjects. It seems to me somehow that I have waited a long time for the opportunity to get up and speak, and just in fear that somehow I'll miss out somewhere along the line, as I felt that I had, then I make the most of this opportunity while I'm on my feet and go whole hog.

I have a resolution in the Resolutions Paper on the use of tobacco and things of this sort, and this itself too is a health concern; it is a pollution. During our regular sittings with the Speaker in the Chair this Chamber is entirely unpolluted, but when we go into Committee of the Whole, then the smokers take out their cigars, they take out their cigarettes and their pipes and they pollute the atmosphere. That's one of the things that the government was going to work against I think - I hope - to save us non-smokers, and I feel very pure. I haven't smoked in 30 years and that was a long time before they began scaring people about smoking. My Leader hasn't smoked for two years -- Interjection) -- 30 months, and I think our Deputy Leader has also given up that bad habit, but I did wish to say a few things about

MR. CHAIRMAN: The honourable member has had the floor for I believe about 50 minutes now. Are you nearly through your speech?

MR. PETURSSON: Okay, I hope I have another opportunity. Inadvertently I left the Chamber this afternoon when my resolution came up and I regretted it very much because I wanted to have a few things to say on the use of tobacco, but I'll leave that and give someone else who wishes to have an opportunity the opportunity of speaking, but for the present, Mr. Chairman, this is my presentation. I thank you very much and the members for their generosity in letting me speak.

. . . . continued on next page

MR. CHAIRMAN: One of the honourable members of the Committee has been perusing a newspaper during the recent half hour. I wonder if the honourable member would remove the newspaper from the Chamber. The Honourable Member for Selkirk.

MR. HILLHOUSE: Mr. Chairman, after listening to the last member, I think I can join the ranks of the pure. I haven't had a smoke for 3 1/2 years and I haven't had a drink since the night R. B. Bennett was elected, so if anybody can beat that.

But, Mr. Chairman, I didn't rise to comment upon my qualities but rather to perform a duty which I feel I must do, otherwise I might be accused of discriminating against the Cabinet Ministers in this government, and I would hate to think that I was making step-bairns out of any of them. Now I don't intend to embellish my remarks by any speech. I simply include in the record in the motion that I am about to make, the remarks which I made here on the evening of January 24th and are found in Hansard, Pages 417-419. So without further ado, Mr. Chairman, I wish to move that Item 1 (a), Minister's Compensation - Salary and Representation Allowance of \$18,000 be reduced to the level of the 1966-1967 appropriation of \$12,500.

MR. CHAIRMAN presented the motion.

MR. PAULLEY: Mr. Chairman, I think that it is incumbent on me as the Leader of the unofficial official opposition in this House to say a word or two in respect of the resolution that has been proposed by the Honourable the Member for Selkirk.

MR. CHAIRMAN: Before the honourable member proceeds, I would just like to point out to the Committee that we have had a very wide discussion on this resolution and I ask the Committee, while I am not in a position to curtail speeches in Committee of Supply, I ask you to restrict your remarks to or to be as brief as possible.

MR. PAULLEY: Mr. Chairman, this is my intention and I appreciate very much your position, and I am sure that you will appreciate my position as well.

By the rules of the House as adopted last year, we have restricted ourselves to a period of 80 hours for the consideration of the estimates which we have to consider before the House. I'm sure, Mr. Chairman, that you and members of the committee will appreciate as I do, indeed that we have spent some 16 hours, almost a quarter of the allocated time in consideration of the estimates.

Now we New Democrats do not agree with discrimination between Minister or individuals. We have agreed - we have agreed by motion that the Minister of Education is entitled, whether we agree with it or not in opposition, to a salary of some \$18,000 plus the amount that the individual concerned will be allowed to receive as a member of this House. We do not agree, as suggested by my honourable colleague for St. John, in a merit rating system for Cabinet Ministers any more than has been established in this House, or indeed, Mr. Chairman, in any House that I'm aware of in the whole of the democratic world, for merit rating for members of the Legislatures or Houses of Parliament. So, therefore, in all due respect to my honourable friend the member for Selkirk, we in this group find ourselves in the position that once this House has established itself on a matter of principle by vote that the Minister of Education is worth, say \$18,000 or whatever it shall be, that the Minister of Health is not worth less, so

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MR. SAUL M. CHERNIACK, Q. C. (St. John's): I agree with you.

MR. PAULLEY: You agree with me. I'm glad that my deputy agrees with me, as indeed, Mr. Chairman, not only does my deputy leader in this House agree with me but all of my Party agrees with me, that having once established a principle that the Minister of Education is worth X number of dollars, surely the Honourable Minister of Health, who is charged with a responsibility to the people of Manitoba equally if not more than the Minister of Education, should not be placed in a position of receiving less.

So I say, Mr. Chairman, we did, on the motion to reduce the salary for the Minister of Education to back where it was a year ago, support the motion of the Honourable Member for Selkirk. We did this as a protestation of the method by which the government of Manitoba and the Cabinet of Manitoba increased those salaries. And so I say, Mr. Chairman, that that having been done and our protestations having been defeated, surely we in this House would not expect the Minister of Health to receive less than the Minister of Education and so we cannot support the motion of the Honourable Member for Selkirk.

We also agreed, Mr. Chairman, with the motion of the Honourable Member for St. Boniface that the full salary of the Ministers of the Crown should be taxable. I don't know whether my friend the member for St. Boniface may be raising that question again but this too has been defeated in this House, and I think, Mr. Chairman, that we should be a responsible

(MR. PAULLEY cont'd)...House, and I say to the Honourable Member for Selkirk, let's be responsible, and I suggest that this motion that we have before us at the present time is no more or less than a political gimmick on behalf of the Liberal Party of Manitoba.

MR. HILLHOUSE: On a question of privilege, I do not think the Honourable Leader of the NDP can impute an improper motive to me.

MR. PAULLEY: Mr. Chairman, I'm not imputing an improper motive at all; I'm stating an actual fact, in my opinion, and I suggest to the Honourable Member for Selkirk that I'm perfectly entitled to my own viewpoint that this is the reason, because I'm sure that my honourable friend the member for Selkirk would not suggest merit rating for Cabinet Ministers or merit rating for members of the Legislature. And I say to my honourable friend, in answer to his point of order, if one may call it a point of order, I ask my honourable friend will he introduce a motion into this House to bring about merit rating for Ministers or members of this House. If my honourable friend will do this, then I say maybe he has a point. He shakes his head. Then my honourable friend indicates to me that he is not prepared to bring about merit rating for Cabinet Ministers and members of this House.

MR. HILLHOUSE: I think the Honourable Leader mistook the reason why I'm shaking my head, Mr. Chairman.

MR. PAULLEY: I didn't hear my honourable friend.

MR. HILLHOUSE: I say I think you mistook the reason why I was shaking my head.

MR. PAULLEY: Oh, maybe I didn't hear the message from the shaking of my honourable friend's head. The point though that I am attempting to establish, Mr. Chairman, is that we have established by a motion in this House now that the Minister of Education is entitled to an emolument of \$18,000 or whatever it is. The position of our Party is that he, the Minister of Education, is not entitled to receive any more than the Minister of Health, and this is our position, that this Legislature, this Assembly having established by a majority vote - and we must, if we agree with the democratic process of government, agree with the majority - having established that the Minister of Education is entitled to an emolument of \$18,000 or whatever it is, surely the Minister of Health is entitled to no less or, may I say, no more.

So I say, Mr. Chairman, as far as we now are concerned in this House, that this principle having been established, we in this group have no intention of supporting the proposition of the Honourable Member for Selkirk. True, we run the risk politically of being chastised and ridiculed because of the position that I am now enunciating on behalf of my Party. I accept this criticism, but I say to the Honourable Member for Selkirk and I say to the Honourable Members of the Liberal Party, that if they want merit rating, let them propose, not only in respect of Cabinet Ministers but in respect of all of the members of this House. So I say, Mr. Chairman, we reject the contention of the Honourable Member for Selkirk. We will not support the motion, the principle having been established of uniformity that the Honourable Minister of Education is entitled to a certain emolument, the Honourable Minister of Health is entitled to receive no less.

So I want to say to my honourable friend the member for Selkirk, we cannot in conscience accept and support the motion that he has proposed, and again despite the protestations of my honourable friend the member for Selkirk, I think this is based not on a proposition of worthwhileness between the two individuals but for some other motive, and if my honourable friend objects to a specific motive, I leave it the way it is. We are not going to support the motion of my honourable friend the member for Selkirk.

MR. JACOB M. FROESE (Rhineland): Mr. Chairman, we now have a similar motion before us as was presented to us at the time that we considered the estimates of the Education Department, and while I considered it wrong the way the government went about in increasing their salaries and not referring the matter to the Legislature, it is still as wrong as it was at that time and I certainly will not concur in what the government has done. Therefore, I intend to support the motion that is before me.

MR. HILLHOUSE: Mr. Chairman, the Honourable Leader of the NDP talks about consistency and he talks about principle. I wonder if the honourable member knows the meaning of these words. When I made my motion in respect to the Minister of Education's salary, I didn't do it on the basis of merit rating; I wasn't even thinking of merit rating. What I was opposed to was the principle or the method by which the government increased the allowances to their Cabinet Ministers, and the argument which I then made in respect of the Minister of Education is still valid in respect of the Minister of Health, and that is the only principle upon which I'm standing up here. It isn't a question of politics with me but I suggest that it is a question of politics with the Honourable Leader of the NDP, because

(MR. HILLHOUSE cont'd)...the Honourable Leader of the NDP was caught with his pants down when it came to the Minister of Education's salary.

MR. PAULLEY: Mr. Chairman, may I suggest to my honourable friend that whether he suggests I was caught with my trousers down or not is beside the point. We voted with the previous resolution of my honourable friend the member for Selkirk on a matter of principle. We do not think - we do not think in this Party that this House or this Committee should re-hash the arguments that we had before. --(Interjection)-- Nobody did? My honourable friend the Member for Emerson may as well have been outside of the House during the deliberations we had on this matter.

MR. TANCHAK: You were re-hashing ...

MR. PAULLEY: I say to you we're not re-hashing it at all. I say to you, Mr. Chairman, that the business of Manitoba is more important than picayune resolutions as suggested by my honourable friend the member for Selkirk. We are on a time limit in the deliberations of the estimates. We have exhausted almost a quarter of the whole of the time allocated for estimates. --(Interjection)-- My honourable friend says, who took most of it? I suggest that by the proposition or the proposal, the motion by my honourable friend for Selkirk, he has raised the question, and I say, Mr. Chairman, that we should have a vote on this motion. I've stated our position; he has stated the position of his party. I suggest, Mr. Chairman, that once the principle has been adopted we should carry through, and I suggest to you, in anticipation of future motions, that my honourable friend the member for Selkirk will attempt this on every Minister's salary that is proposed to this House.

MR. HILLHOUSE: I've already told the House I intend to.

MR. PAULLEY: That's right. That's right, Mr. Chairman, my honourable friend now states that he intends to do this on every motion and I intend to reject it on every motion. But in the meantime - in the meantime, the estimates of the Government of Manitoba are not being given the consideration they should be given because of futile resolutions as proposed by the member for Selkirk. I suggest to him that if he is concerned, and I believe that he is concerned, and I believe that he is concerned with the operation of the government and this Legislature, that he should desist in other departments from proposing such futile resolutions as he is doing at the present time. Politics - yes, but let's get on with the business of Manitoba.

MR. DESJARDINS: Mr. Chairman, the Honourable Member from Selkirk in introducing the resolution spoke for three-quarters of a minute. The Leader of the NDP spoke for 25 minutes. We've used, I think, 18 or 20 hours. The Honourable Member from Elmwood I think spoke 21 hours. We're talking about --(Interjection)-- No, and I know you don't make sense. Mr. Chairman, this group of socialists on my left have been wish-washy for a number of years. He mentioned about the Official Opposition when he started his remarks. He's right, they have been the Official Opposition to the Official Opposition. They try to get the best of both worlds. The Honourable Member for Selkirk did not want to repeat; he said I refer to such and such a page. That's impossible for my honourable friend the Leader of the Socialists to say because he doesn't remember whether he was for or against on such and such a thing. He made a mess politically also of the pension deal. He was all for the pension and he couldn't run fast enough backwards at the end of last session. So now he's going to be on both sides. We don't care what the Socialists do. They have to be on our side because they're the only ones that defend the people; they're the only ones that believe in humanity.

A MEMBER: Right.

MR. DESJARDINS: This is what they say themselves - you heard them - right. They're thinking maybe that if they're too nasty they won't pass this raise in the government.

MR. PAULLEY: Mr. Chairman, on a point of privilege ...

MR. DESJARDINS: There is no point of privilege

MR. PAULLEY: Oh yes there is. This bombastic member for St. Boniface talked on a

MR. DESJARDINS: On a point of order, Mr. Chairman

MR. PAULLEY: Yes, there certainly is a point of order.

MR. CHAIRMAN: I think before the honourable member proceeds I would like to say to members that I would rather you did not, and I think the rest of the committee feel the same, get into a political hassle here. We are on a motion on the Minister's salary. Will the honourable member proceed on the motion.

MR. DESJARDINS: That's right, and I think that you have to agree, Mr. Chairman, that my colleague from Selkirk stated the motion and that was it. I think it's obvious who started

(MR. DESJARDINS cont'd)....playing politics on this. We have a responsibility to do. We do not, or it wasn't the intention, this resolution does not talk about merit rating. We felt that the Minister of Education, not because of his ability or lack of ability, we felt that he should be paid what he was paid before the election. We feel exactly the same for every other member -- every other Minister I should say.

I must remind you, Mr. Chairman, and the members of the Socialist Party that we are in Committee; people have been known to change their minds in Committee. We also give credit to all the members here in this House of having a conscience. We hope that they will see the error of their ways and maybe they'll change their mind in a vote. I think we, if I remember, the vote was 28 to 26, and by reading some of the comments, I think that some of the backbenchers did a lot of soul-searching before voting. We felt that it was wrong, Mr. Chairman. We are here to talk against things when we think it's wrong. We are not worried about what the Socialist Party think. We will oppose this -- it wasn't our intention to lose time, as you heard the Honourable Member from Selkirk, but we want to be consistent. If the Honourable Leader of the NDP thinks this is futile, a picayune resolution, that's his business. We're not only thinking of the few thousand dollars, we're thinking of the trust that the people of Canada are losing when they think of their politicians because of this kind of action, and we will not be scared by my honourable friend - not a bit. If we think that we have a certain resolution to move, we will move it.

The next campaign he can talk politics all he wants; he can try to straddle the fence. I hope he doesn't fall because it's fatal. But in the meantime, Mr. Chairman, we feel that this is wrong. This is not an insult to the Minister of Health any more than it was an insult to the Minister of Education. This is slapping the hand of the Cabinet. We do not approve their ways, and unless I have reason to speak again - I don't intend to on this unless I am forced to - so I will say right away that I will also bring in my resolution for all the Ministers.

And there's another reason also that I will bring it, because I was misunderstood the last time. I was misunderstood by all the news media, misunderstood probably by some of the members here. The first resolution was asking that the salary be reduced to what it was before. We're not saying that this is what they're worth; we would be ready to consider an increase under the proper circumstances. My motion that I will make will be just to delete words - delete an allowance. I'm not suggesting and I did not suggest before that it should be reduced from \$18,000 to \$15,000, but I would suggest that my honourable friend can cry the blues the rest of this session, I will certainly protest the lawmakers who are here today imposing tax on heat, sales tax, income tax, and talking and bragging about ability to pay it. We will certainly oppose, and I personally will oppose them fixing it that they will have close to \$5,000, and if an increase to the indemnity is included, over \$5,000 tax-free, a way more than the average, the total average of salary of people of Manitoba. My honourable friend can cry the blues all he wants, we will do what we think is our duty. If he wants to straddle the fence it's his business, and I certainly support again - and still, I should say - the motion of my honourable friend and I certainly intend to bring my motion after this.

MR. DOERN: May I make a 60-second comment. I think that the positions of the Liberal and New Democratic Parties are clear. The Liberal Party is against the amount of the cabinet salary increase and the method in the timing, I suppose. Our position is that we are opposed to the method and the timing by which the increase was made. We did not oppose the amount. We do not oppose the amount. You have made your point. Everybody understands in Manitoba and in this Legislature very clearly that the Liberal Party is against this amount. Now you have already established your point. If you want to play a childish game of every time it comes up you're going to introduce it and "we're going to have our little vote," go ahead. You've done it twice; you've got ten more times. Keep it up; we'll reduce it; we'll make it in two seconds every time. You can play your little game and we'll vote it down.

MR. HILLHOUSE: Mr. Chairman,individual who made the original motion in respect to the Minister of Education. I never made any reference to amount other than the increase, but I did not say that I was opposed or I did not say that I did not believe that the Honourable Minister wasn't entitled to an increase. My objection was to the method by which the increase was granted, and the Honourable Member for Elmwood now is bringing in amount. That's only a red herring.

MR. LYON: Mr. Chairman, I'm not going to delay the proceedings of the House except to say that I'm sure I can speak for this side of the House when I say that they can take our speeches as read, similarly to the comments of the Honourable Member for Selkirk. I would

(MR. LYON cont'd). . . . at this time, however, draw the attention of members of the Committee to the rules under which we're going to abide in this matter; and the rule is, of course, that there should not be Rule 38, there should not be irrelevance and repetition in debate, No. 1; No. 2, Rule 31, I think it is subsection (2) which says that one should not under the rules revive a debate that has already been concluded in the House; and the third rule I believe that applies in this instance is no member reflecting upon any vote of the House except for the purpose of moving that the vote be rescinded. We're aware of the existence of these rules. We don't wish to take the time of the Committee any longer.

MR. CHAIRMAN put the question and after a voice vote declared the motion lost.

MR. MOLGAT: Division, Mr. Chairman, please.

MR. CHAIRMAN: Call in the members.

A counted standing vote was taken, the result being as follows: Yeas 15; Nays 37.

MR. CHAIRMAN: I declare the motion lost.

MR. SAUL MILLER (Seven Oaks): Mr. Chairman, I was paired with the Minister of Industry and Commerce. Had I voted, I would have voted against the resolution.

MR. DESJARDINS: Mr. Chairman, I would like to move that the words "and representation allowances" be struck out of Item 6 (1) (a).

MR. CHAIRMAN presented the motion.

MR. PAULLEY: Mr. Chairman, may I again state the position of my group in respect of this motion. We have by a vote previously voted against the motion as proposed by my honourable friend, the Member for St. Boniface. I think that that having been done that we cannot have any differentiation between Cabinet Ministers, rightly or wrongly, and it is the intention of my group to vote against the motion of the Honourable Member for St. Boniface based on that premise that we cannot have the Minister of Health receiving any less emolument than that of the Minister of Education. We did vote, we did vote, Mr. Chairman, in support of the original motion of the Honourable Member of St. Boniface on a basis of principle. We in the New Democratic Party, unlike possibly others, have principles, and we are now, having accepted the majority vote in respect of salaries and representation allowances, it having been established by a majority vote in this House, are not going to vote in favour of the motion as proposed by the Honourable Member for Selkirk and are going to vote against St. Boniface -- I beg your pardon? --(Interjection)-- All I am saying, Mr. Chairman, is that in respect this motion is similar to that as proposed by the Honourable Member for Selkirk previously, as a matter of principle the House has adopted that the Minister of Education shall be entitled to certain emoluments, we feel that until and when such time as merit rating is introduced into this House for Cabinet Ministers and for members of the Assembly that we should not have a system of merit rating. I appreciate my honourable friend the member for St. Boniface, who is one of those individuals who is so well capable of introducing a resolution of the nature of red herrings or pink herrings or black herrings - I don't know what they are; my friend, the Honourable Member for St. Boniface has introduced them on numerous occasions. As far as I am concerned, and I'm sure that I speak You know, Mr. Chairman, sometimes democracy is only served by rabble and I think that is the case here tonight, and when I hear the exhortations of my friends from my right, God forbid, God forbid that Manitoba would ever be served by the rabble and the exhortations that we have been receiving here tonight from my friends to the right. Sufficient for me to say, Mr. Chairman, I cannot in conscience, even though there may be lack of conscience to my right, support the resolution as proposed by the Honourable Member for Selkirk

MR. CHAIRMAN: Order please. Would the Honourable Member come to order, please.

MR. PAULLEY: and I suggest the vote now be taken.

MR. MOLGAT: Mr. Chairman, I really hadn't intended to speak in this debate, but my honourable friend spurs me on, and I don't think I would be able to cover my comments in the time available so I suggest that possibly the Leader of the House would like to call it 10 o'clock. --(Interjection)-- Well, it will give an opportunity for my honourable friend to re. . . . his position. He may want to switch again. Who knows? Who knows?

MR. LYON: Mr. Chairman, I move the committee rise.

MR. CHAIRMAN: Committee rise. Call in the Speaker. Mr. Speaker, the Committee of Supply has considered certain resolutions, has asked me to report same and begs leave to sit again.

IN SESSION

MR. WATT: Mr. Speaker, I beg to move, seconded by the Honourable Member for Springfield, that the Report of the Committee be received.

MR. SPEAKER presented the motion and after a voice vote declared the motion carried.

MR. LYON: Mr. Speaker, I beg to move, seconded by the Honourable Provincial Treasurer, that the House do now adjourn.

MR. SPEAKER presented the motion and after a voice vote declared the motion carried and the House adjourned until 2:30 o'clock Wednesday afternoon.